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Improved Public Transport for Disabled People

Volume I – Report

**Transport Research
Planning Group**



**IMPROVED PUBLIC TRANSPORT FOR DISABLED
PEOPLE**

VOL 1 - REPORT

TNS System Three Social Research
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- Edinburgh Mobility Unit staff, pupils and ex-pupils from The Royal Blind School, Edinburgh.
- Staff and residents at the Margaret Blackwood Housing complexes in Glasgow and Dundee.
- Staff and residents at the Thistle Foundation, Edinburgh
- Ladybank User Group/Age Concern
- Members of New Trinity Centre in Edinburgh
- Individuals and representatives of groups in Aberdeen contacted through the Scottish Accessible Transport Alliance

EXECUTIVE SUMMARY

INTRODUCTION

The Scottish Executive commissioned research to support their commitment to assessing public transport options for disabled people and to improve targeting of funding. Originally the focus of the required work was on the role of concessionary fares in relation to accessibility of transport for disabled travellers to inform the commitment laid out in the 2003 Scottish Executive Partnership Agreement. Advice from the Advisory Group led to the scope being broadened out at a very early stage. As a result, the focus of the research was changed to explore and assess a wide range of potential improvements to public transport for disabled people in relation to:

1. Difficulties in relation to the availability of transport
2. Difficulties in relation to the accessibility of transport
3. Information needs
4. Affordability
5. Fear of travel - confidence
6. Personal barriers to travel

Evidenced from the literature review carried out for this study demonstrates that improved access to public transport is a crucial element of trying to increase opportunities, reduce inequalities and generally improve the life quality of many groups in society. Previous research¹ has also indicated that there have been some improvements introduced in recent years. The introduction of recent Disability Discrimination legislation is a key step forward, but it is clear that many barriers still remain and that improvements are required in order to facilitate the use of practical, affordable and accessible transport for many people with illness and disability. Additionally, key demographic trends suggest that it is likely that difficulties with transport will extend to affect a larger proportion of the population. Therefore, research was required to identify what actions are still required to further improve the situation and to explore why previously identified ‘solutions’ had not necessarily been adopted or successful.

AIMS OF RESEARCH

This report presents the research findings of the large-scale project undertaken by TNS System Three Social Research (TNS), the Transport Research Institute at Napier University (TRi) and Transport and Travel Research Ltd. (TTR) The key objectives of the research were as follows:

- To examine the reality of disabled people’s travel patterns.
- To identify disabled people’s needs and priorities in relation to travel and transport.
- To identify what prevents people from travelling more easily, often and widely.
- The identification of the measures required to move towards equality of travel opportunity.
- The recommendation of how such measures can successfully be implemented.

¹ Transport Provision for Disabled People in Scotland: Progress since 1998; Research Findings No. 180, Scottish Executive Development Department; (Reid Howie Associates Ltd , 2004)

Discussions and feedback undertaken as part of the research has indicated a strong feeling, expressed by many individuals and organisations, that previous research has clearly identified the problems faced by disabled people in relation to travel and, to a certain extent, has also identified the necessary solutions. Indeed, there was a belief by some that no further research was required and that, instead, what was needed was action. However, consideration of the findings of previous research against the current situation indicates that, despite solutions being known, a clear problem still remains and many of the recommendations continue not to be implemented.

Therefore, in addition to the aims and objectives outlined above, this research was required to:

- Examine why previously identified travel solutions have not universally and successfully been implemented and the impact of this on disabled people.
- Identify how previous barriers to implementation could be overcome.
- Identify the priorities in relation to the introduction of initiatives in order to inform targeting and phasing in relation to funding.

RESEARCH METHODS

In order to comprehensively and systematically address all the research objectives, a broad range of research methods were adopted as follows:

- A comprehensive **literature review** in order to examine previous evidence and contribute to an understanding of what, if any, barriers had led to research recommendations not being implemented as quickly or as comprehensively as required.
- Analysis of the Travel Diary Element of the Scottish Household Survey (**SHS data**) to identify current travel patterns and compare the number and type of trips undertaken by disabled and non-disabled people in order to investigate whether key inequalities still exist between the two groups.
- A questionnaire survey of 700 people who are either disabled or have a long-term illness, randomly selected from previous respondents to the SHS (**TNS survey**). This survey examined the current travel behaviour of self-reported disabled adults, how their current travel behaviour compared with their preferred travel behaviour and examined their views on what schemes and initiatives would be most likely to bring about a real change in travel behaviour.
- A series of **case studies** involving in-depth examinations of existing schemes and initiatives aimed at improving transport provision. The aim of this element of the research was to learn from existing good practice, to identify how elements of existing schemes could be improved and more broadly implemented and examine why some initiatives are not successful in order to learn how to implement successful schemes.
- **Physical audits** examining how disabled people negotiate the built environment. This was particularly important to demonstrate the range of difficulties and obstacles that can exist on just one journey and that, therefore, any range of solutions needs to be holistic and comprehensive.

- Analysis of available data on **concessionary fares** was undertaken to assess the potential impact of fare concessions on the travel behaviour of disabled people.
- Finally, a **feedback exercise** was undertaken with transport providers and organisations representing disabled people to examine the relevance, practicality and usefulness of the solutions identified.

Two accompanying volumes of Annexes contain results from the different elements listed above and further details of the survey methodology.

KEY FINDINGS

Different travel experiences of disabled and non-disabled travellers

Data from a range of sources (literature review, Scottish Household Survey and the TNS survey of disabled adults) demonstrated that key inequalities still exist between disabled and non-disabled travellers, that many disabled adults have difficulty travelling and that the considerable majority of disabled adults would like to travel more than they currently do. Key findings in relation to differences include:

- A non-disabled adult is 50% more likely to make any kind of trip on a day than is a disabled adult (SHS).
- The average number of trips made per person per day was 1.7 by disabled people, 2.0 by people with a long term illness and 2.5 by people with no disability or long term illness (SHS).
- The biggest difference in trip making between disabled adults and non-disabled adults is not the way they make the trips or the reasons for the trips, but the fact that the former are less likely to make a trip at all. (SHS)
- In the light of the reduced number of trips made, disabled adults were less likely to report participating in a range of social activities (e.g. communicating with, visiting, or going out with friends or relatives) compared with adults with a long term illness, or with non-disabled adults (SHS).
- A significant minority of respondents in the sample, 3% (n=18) NEVER travelled at all (TNS).
- Essential journeys, such as shopping or visiting a doctor, were much more common among disabled adults than social visits (TNS).
- A key reason for disabled people not undertaking journeys is difficulty travelling – almost three-quarters of disabled people or those with a long term illness experience at least occasional difficulty travelling (TNS)
- Around 40% of respondents cannot undertake, or have difficulty undertaking, the most commonly made journey; almost two thirds cannot undertake a more complex or longer journey such as a weekend away (TNS).
- Seven in ten respondents in the TNS Survey would like to travel more than they currently did. This varied by a combination of age, type of disability and economic status (TNS).
- Maximum latent demand for each journey type are estimated to range between 9% for hospital appointments and 69% for taking a holiday (TNS)
- Minimum latent demand is estimated to range between 1% for hospital appointments and 13% for travelling on holiday. (TNS)

- The ‘true’ figures lie somewhere between the minimum and maximum estimates (TNS).

Barriers to travel

Despite barriers being identified in previous research, the range of evidence examined identified that many barriers which negatively impact on the travel behaviour of disabled people persist. In addition, a key issue identified is that, generally, more than one obstacle or barrier exists for each journey; the barriers vary by journey type and transport mode and those with different disabilities face different barriers. In essence the evidence shows that because the problem is multi-faceted, no one single ‘solution’ is likely to make a difference to the travel opportunities of disabled people in Scotland.

Some of the barriers are:

- Difficulties with existing conventional public transport provision in relation to physical accessibility.
- Difficulties travelling from home to point of public transport departure.
- Difficulties with the physical environment of public transport buildings and infrastructure e.g. railway stations, and the pedestrian environment e.g. kerbs, stairs and pavements.
- A lack of trust or confidence in the transport system – even in relation to basic features such as drivers using ramps.
- Personal safety issues relating to using public transport
- A lack of a reliable companion or information source for the entire journey

A key issue relating to the role of concessionary fares is the relationship between eligibility for certain types of travel and the travel needs of individuals. Many people, although eligible for concessionary travel on buses and trains cannot actually use such forms of transport but could use, for example, taxis for which they do not necessarily enjoy concessions.

The evidence suggests that although affordability is a key element of accessibility, concessionary fares alone are unlikely to have a major impact on travel behaviour unless other, perhaps more visible, barriers have been addressed

Possible and most popular transport solutions for disabled travellers

A range of sources were used to identify the potential solutions considered likely to have the biggest impact on disabled travellers. The TNS survey asked respondents to indicate what they believe would enable them to travel more easily or widely.

By far the most common suggestion in relation to what might help disabled people use *public transport* more is ‘transport from door to door/someone to pick me up’ suggesting that the problem is not with existing modes of transport but with getting to stations and bus stops from home and getting to the final destination at the other end.

Similarly, the options considered by the largest proportions of respondents as likely to encourage them to travel a lot more were ‘an on call, inexpensive and accessible door-to-door taxi service’ and an ‘on-call accessible door-to-door bus’. This further demonstrates that the

key element is the door-to-door factor, coupled with the flexibility of an ‘on-call or on-demand’ element. A further significant proportion of respondents suggested that ‘someone to accompany me’ would be the most important solution to their travel difficulties.

Although several specific suggestions were made in relation to improving some aspects of existing public transport provision – for example, ‘more frequent trains/buses’, ‘more direct buses/train routes’, these were less common and in fact, largely reflect the comments made by the general population in relation to what would make them use public transport more.

Broadly, it would suggest that apart from some marginal or minor changes (‘seats for use while in queues’, ‘more lifts and ramps at stations’ and ‘more help from staff on transport’), the significant changes required are not necessary to the functioning of the existing public transport system but rather an additional element to be overlaid enabling people to get to and from destinations and, in some cases to be accompanied while doing so.

Overall, evidence from the different sources examined for this extensive research indicated that there are a range of potential individual solutions which need to be introduced in some form as follows:

- The opportunity to be accompanied by a companion from door to destination spanning different modes of transport
- Adding on a flexible, user-friendly, fully accessible, affordable door-to-door element to existing transport provision (with appropriate concessions)
- Further provision and stricter enforcement of parking for disabled people
- Providing a reliable pre- and during journey information service encompassing all elements of travel (times, stairs, staffing, vehicle quality etc) and spanning different modes of transport
- Making existing conventional public transport provision easier to use in relation to:
 - physical accessibility
 - freedom from fear or intimidation
 - affordability
- Funding to enable access to personal adapted car or system of facilitating access to shared accessible car
- Improving the physical environment of public transport buildings and infrastructure e.g. railway stations, and the pedestrian environment e.g. kerbs, stairs
- Building customers’ confidence and trust that they can rely on all elements of a transport system that by its nature involves a chain of provision and guaranteeing accessibility and reliability across the whole journey

Any move towards creating equality of travel opportunity will require a range of co-ordinated schemes and initiatives tailored to both the local physical environment, the needs of specific people in any local area and dovetailing with existing transport opportunities. Additionally, all modes of transport need to be included – of particular importance in the Scottish context is ferry and air travel for example. A transport policy enabling a disabled traveller to arrive at a ferry port by bus but then not cover ferry accessibility would be a failure in the chain of provision.

For example, a danger would be for a local authority or regional transport authority to introduce a scheme such as a Dial a Bus scheme without a) assessing the potential impact on the travel opportunities for local disabled people b) without addressing other barriers such as information provision, pavement and other obstacle issues and linkages with other forms of transport and c) most importantly without ensuring the scheme formed part of an overall strategy to ensure sustainability of provision. In other words, a careful assessment of the current local transport system, the existence of particular schemes and the needs and particular barriers of local disabled people must be undertaken in order to match the kinds of solutions identified in the case studies and survey work with the actual needs of the local community.

CONCLUSIONS AND RECOMMENDATIONS

Key requirements for implementation

As referred to throughout the report, previous research² has clearly identified barriers and solutions. Despite this, key inequalities still exist demonstrating that more is required than has so far been achieved. Therefore, the report examines structural reasons for the limited changes to date, outlines the specific recommendations required in order to make a real difference to the travel opportunities and travel behaviour of disabled people and, in addition, discusses how such recommendations could best be introduced and implemented.

A coherent and comprehensive strategy for achieving equality of mobility should be an integral part of National, Regional and Local Transport Strategies rather than being separate or 'add-on'. Evidence from the literature review, the feedback exercise undertaken for this study and case study evidence indicates that unless the strategy is integrated, only piecemeal rather than comprehensive developments will occur, continuing to prevent real progress being made.

The sheer scale of some of the current problems needs to be recognised (for example the challenge of adapting all rail and bus stations or creating a comprehensive pre-journey information service) and realistic phased targets should be set in consultation with transport operators. Schemes aimed at information provision should be set within the broader context of 'knowledge expansion' as indicated in the feedback exercise. Information provision should be combined with initiatives to ensure that the services are reliable and operate as expected.

Linked to this, the inevitable cost of implementing some of the necessary changes and initiatives needs to be recognised by government. Setting duties and responsibilities for other agencies and transport operators without the provision of additional funding will not achieve the required outcomes. As indicated in the feedback from operators, funding is already in crisis and the current climate is more likely to see cutbacks rather than expansions in non-statutory services.

² See for example: Transport Provision for Disabled people in Scotland." (Henderson, S., and Henderson, B., Development Department Research Programme Research Findings No.76, 1999).; Transport Provision for Disabled People in Scotland: Progress since 1998; Research Findings No. 180, Scottish Executive Development Department; (Reid Howie Associates Ltd , 2004)

Duties for transport authorities and providers need to be enshrined in law and policed through the setting of targets that are in some way enforceable and are properly monitored. Such targets need to relate to measurable outcomes of transport initiatives rather than the provision of services. Contracts with transport operators should include specific relevant performance measures.

Such duties should specifically relate to the provision of the schemes and initiatives outlined above (and identified in previous research). Local authorities must have a duty to audit need for each and arrange for supply accordingly. This is likely to be aided by the Disability Equality Duty which should be a useful tool in enforcing and monitoring developments.

To be at all effective, monitoring needs to be focused on measuring outcomes rather than monitoring the existence of schemes and initiatives. This should be facilitated by a set of benchmarks against which to measure success. A national framework should be developed to guide local activity and direct outcome monitoring.

Schemes which require co-ordination across different transport operators and geographies must be overseen by regional and/or national authorities in order to ensure that the chain of accessibility is maintained.

In addition to the provision of schemes and initiatives discussed above, minimum national standards should be introduced in relation to staff training and awareness which again should be carefully monitored.

Concessionary fares policy should be reviewed in terms of priority in relation to the other substantial funding requirements highlighted above and to ensure the concessions are meeting the needs of disabled people. Additionally, there needs to be a requirement to measure the outcome and cost-effectiveness of concessionary fares in keeping with other transport initiatives. Policies and practice related to parking for disabled people should also be reviewed.

CHAPTER ONE: INTRODUCTION AND CONTEXT

INTRODUCTION

1.1 The Scottish Executive commissioned research to support their commitment to assessing public transport options for disabled people and to improve targeting of funding. Originally the focus of the required work was on the role of concessionary fares in relation to accessibility of transport for disabled travellers to inform the commitment laid out in the 2003 Scottish Executive Partnership Agreement³. Advice from the Advisory Group led to the scope being broadened out at a very early stage. As a result, the focus of the research was changed to explore and assess a wide range of potential improvements to public transport for disabled people in relation to:

1. Difficulties in relation to the availability of transport
2. Difficulties in relation to the accessibility of transport
3. Information needs
4. Affordability
5. Fear of travel - confidence
6. Personal barriers to travel

1.2 A broad definition of ‘public’ transport was adopted for the purposes of this study to include buses, trains, coaches and taxis.

1.3 Previous research has shown that improved access to public transport is a crucial element of trying to increase opportunities, reduce inequalities and generally improve the life quality of many groups in society. Previous research has also indicated that there have been some improvements introduced in recent years. The introduction of recent Disability Discrimination legislation is a key step forward, but it is clear that many barriers still remain and that improvements are required in order to facilitate the use of practical, affordable and accessible transport for many people with illness and disability. Additionally, key demographic trends suggest that it is likely that difficulties with transport will extend to affect a larger proportion of the population. Therefore, research was required to identify what actions are still needed to further improve the situation and to explore why previously identified ‘solutions’ had not necessarily been adopted or successful.

1.4 This report presents the research findings of the large-scale project undertaken by TNS System Three Social Research (TNS), the Transport Research Institute of Napier University (TRi) and Transport and Travel Research Ltd (TTR) against this background. The key objectives of the research were as follows:

- To examine the reality of disabled people’s travel patterns.
- To identify disabled people’s needs and priorities in relation to travel and transport
- To identify what prevents people from travelling more easily, often and widely
- The identification of the measures required to move towards equality of travel opportunity
- The recommendation of how such measures can successfully be implemented

³ Scottish Executive Partnerships Agreement (2003) Scottish Executive

WHY FURTHER RESEARCH?

1.5 Discussions and feedback undertaken as part of the research indicated a strong feeling, expressed by many individuals and organisations, that previous research has clearly identified the problems faced by disabled people in relation to travel and, to a certain extent, has also identified the necessary solutions. Indeed, there was a belief by some that no further research was required and instead what was needed was action. However, consideration of the findings of previous research against the current situation indicates that a clear problem still remains.

1.6 Perhaps the best way of demonstrating this is reference to two key pieces of research commissioned by the Scottish Executive. Henderson and Henderson undertook research in 1999 which identified particular areas required for improvement in relation to the provision and accessibility of transport for disabled travellers⁴. A follow up study was commissioned by the Scottish Executive in 2003 to identify and assess progress made by policy makers and transport operators since the earlier research was conducted in providing accessible transport for disabled people in Scotland⁵. Published in 2004, the study identified key policy developments that had taken place since 1998 including the establishment of the Mobility and Access Committee for Scotland (MACS) and the gradual implementation of the Disability Discrimination Act (DDA). While the researchers found that progress had been made in a number of areas, they noted that the pace of change in relation to DDA implementation was 'frustratingly slow for many disabled people' and that provision of transport that could be used by disabled people varied across Scotland.

1.7 Areas identified as ones in which progress has been made include the development and implementation of mandatory and voluntary access standards, which was seen to have had a significant positive impact on the accessibility of vehicles, although not all areas have accessible taxis available and not all improvements benefit all disabled people. The accessibility of some terminals, including ferry and air terminals, has also been improved. The rail industry approach of implementing systematic access auditing, was highlighted as a useful model of good practice to support the process of developing standards. Pilot, "demand responsive" services taking place in some areas of Scotland were seen to represent a new model of local transport for disabled people, which the researchers considered should be carefully evaluated.

1.8 Uncertainty about travelling, covering the reliability of all aspects of the journey was identified as a key barrier to travel and a cause of stress to disabled people. Cost was also found to remain a significant barrier. In particular the cost of taxis was high and availability of concessionary taxi fares was patchy. It was pointed out that the provision of concessionary fares on buses had little effect on those (very large number of) disabled people living in areas where there was a lack of suitable transport, who live in areas where there is little accessible public transport, who cannot use public transport, or who live some distance from services, and who are, therefore, reliant on personal transport. The researchers also suggested that provision of free off-peak travel for older people aged 60 and over that was available at the time of the research may be acting as a disincentive for disabled people to use buses due to

⁴ "Transport Provision for Disabled people in Scotland." (Henderson, S., and Henderson, B., Development Department Research Programme Research Findings No.76, 1999).

⁵Transport Provision for Disabled People in Scotland: Progress since 1998; Research Findings No. 180, Scottish Executive Development Department; (Reid Howie Associates Ltd , 2004)

higher passenger numbers overall. The main issue relating to personal, community and demand-responsive transport was that they have limited operation and are reliant on insecure funding streams.

1.9 The Reid Howie research⁶ itself identified a number of key priorities on the basis of their work with a range of individuals and organisations, again demonstrating the lack of progress so far. The following issues were those which researchers identified as being most commonly raised during the fieldwork and postal survey undertaken:

- The need for public transport to be consistent and dependable, with reasonable guarantees that services described as accessible will be so, and that assistance offered will be provided.
- The need for more accessible transport vehicles, particularly buses and taxis.
- The need for transport facilities to be more accessible.
- The need for the attitudes and approach of transport staff to be appropriate and positive.
- The need for the attitudes and approach of other passengers to be appropriate and positive.
- The need for the wider built environment to be accessible. Among the issues raised were shops, offices and other places of work, health centres, leisure centres and public buildings.
- The need for public transport to be affordable, particularly taxis in most areas, but also flights and ferries in island areas.
- The need for better enforcement of a wide range of issues, such as poor parking, designated spaces, as well as maintaining spaces on buses and trains.

1.10 As demonstrated by the brief review of just two projects, previous research has closely identified the main barriers faced by disabled travellers and has proposed a range of remedies and solutions, yet many of the difficulties still remain and many of the recommendations continue not to be implemented.

1.11 Therefore, in addition to the aims and objectives outlined above, this research was required to:

- Examine why previously identified travel solutions have not universally and successfully been implemented and the impact of this on disabled people
- Identify how previous barriers to implementation could be overcome
- Identify the priorities in relation to the introduction of initiatives in order to inform targeting and phasing in relation to funding.

1.12 As the research was designed to build on what has previously been learnt, rather than merely replicate previous research, it was important to use multiple research sources and methods in order to validate and contextualise any research findings. Additionally, in order not to discard or ignore existing valid research, it was important to include a review of previous research findings and to assess what have been the barriers to implementing

⁶ Transport Provision for Disabled People in Scotland: Progress since 1998; Research Findings No. 180, Scottish Executive Development Department; (Reid Howie Associates Ltd, 2004)

solutions. The research, therefore, comprised a broad and varied range of activities aimed at gathering a range of views, experiences and solutions including:

- A comprehensive **literature review** in order to examine previous evidence and contribute to an understanding of what, if any, barriers had led to research recommendations not being implemented as quickly or as comprehensively as required.
- Analysis of the Travel Diary Element of the Scottish Household Survey (**SHS data**) to identify current travel patterns and compare the number and type of trips undertaken by disabled and non-disabled people in order to investigate whether key inequalities still exist between the two groups.
- A questionnaire survey of 700 people who are either disabled or have a long-term illness, randomly selected from previous respondents to the SHS (**TNS survey**). This survey examined the current travel behaviour of self-reported disabled adults, how their current travel behaviour compares with their preferred travel behaviour and examined their views on what schemes and initiatives would be most likely to bring about a real change in travel behaviour.
- A series of **case studies** involving in-depth examinations of existing schemes and initiatives aimed at improving transport provision. The aim of this element of the research was to learn from existing good practice, to identify how elements of existing schemes could be improved and more broadly implemented and examine why some initiatives are not successful in order to learn how to implement successful schemes.
- **Physical audits** examining how disabled people negotiate the built environment. This was particularly important to demonstrate the range of difficulties and obstacles that can exist on just one journey and that, therefore, any range of solutions needs to be holistic and comprehensive.
- Analysis of available data on **concessionary fares** was undertaken to assess the potential impact of fare concessions on the travel behaviour of disabled people.
- Finally, a **feedback exercise** was undertaken with transport providers and organisations representing disabled people to examine the relevance, practicality and usefulness of the research findings.

1.13 Two volumes of Annexes accompany this report. The first of these includes the literature review, analysis of the SHS data and details of the survey methodology, the questionnaire and selected results from the TNS survey. The literature review was conducted early in the research. Some reports were provided to the researchers after it was completed. In some cases these have been included in the final report, though they do not appear in the literature review.

1.14 The second volume includes details of all of the best practice case studies and journey audits that were conducted. Some of the case studies and all of the journey audits are illustrated with photographs. It also includes details of the feedback exercise, which was designed to gather feedback in response to a document outlining some preliminary findings of the research. The document sent out and the feedback received are included in this Annex. In addition we received informal feedback throughout the research, and this has been included in the main report.

The lack of progress in relation to transport improvements for disabled travellers suggests key barriers to implementation of comprehensive and successful action. Additionally, within the realistic context of a difficult starting point against the significant future changes required, it is clear that some prioritisation in terms of the phasing in of initiatives is necessary. Given this context, the remainder of the report seeks to:

- Demonstrate the key inequalities that still exist in the travel patterns of disabled and non-disabled people and identify the latent demand for travel by disabled people (Chapter 2 – SHS Data and TNS Survey)
- Test the validity of the barriers and obstacles identified as reasons for these inequalities (Chapter 3 – SHS Data, TNS Survey, Audits, Feedback and Concessionary Fares Data)
- Examine the necessary solutions and how they are prioritised by disabled people (Chapter 4 - TNS Survey, Case Studies and Feedback)
- Identify how solutions can be implemented and who should take responsibility for different elements of a strategy aimed at achieving equality of travel opportunity in relation to travel (Chapter 5)

CHAPTER TWO: CURRENT TRAVEL PATTERNS OF DISABLED PEOPLE IN SCOTLAND

Objectives of Chapter 2:

- **To demonstrate the different travel patterns of disabled and non-disabled adults in Scotland using SHS Travel Diary data**
- **To demonstrate the extent to which disabled adults currently travel and find it difficult to travel using SHS data and TNS Survey data**
- **To identify how much more or widely disabled people want to travel drawing on TNS Survey**

INTRODUCTION

2.1 The overall aim of this chapter is to examine the reality of travel patterns of disabled people and illustrate that action is still clearly required to move towards equality in travel opportunities. The chapter draws on a range of sources with the aim of building up a clear picture of travel patterns and how these compare with those of non-disabled people, and vary among disabled people. Different types of journeys are examined – for example journeys to access healthcare, employment, shopping and social activities. As well as different journey types, differences in relation to type of disability, economic status, household type and geographic location are also examined. The chapter draws on the analysis of the Scottish Household Survey (SHS) and the quantitative survey of just over 700 people with long-term illness or disability undertaken for this study.

2.2 Evidence from both these sources is presented to compare the travel behaviour of disabled people with non-disabled people to demonstrate the considerable extent of the differences. The chapter also attempts to identify the extent to which the travel patterns of disabled people are currently constrained by the travel opportunities available and difficulties travelling and how much more travel might be undertaken if opportunities were different.

COMPARISON OF DISABLED AND NON-DISABLED TRAVEL BEHAVIOUR: SHS DATA

2.3 A key source of information about travel patterns in Scotland is the Travel Diary element of the SHS. The travel diary asks people about all the different trips that they made the previous day. There is a systematic under-recording of trip-making in the SHS diary for all those surveyed – it is thought that respondents generally make an additional 0.42 trips for every one trip that they report. This under-reporting is not thought to vary amongst sub-groups of respondents, however (i.e. disabled people are not more likely to under-report their trip making than are other people.) so it is valid to make comparisons between the travel patterns of disabled and non-disabled adults based on travel diary data. It is, however, not possible to compare SHS data with data from the TNS survey as the Travel Diary collates information on different trips over a particular period of time while the TNS survey considers the frequency of a specific set of journeys.

Trips on previous day

2.4 Approximately half (49%) of disabled adults did not make any journeys at all on the previous day, compared to 37% of adults with a long term illness and 25% of other adults (those who do not have a disability or long-term illness). This means that a non-disabled adult is 50% more likely to make any kind of trip on a day than is their disabled counterpart. The average number of trips made per person per day was 1.7, 2.0 and 2.5 for the three groups respectively (after correcting by 1.42 for the systematic under-reporting of trip making by all respondents to the SHS).

2.5 Fewer older⁷ disabled adults (59%), long term ill adults (46%) and non-disabled/ long term ill adults (37%) made any journeys on the previous day, compared to their younger counterparts. The percentage of disabled adults, adults with a long term illness and other adults not making trips varied according to SHS urban/rural classifications. Disabled adults living in all six urban/rural classifications categories made fewer trips compared to adults with a long term illness and other adults. Disabled adults living in remote rural areas made the fewest trips compared to disabled adults living in other locations.

Mode of travel and journey purpose

2.6 Access to a car is a key issue - disabled adults, adults with a long term illness and other adults without driving licences made fewer trips compared with those with driving licences.

2.7 When considering the trips that *were* made, only minor variations in the main modes of travel used by disabled adults, adults with a long term illness and non-disabled adults were observed. Over half of disabled adults (52%) adults with a long term illness (55%) and non-disabled/long term ill adults (53%) travelled by car, 17% of each group walked, about 10% travelled as car passengers and 10% made journeys by service bus. This is in spite of the fact that (see below) many more disabled adults than non-disabled adults reported difficulties with using bus services.

2.8 Of those respondents who did make trips on the previous day, only minor variations in the journey purposes of disabled adults, adults with a long term illness and non-disabled/LT adults were observed. Between 22% and 24% of trips made by all three groups were for shopping purposes, between 22% and 25% travelling to work and about 12% to visit friends/relatives. Thus it appears that the biggest difference in trip making between disabled and non-disabled adults is not the way that they make trips or the reason for the trips, but the fact that the former are much less likely to make a trip at all.

Bus use

2.9 There were some differences in bus use between disabled and non-disabled adults. Older disabled adults (63%) were less likely to have used local buses in the previous month compared with younger disabled adults (57%). In comparison younger non-disabled/long

⁷ Throughout the analysis of SHS data the term 'older adults' refer to those aged 60 or over; the term 'younger adults' refer to those under 60

term ill adults were less likely to have used local buses compared with older non-disabled/long term ill adults. No differences were observed between older and younger long term ill adults in bus use. Bus use was observed to vary between urban/rural locations. A greater number of disabled adults (83%), adults with a long term illness (78%) and non-disabled/long term ill adults (86%) reported not using their local bus services in remote rural areas compared with disabled adults (50%), adults with a long term illness (45%) and non-disabled/long term ill adults (43%) living in large urban areas.

2.10 A greater number of disabled adults (75%), adults with a long term illness (72%) and non-disabled/long term ill adults (75%) with valid driving licences reported not using their local bus services compared with disabled adults (50%), adults with a long term illness (39%) and non-disabled/long term ill adults (25%) without driving licences.

2.11 Disabled adults who use a wheelchair (93%) or a walking stick (72%) were less likely to use bus services compared with the general disabled adult population (60%), adults with a long term illness (55%) or non-disabled/long term ill (60%). 87% of disabled adults had not travelled by bus in the evening compared with 82% of adults with a long term illness and 77% of non-disabled/long term ill adults. Greater percentages of older disabled adults (90%), adults with a long term illness (87%) and non-disabled/long term ill adults (82%) had not travelled by bus in the evening compared with their younger counterparts.

Train use

2.12 92% of disabled adults did not use a train service in the last month, compared with 89% of adults with a long term illness and 81% of non-disabled/long term ill adults. Fewer older disabled adults (95%), adults with a long term illness (93%) and non-disabled/LT ill adults (87%) reported using trains compared with their younger counterparts.

Key findings from the analysis of SHS data include:

- A non-disabled adult is 50% more likely to make any kind of trip on a day than is a disabled adult.
- The average number of trips made per person per day was 1.7 by disabled people, 2.0 by people with a long term illness and 2.5 by people with no disability or long term illness.
- Older people across all groups made fewer trips than younger ones, as did those without a driving licence compared with those who had a licence.
- Disabled people made fewer trips in all types of urban and rural locations than those in other groups; disabled people in remote rural locations made the fewest trips.
- There was minor variation in number of trips made by mode of travel used and journey purpose.
- Buses were less likely to be used by older disabled adults than by younger ones. In contrast younger non-disabled adults were less likely to use buses than older ones
- Fewer older people in all groups used trains compared with younger people.
- Use of buses was less in remote rural areas than in large urban areas across all groups of respondents.
- Likelihood of using buses decreased for people who used mobility aids including wheelchairs and walking sticks

TRAVEL PATTERNS – FREQUENCY OF TRAVEL: TNS SURVEY

2.13 Having established that there are key differences in the travel behaviour between disabled and non-disabled adults – with disabled adults travelling significantly less than non-disabled adults, it is important to examine in further detail, the travel patterns of disabled adults to identify:

- Which journey types are undertaken by which people?
- What are the most common and least common journey types?
- What are the easiest and most difficult journey types?
- What kinds of trips would people like to undertake more often?

2.14 The TNS survey took the form of a face-to-face questionnaire survey of 700 people who described themselves as disabled or having a long-term illness, randomly selected from previous respondents to the SHS. The sample for the project specific survey includes people with a broad range of travel patterns and experiences. Before examining the detail of different travel patterns of those interviewed who do travel, it is worth noting that a significant minority of respondents in the sample NEVER travelled at all – 3% (n=18) said that they

never make any journeys. All of these respondents are either part of a pensioner couple household or live in a household not containing any other adults. The majority (11 out of 18) are pensioners and the remainder are adults of working age.

2.15 Table 2.1 shows the frequency of making certain journey types for the remainder of the sample who do travel. Putting aside journeys to work or education and to a day centre or similar (as these journey types only relate to a minority of the sample population), the results indicate that what might be deemed ‘essential journeys’ such as shopping or visiting a doctor are much more common than social visits. A considerable proportion of disabled people never travel for evening leisure purposes (64%), daytime leisure purposes (60%) or go away on holidays or for weekends (around 50% each). Visiting friends or relatives is more common suggesting that such journeys are shorter or easier (or are perhaps facilitated by friends or family).

Table 2.1: Frequency of undertaking different journey types

Base: all respondents undertaking at least one type of journey at least occasionally	Most Days %	At least once a week %	At least once a month %	A Few times a year %	Less Often %	Never %	No of resps.
Day centre or similar	1	6	2	*	1	90	687
Work/training or education	10	5	*	1	1	83	687
Evening leisure	2	15	9	7	4	64	687
Daytime leisure	9	20	5	3	4	60	687
Away for weekend	-	1	4	26	20	50	687
Away for holiday	-	-	-	13	37	49	687
Other medical visits	*	2	9	29	13	48	687
Convenience store/local shop	29	35	5	2	4	25	687
Personal business	2	48	23	5	3	20	687
Hospital appointments	*	2	9	43	29	17	687
Supermarket shopping	9	61	12	1	1	14	687
Visit friend or relatives	11	41	17	12	6	13	687
Visit Doctors	*	5	43	39	8	5	687

Source: TNS Survey 2005

Key:

* = less than 5%

- = 0

2.16 Annex 3 provides tables showing the frequency of undertaking different journey types by key characteristics such as urban/rural location, economic status, household type, presence of children etc. An example journey, visiting friends and relatives, is included below.

2.17 Analysis was carried out to compare frequency of undertaking journeys by the urban or rural location of respondent (for the purposes of this study, the Scottish Executives six-way rural-urban classification has been split into two). No clear patterns of difference between urban and rural dwellers were identified. Overall, there are broad similarities between urban and rural areas in patterns of data although there appears to be a general tendency for a greater proportion of those in urban areas never to make any journeys. However, for some journey types (for example convenience stores, supermarkets and visiting friends and relatives), those living in urban areas travel more often and for others (such as work or education and daytime leisure), rural dwellers do so. This suggests that the

explanation for the travel patterns is more complex than either disability or rural/urban location alone.

2.18 Generally, given the overall trend that disabled adults travel less than their non-disabled counterparts, travel patterns among disabled adults adhere to what would be expected from looking at travel patterns of the population as a whole with older, single pensioners travelling least and younger adults in paid employment or education, travelling most. For example, almost a fifth of single pensioners never visit friends or family, almost a third never visit a convenience store and over two-thirds never travel in the evenings for leisure purposes.

Table 2.2: Frequency of visiting friends or relatives by key variables

Base: All respondents in various categories undertaking at least one type of journey at least occasionally	Most Days %	At least once a week %	At least once a month %	A Few times a Year %	Less Often %	Never %	No of resps.
Economic status							
Paid Employment	12	65	11	6	4	2	83
Retired from Paid Work	11	40	16	14	5	14	345
Unable to work owing to illness or disability	10	35	19	11	9	16	191
Other	17	36	21	10	6	11	86
Household type							
Single pensioner	11	41	13	12	4	19	257
Pensioner couple	6	42	19	18	6	10	128
Single adult of working age	18	42	15	9	7	10	169
Couple of working age	11	40	24	9	8	8	121
Other	3	38	21	14	10	14	30
Type of disability							
Difficulty walking	28	35	5	2	4	26	438
Mental health problems or learning disabilities	29	38	4	4	5	21	89
Chest/heart problems	31	40	5	5	2	17	58
Other	18	38	15	12	6	12	117

Source: TNS Survey 2005

Key findings from the TNS survey on the analysis of travel patterns include:

- A significant minority of respondents in the sample, 3% (n=18) NEVER travelled at all.
- Essential journeys, such as shopping or visiting a doctor, were much more common than social visits.
- The explanation of travel patterns among disabled people and those with a long term illness appears to be more complex than either type of disability or location alone.
- Older single pensioners travel the least, and younger adults in paid employment or education travel the most.

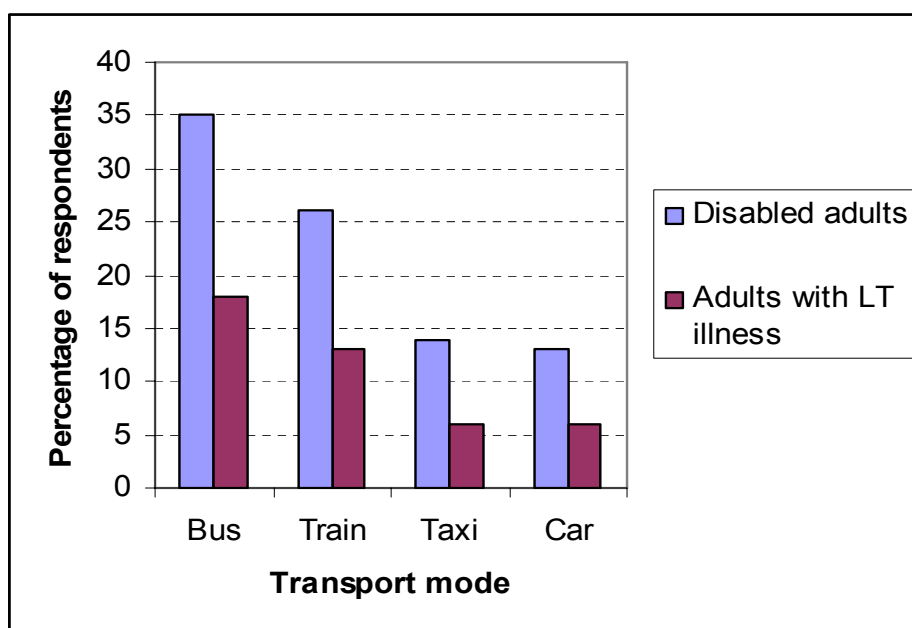
EASE OR DIFFICULTY OF TRAVEL: SHS DATA/TNS SURVEY

2.19 As the data from the SHS Travel Diary Data and the TNS Survey indicate, overall, disabled adults travel significantly less than their non-disabled counterparts. In addition, there are different travel patterns within the sample of disabled adults indicating that older adults and those with particular disabilities travel less than other disabled adults. It is evident that, particularly some older disabled adults have very limited social interactions owing to difficulties travelling and that this is much more pronounced than for older people in the non-disabled population.

2.20 The data also indicates that for many disabled adults, travel is much more difficult than for non-disabled adults. For example, data from the SHS demonstrates that over three quarters of disabled adults (78%) indicated they experienced difficulties in performing certain daily activities, compared to 56% of adults with a long term illness. The greatest difficulties experienced by disabled adults concerned climbing stairs (57%), walking for 10 minutes (54%) and standing for 10 minutes (51%). In comparison, 38% of adults with a long term illness stated they had difficult climbing stairs, 34% walking for 10 minutes and 30% standing for 10 minutes. That this clearly extends to difficulties travelling is evidenced by the fact that twice as many disabled adults reported difficulties using buses (35%), trains (26%), taxis (14%) and cars (13%) compared with adults with a long term illness.

2.21 For all activities, a greater percentage of older disabled and long term ill adults reported experiencing difficulties with each activity. The high proportion of disabled people requiring mobility aids further suggests that a significant proportion are likely to experience difficulty with travel - 15% of disabled adults and 8% of adults with a long term illness use a wheelchair, and 50% of disabled adults and 36% of adults with a long term illness use walking sticks/crutches.

Fig 2.1: % of disabled adults experiencing difficulties using transport modes



2.22 As analysis later in the chapter demonstrates, a key reason given by respondents in the TNS survey for not undertaking journeys is that the journey is too difficult and that a considerable proportion of disabled people do travel despite difficulties they might face. As noted above, 3% of all TNS Survey respondents NEVER travel as travelling is too difficult. In addition:

- 29% say that they always experience difficulty travelling;
- 24% sometimes experience difficulty travelling
- 19% occasionally experience difficulty travelling

2.23 Given the high proportion of respondents indicating that travelling is difficult, it is clear that many respondents are undertaking journeys despite such journeys being difficult. Table 2.3 shows the extent of such difficulty by those who do (at least occasionally) undertake journeys from the TNS survey data.

Table 2.3: Ease or difficulty of undertaking each journey type

Base: All those undertaking each type of journey at least occasionally	Very easy %	Fairly easy %	Neither easy nor difficult %	Fairly difficult %	Very difficult %	No of resps.
Hospital appointments	19	35	11	19	17	571
Away for holiday	19	30	13	21	16	349
Day centre or similar	33	41	7	6	13	69
Other medical visits	18	36	13	21	12	360
Away for weekend	22	35	14	19	11	346
Supermarket shopping	22	39	9	19	11	592
Visit friend or relatives	23	38	10	19	10	599
Visit Doctors	24	40	10	17	9	652
Evening leisure	29	42	14	10	6	250
Personal business	26	43	11	15	5	550
Convenience store/local shop	31	41	8	15	5	518
Work/training or education	30	35	13	17	4	119
Daytime leisure	29	46	9	13	3	277

Source: TNS Survey 2005

2.24 The table above shows, for example, that, although 64% of people frequently (either most days or at least once a week) visit a convenience shop, a fifth find the journey fairly or very difficult. Similarly, 87% ever visit friends or family but almost a third find travel for such visits difficult. As the table indicates, level of ease or difficulty varies by journey type reflecting the different forms of transport and distances involved in different trips.

2.25 In relation to the geographic location of respondents, perhaps surprisingly, there are no significant differences in ease of different journeys by urban/rural location and where differences do exist, these appear to reflect general differences between urban and rural locations (for example it is slightly more difficult for those in rural areas than in urban area to travel to a supermarket).

2.26 The following table, using one journey type as an example indicates that level of difficulty also varies depending on the demographic characteristics of respondents.

Table 2.4: Difficulty of journey to visit friends or relatives by demographic variables

Base: All respondents in various categories visiting friend and relatives at least occasionally	Very easy %	Fairly easy %	Neither easy nor difficult %	Fairly difficult %	Very difficult %	No of resps.
Economic status						
Paid Employment	37	37	4	14	9	83
Retired from Paid Work	23	40	12	16	9	345
Unable to work owing to illness or disability	18	34	11	24	13	191
Other	18	42	10	20	11	86
Household type						
Single pensioner	21	40	10	16	12	257
Pensioner couple	26	39	10	17	9	128
Single adult of working age	22	37	14	16	10	169
Couple of working age	22	35	7	25	11	121
Other	24	36	8	28	4	30

Source: TNS Survey 2005

2.27 Age combined with disability does appear to have a major effect on travel frequency but age appears to be much less strongly correlated with perceptions of the ease or difficulty of travelling. For example, while 28% of single pensioners and 26% of pensioner couples say they find it very or fairly difficult to visit friends or relatives, the proportions of single adults of working age or working couples are similar or higher (26% and 36% respectively). This pattern is repeated for journeys to convenience stores and for evening journeys for leisure purposes. This indicates that travelling is perceived to be difficult by a significant proportion of disabled adults.

2.28 So, to try and identify the extent of the impact of travel problems on the lives of disabled adults, we need to consider both *frequency of travel* and *difficulty with travel*. Looking first at a relatively common journey type (visiting convenience or local shop), overall, 3% of the sample never make any journeys (including this journey type), 25% of the remainder, never make this particular journey and one in five of those who make the journey find it either fairly or very difficult. This indicates that even for the most commonly undertaken journey, 40% of respondents either cannot undertake it or find it difficult to do so.

2.29 In relation to longer (and perhaps more complex journey types) such as going away for a weekend, 3% never travel, 50% never go away for the weekend and almost a third of those making such a journey find it difficult. Thus, just over 65% - that is almost two thirds of all disabled adults - either cannot go away for weekends or find it difficult to do so.

2.30 Key questions are what proportion of those who say they cannot currently travel could do so if travel opportunities were improved and what proportion of those who currently have difficulty travelling would travel more if travelling were easier?

2.31 These questions are investigated using the TNS survey data. It could be suggested that a proportion of respondents do not make particular journeys simply because they do not wish to do so. To address this, those who never make any journeys or never make specific journeys were asked if they would like to make particular journeys. In addition, those who made

journeys, but only infrequently, were asked if they would like to make these journeys more often.

2.32 Overall, 70% of the sample indicated that, if travel were not a difficulty, they would travel more than they currently did. Table 2.5 shows how this percentage varies by different characteristics such as age, type of disability and geographical location.

2.33 As Table 2.5 shows, there is no significant difference in relation to rural/urban location and wishing to travel more, rather, the differences appear to relate to age, type of disability and economic status (or more likely, a combination of the three). For example, 60% of single pensioners would like to travel more compared with 85% of single adults of working age. Similarly, 59% of those retired from paid work would like to travel more compared with 76% of those in paid work. Those with mental health problems or learning disabilities would like to travel more compared with those with other illnesses or disabilities.

Table 2.5: Percentage of respondents in each category who would like to travel more

Base: All respondents in various categories undertaking at least one type of journey at least occasionally	Would like to travel more %	No of respondents
Urban/Rural		
Urban	71	591
Rural	67	109
Household Type		
Single pensioner	60	257
Pensioner couple	76	128
Single adult of working age	85	169
Couple of working age	83	121
Other	70	30
Presence of children		
Have children	85	84
No children in household	68	621
Economic Status		
Paid Employment	76	83
Retired from Paid Work	59	345
Unable to work owing to illness or disability	83	191
Other	83	86
Type of disability		
Difficulty walking	69	438
Mental health problems or learning disabilities	80	89
Chest/heart problems	76	58
Other	68	66
All	70	705

Source: TNS Survey 2005

2.34 So, what are the key characteristics of the people who wish to travel more and what are the key characteristics of those who are unlikely to travel more? As Table 2.6 shows, there are some similarities and differences between the two sub-samples. The samples do not really differ in relation to rural or urban location or, significantly, between adults with different disabilities. Those who would like to travel more are more often of working age than are those who don't want to travel more. The reverse is true when pensioners are considered.

Table 2.6: Profile of those who would and would not like to travel more

Percentages	Characteristics of those who would like to travel more %	Characteristics of those who don't want to travel more %
Urban/Rural		
Urban	85	83
Rural	15	17
Household Type		
Single pensioner	32	47
Pensioner couple	16	24
Single adult of working age	27	18
Couple of working age	52	9
Other	5	2
Presence of children		
Have children	14	6
No children in household	86	94
Economic Status		
Paid Employment	13	10
Retired from Paid Work	41	68
Unable to work owing to illness or disability	32	15
Other	14	7
Type of disability		
Difficulty walking	61	66
Mental health problems or learning disabilities	14	9
Chest/heart problems	9	7
Other	16	19
Bases	495	210

Source: TNS Survey 2005

Key findings about the ease or difficulty of travel include:

- A key reason for disabled people not undertaking journeys is difficulty travelling – almost three-quarters of disabled people or those with a long term illness experience at least occasional difficulty travelling
- Difficulty travelling is as common for disabled people in urban and rural areas (but it must be noted that there are key differences between travel behaviour and opportunities between urban and rural areas common to everyone living in these areas)
- While age combined with disability affects frequency of travel, it does not appear to have an effect on perceptions of ease or difficulty of travel.
- Around 40% of respondents cannot undertake, or have difficulty undertaking, the most commonly made journey; almost two-thirds cannot undertake a more complex or longer journey such as a weekend away.
- Seven in ten respondents in the TNS Survey would like to travel more than they currently do. This varied by a combination of age, type of disability and economic status.

LATENT DEMAND ACROSS JOURNEY TYPES: TNS SURVEY

2.35 The discussion above has been about travelling in general; the following section examines specific types of journey. Table 2.7 shows the current position of survey respondents in relation to all the different journeys covered in the survey and is a good starting point from which to try and tease out levels of latent demand for travel as it indicates the percentage who make the particular journey as often as they need or want and the percentage who do not need to make the journey. These two figures combined immediately indicate from where there will be no additional demand – for example, overall, 8% of respondents travel to a day centre as much as they currently need to and 55% do not need to travel to a day centre – therefore, there is only any possible additional demand for such a journey from 37% of all disabled adults. The next stage is to assess or estimate what percentage of the remainder might wish to make particular journeys.

2.36 The final column in Table 2.7 shows the maximum potential latent demand for journeys assuming that all those who do not want to or do not need to make journeys do not do so owing to difficulties travelling⁸. However, this assumption is clearly an overestimate as, for example, it assumes that all respondents would, if possible, like to travel to work or education or to visit a day care centre which is clearly not the case. In order to get a more realistic estimate, it is necessary to further examine the reasons behind the figures shown in the table.

Table 2.7: View and status of each journey type by respondent

	Make journey as much as like or need (A)	Would like to make journey more often (B)	Don't want to make journey (C)	Don't need to make journey (D)	Not able to make journey (E)	Max possible latent demand (F) (B+C+ E)
Day centre or similar	8	2	26	55	9	37
Work/training or education	13	4	8	49	26	38
Evening leisure	27	8	28	8	29	65
Daytime leisure	30	10	18	10	33	61
Away for weekend	27	22	21	6	25	68
Away for holiday	27	23	17	4	29	69
Other medical visits	47	4	2	42	5	11
Convenience store/local shop	63	10	4	11	12	26
Personal business	67	11	1	11	11	23
Hospital appointments	77	4	1	15	4	9
Supermarket shopping	68	16	1	4	12	29
Visit friend or relatives	50	35	1	3	11	47
Visit Doctors	86	6	0	1	6	12

Source: TNS Survey 2005

⁸ Those saying they don't want to make a journey are included on the basis that experience has shown demand for a transport service increase up to three times on demand stated prior to that service being introduced.

2.37 So, a starting point is looking at those who do make journeys but who would like to make them more often and do not because of difficulties travelling. This enables us to make sure we are not overstating the latent demand by including those who would like to make the journey more often but do not do so owing to a reason other than difficulties travelling. Next, we need to look at what percentage of those who don't want to make journeys say this is because of difficulties travelling. Finally, we need to consider what percentage of those who say they can't make the journey say this is owing to difficulties travelling. The results of this analysis are displayed in Table 2.8.

Table 2.8: Percentage saying journey not made owing to difficulties with travelling

	Travel is reason don't make journey more (A)	Travel is reason don't want to make the journey at all (B)	Travel is the reason can't make the journey (C)	Total (D) (A+B+C)
Day centre or similar	0	3	0	3
Work/training or education	1	1	5	7
Evening leisure	0	3	6	9
Daytime leisure	2	2	6	10
Away for weekend	5	2	5	12
Away for holiday	4	2	7	13
Other medical visits	1	0	0	2
Convenience store/local shop	2	0	2	4
Personal business	3	0	2	5
Hospital appointments	1	0	0	1
Supermarket shopping	4	0	2	6
Visit friend or relatives	11	0	2	12
Visit Doctors	2	0	1	2

Source: TNS Survey 2005

2.38 The figures presented in Table 2.8 provide the minimum percentage who say they would make additional journeys if travel were less difficult as it excludes all those giving other reasons for not wanting, needing or being able to make the journey. The actual percentage will lie between the minimums shown in column D of Table 2.8 and the maximums shown in Column F in Table 2.7 above (so for example, in relation to going away for a weekend, the figure will be between 12% and 68%) as it can be argued that an unmeasurable proportion of the difference between the two figures is owing to respondents' perceptions of current transport options.

Key findings about latent demand include:

- Maximum latent demand for each journey type are estimated to range between 9% for hospital appointments and 69% for taking a holiday
- Minimum latent demand is estimated to range between 1% for hospital appointments and 13% for travelling on holiday
- The 'true' figures lie somewhere between the minimum and maximum estimates.

SUMMARY

Differing travel patterns

2.39 This chapter has demonstrated that disabled adults travel significantly less than non-disabled adults. In fact, SHS Travel Diary data indicates that a non-disabled adult is 50% more likely to make any kind of trip on a day than is their disabled counterpart. Further analysis of data from the SHS in relation to accessing services and facilities suggests that this difference in travel patterns contributes to levels of social exclusion. For example, data from the SHS indicates that a greater percentage of disabled adults viewed a range of local services (outpatients, doctor's, bank, public transport, chemists, post office and grocery shops) as inconvenient to use compared with adults with a long term illness and other adults. Almost 20% of disabled adults viewed public transport as inconvenient compared with 14% of adults with a long term illness and non-disabled/long term ill adults. A greater percentage of older disabled adults and adults with a long term illness rated all seven services as inconvenient compared with their younger counterparts. Disabled adults were less likely to report participating in a range of social activities (i.e. communicating with, visiting, going out with, or having round, friends or relatives) compared with adults with a long term illness, or with non-disabled adults.

Difficulty travelling

2.40 The data also indicates that a significant proportion of disabled adults who do travel find it difficult and that a proportion do not travel or do not travel as much as they wish owing to difficulties with travel. For example, in relation to a relatively common journey type (visiting convenience or local shop), overall, the TNS survey data demonstrated that 40% of respondents either cannot undertake it or find it difficult to do so. The proportion is even higher for longer and perhaps more complex journeys such as going away for a weekend where the data suggest that just over 65% - that is almost two-thirds of all disabled adults - either cannot go away for weekends or find it difficult to do so.

Latent Demand

2.41 Finally, TNS survey data indicates that, overall, 70% of the sample would, if travel were not a difficulty, travel more than they currently do. However, looking at specific journeys indicates that potential latent demand is slightly lower because of peoples' differing needs and preferences in relation to travel. Taking 'visiting friends and relatives, as an example, Table 2.7 indicates that the maximum possible increase in demand for such a journey is 47% (comprising those who either state that they would like to make such a journey more than they currently do, that they don't want to make the journey and those who state that they are currently unable to do so). However, as Table 2.8 indicates, not all those who say they are currently unable to make such a journey give travel as the reason so we need to reduce the estimate slightly to reflect this. Therefore, focusing only on those who say difficulty with travel is the reason for not making the journey, not wanting to make the journey or not making it as frequently as required reduces the overall estimate to 12%. The latter is likely to be an underestimate and the former an overestimate – the true figure is likely to lie between 12% and 47%

CHAPTER THREE: BARRIERS TO TRAVEL

Objectives of Chapter 3:

To examine key negative factors which affect and contribute towards disabled peoples' travel patterns;

To investigate what prevents people from travelling more easily, often and widely;

To identify the key barriers and obstacles facing disabled travellers;

drawing on:

Scottish Household Survey Data

Literature Review

Practical Audits

TNS Survey of disabled people

Concessionary fare data

3.1 Chapter 2 presented clear evidence showing the different travel patterns of disabled and non-disabled adults and demonstrated that the majority of disabled adults want to travel more than they do currently. This chapter examines which factors contribute to the travel behaviour of disabled people and what barriers and obstacles exist to prevent travel parity between disabled and non-disabled adults. Several elements of the proposed research feed into meeting this objective. Firstly, secondary evidence is presented drawing on the SHS and the review of literature undertaken for this project. Secondly, additional primary evidence is presented drawing on a range of practical audits undertaken as joint exercises between disabled travellers and researchers for the current research. Thirdly, evidence is presented from the TNS quantitative survey of disabled people. Finally, the chapter discusses the role of concessionary fares drawing on a range of evidence. Concessionary fares are treated separately owing to the importance previously attached to their role by policy makers.

EVIDENCE FROM PREVIOUS STUDIES: SHS DATA

3.2 According to the recent Scottish Household Survey (SHS), a quarter of respondents (26.6%) reported having "any long-standing illness, health problem or disability that limits your daily activities or the kind of work that you can do", with 7.6% of the sample reporting difficulty using a bus, 10.9% difficulty standing for 10 minutes and 11.9% difficulty walking for 10 minutes. Factor analysis of the data found "difficulty using a bus" to be correlated with two separate groups of items: one factor grouped difficulty with bus use with difficulties with standing, walking and climbing stairs, and a second factor grouped together four transport modes - taxi, car, train, bus - suggesting they present a common difficulty to some people. Analysis was also carried out to identify the factors influencing whether respondents had used the bus in the last month. Whether the respondent's household did or did not have access to a car emerged as the most powerful predictor of bus use in the previous month. Amongst those with no car access, difficulty with using a bus made the most difference (reducing usage from 67% to 20%).

3.3 Evidence from the SHS in relation to the difficulties and barriers associated with travelling for disabled people suggests some key issues relating to accessibility and safety on public transport.

Barriers to bus use

3.4 An analysis of SHS data around reasons why people do not use public transport at all, or more than they do at present showed some marked differences between disabled and non-disabled people. Respondents who indicated that they have used local bus services once per week or less, or not at all, were asked “In general, what discourages you from using buses more often than you do?” Respondents who gave more than one reason were then asked to indicate their main reason that discouraged them from using buses more often.

- 46% of disabled adults stated that health reasons discouraged them from using buses more often compared to 30% of long term ill adults and 2% of non-disabled/long term ill adults. Difficulty accessing buses was also an important reason for disabled people not to use buses more (11% gave this reason);
- A greater percentage of older disabled adults, and older long term ill adults, cited health reasons and difficulty accessing buses (13%) as main reasons for not using public transport more, compared to their younger counterparts;
- In contrast, the reason cited by the greatest number of non-disabled/long term ill adults for not using public transport more was that they use their own car, although 20% of disabled adults and 23% of long term ill adults also cited this reason.

Table 3.1: Reasons for not using buses generally by age

	Disabled adults			Long term ill adults			Non-disabled/ long term ill adults		
	All	< 60	> 60	All	< 60	> 60	All	< 60	> 60
Health reasons	46	33	55	30	19	39	2	<1	6
Use own car	20	23	18	23	23	24	34	34	36
No need	18	18	18	21	19	22	21	20	28
Accessing buses	11	8	13	4	2	6	<1	<1	1
Inconvenient	8	11	7	8	10	6	17	18	12
Lack of service	6	8	5	8	10	6	12	12	11
Use often as need	6	7	5	8	8	7	7	7	7
Takes too long	4	6	2	6	9	4	15	17	9
Prefer to walk	4	6	3	8	11	5	8	8	8
No direct route	3	5	2	5	6	4	10	11	6
Cost	3	6	<1	4	7	<1	6	7	1
N =	2728	1113	1614	2001	928	1072	17014	1350	3468

NB: Only reasons cited by over 5% of either disabled adults, adults with a long term illness or non-disabled/long term ill adults are presented in table

3.5 Looking specifically at disabled people who use certain mobility aids, their bus use is seen to be significantly lower than the population as a whole.

Table 3.2: Frequency of bus use; by use of mobility aid

Frequency of bus use	Wheelchair			Walking stick/frame		
	All	< 60	> 60	All	< 60	> 60
Every day	<1	0	1	1	2	1
Almost every day	<1	0	2	3	2	3
2-3 times per week	2	2	2	10	10	9
Once per week	<1	1	<1	6	6	6
Once per fortnight	<1	0	<1	3	5	2
Once per month	<1	6	2	4	6	3
Not used	92	91	92	74	69	75
N =	294	88	206	1160	238	922

3.6 As the following table shows, it also appears that perceptions of neighbourhood safety, and safety on public transport, are worse amongst disabled people and people with a long term illness, compared with the wider population. In fact, the proportion of disabled travellers feeling ‘not safe at all’ when travelling by bus in the evening is approximately double the proportion of non-disabled travellers.

Table 3.3: Perceived safety when travelling by bus, train and walking at night

	Disabled adults			Long term ill adults			Non-disabled/long term ill adults		
	All	< 60	>60	All	> 60	< 60	All	> 60	< 60
Safety from crime when travelling by bus in the evening									
Not particularly safe	14	15	14	18	18	17	13	13	14
Not safe at all	13	11	15	14	11	16	6	6	8
Safety from crime when travelling by train in the evening									
Not particularly safe	14	15	13	16	17	16	13	13	14
Not safe at all	14	12	15	15	12	17	7	6	8
Safety from crime when walking in the neighbourhood after dark									
A bit unsafe	17	17	17	20	18	21	14	13	17
Very unsafe	15	13	17	13	12	14	6	5	8
N	3641	1524	2119	2801	1292	1507	22285	17200	5085

Key findings from SHS data on barriers include:

- Difficulty using a bus is correlated with mobility issues (such as difficulties walking, standing and climbing stairs) and with difficulties using other forms of transport (taxi, car or train).
- For almost half of disabled people and almost a third of those with a long term illness, health reasons discouraged them from using public transport.
- People using wheelchairs or walking sticks were significantly less likely to use busses than the population as a whole
- The proportion of disabled travellers feeling ‘not safe at all’ when travelling by bus in the evening is approximately double the proportion of non-disabled travellers.

EVIDENCE FROM PREVIOUS STUDIES: LITERATURE REVIEW

3.7 Part of this study has involved an analysis of previous research and literature examining some of the key barriers and obstacles preventing transport being more accessible for disabled people in Scotland. These barriers and obstacles have been assessed on the basis of research studies, good practice guidelines and communication with transport providers in the field. For example, Meadows⁹ suggests that there are three categories of inhibitors to movement for disabled people; these are “Personal” (pertaining to the individual’s health, functional capabilities and expectations for mobility), “Environmental” (weather conditions, physical accessibility of the environment) and “Trip-related” (length of the trip, the cost of travel, the reliability and availability of transport services provided).

3.8 The literature review identified a number of barriers related to information provision; accessing the public transport network and using public transport. These are described in more detail below:

Information Provision

3.9 The availability of information before and during a journey can have a profound effect on the passenger’s experience of that journey and can even be a determining factor of a disabled person’s decision to travel or not. This is regardless of the accessibility of vehicles and infrastructure, and is demonstrated by several UK research studies. Most recent was the investigation of disabled people’s information requirements, commissioned by the Department for Transport in 2003¹⁰. A general finding from this research was that there was generally an inverse relationship between people’s propensity to be able to travel confidently and independently, and the importance they place on the requirement for pre-trip information. For example, participants in the research who were deaf or hard of hearing, who were among those most able to travel independently, put a relatively low level of importance on pre-trip information, and were more concerned about travel information during their trip. Conversely, the people with learning disabilities and wheelchair users, who were least able to travel independently, regarded accurate and reliable pre-trip information as being crucial before feeling confident to begin a journey. Just as it is important for there to be an unbroken “chain of accessibility” for a journey to be feasible, disabled travellers place greater importance than non-disabled people on the need for information to be available on each leg of a journey.

Accessing the Public Transport Network

3.10 An important element of the accessibility of public transport is the ease with which people can physically access the network; typically, this refers to how easy it is for people to travel from their home to the nearest bus stop or train station, and for disabled people the important factors are the distance they need to travel in order to achieve this, and the quality of the pedestrian environment.

⁹ “Living and Working in the City for the Handicapped. Getting Around: A Perspective from Experience.” Eurohandicap Conference, Montpellier, (Meadows, T, June 1992).

¹⁰ “Traveline and Transport Direct Disabilities Customer Research.” (Department for Transport, April 2004).

3.11 Research carried out in 1994 as a follow-up to the London Area Travel Survey¹¹ found, on the basis of 2,417 interviews, that almost a quarter of the sample could not walk for more than five minutes (which equates to approximately 50 metres, or less). Similarly, about a third of the sample could not stand for more than five minutes. Combining information on interviewees' ability to walk and stand, it was deduced that 68% of the sample would be able to manage a walk of 50 metres and a wait of one minute, whilst 40% could manage a 200 metre walk and a five minute wait. These findings suggest that, in order for local public transport services to be usable for all members of the public, there is a requirement for them to have both a high penetration into residential neighbourhoods, and be of high frequency, to minimise the time during which people need to stand and wait. (The same is true for services needing to have destinations close to where people wish to travel, in order to minimise walking distance at the end of the journey).

3.12 The quality of the pedestrian environment is also very important in enabling disabled people to access the public transport network, since many obstacles might be encountered in the street environment. For instance, blind and partially sighted people can not use kerbs to guide them, or get on buses, if parked cars or goods vehicles block their way. Blind and partially sighted people and wheelchair users who have participated in research have often expressed their frustration at the lack of enforcement to prevent other road users from parking in such a way. People's experiences of walking confirm Freund's (2001)¹² assertion concerning the "disabling city", where the car has dominated public spaces to the exclusion and disablement of those without access to a car, with walkers encountering barriers and "walker unfriendly" spaces.

3.13 Signage and tactile paving¹³ are also essential for blind and partially sighted people, as they make them aware of physical features in the environment such as lamp-posts, bollards, bus stops, a pedestrian crossing or irregular changes to the pavement (such as a dropped kerb). The lack of tactile markings can make walking very dangerous. Research¹⁴ has shown that blind and partially sighted people can often mistake lamp-posts for bus stops because of the lack of tactile paving to guide them. Other obstacles on pavements include parked cars, uneven surfaces, rubbish bins, shop frontages, other pedestrians and cyclists. Generally, blind and partially sighted people need to be able to walk in a straight line, preferably along the roadside or a wall, but physical barriers can make this task extremely difficult. These obstacles are also a major problem for wheelchair and scooter users (including manual and powered mobility vehicles) and often cause them to use a longer route, drive on grass or drive on the road. Research commissioned by the Department for Transport into the use of powered wheelchairs and scooters in the UK¹⁵, has found the poor maintenance of pavements and footways to be a major obstacle for users of such mobility aids. In fact, a questionnaire survey conducted for this project indicated that 86% of users of Class 2 powered wheelchairs and scooters (i.e. "pavement vehicles" designed to travel at no

¹¹"Disability and Mobility in London: A Follow up to the London Area Travel Survey" (Oxley, P. and Alexander, J., Cranfield Institute of Technology, January 1994).

¹² "Bodies, Disability and Spaces: the Social Model and Disabling Spatial Organisations", *Disability & Society*, 16, pp. 689-706 (Freund, P, 2001)

¹³ "Guidance on the use of tactile paving surfaces: Guidance for local authorities on the use of tactile surfaces on pavements". (Department for Transport, Published in January 1999, modified in April 2005).

¹⁴ "Researching the experiences and needs of blind and partially sighted people in the West Midlands." (Centro, 2004). West Midlands Multi-Modal Study (2001) for the Government Office for the West Midlands

¹⁵ "Review of Class 2 and Class 3 Powered Wheelchairs and Scooters (Invalid Carriages)" (Department for Transport, Forthcoming).

more than 4 mph) said that they used their vehicle on the road on some occasions, adding that this was mainly due to obstacles encountered on pavements.

3.14 Pedestrian crossing facilities are extremely important to blind and partially sighted people, but research has found that their experience of them can be negative, due to inconsistent design within and between regions, the absence of tactile paving and audio information at some crossings and insufficient time being allowed to enable pedestrians to safely cross the road.

3.15 There is evidence to suggest that such barriers can reduce a person's confidence to travel alone, even to walk to shops that are local to that person's home. These types of barriers can also result in disabled people relying on lifts from friends and family, or Community Transport services to access local amenities. The limitation of such means is that the user does not have the freedom of choice to travel with spontaneity, nor is there the flexibility in when and where the user can travel for purposes such as shopping, leisure and social events, as well as going to work or attending college.

3.16 Other problems within the pedestrian environment that have a major impact on people with walking difficulties, and in particular blind and partially sighted people, involve the relocation of bus stops as a result of service disruptions – a common impact of regeneration and construction work. Disabled people need to be made aware of such changes before they make a journey, otherwise, as research has indicated, it could lead to many people not making the journey in the future, especially if it reduces their confidence to travel alone.

3.17 Just as the pedestrian environment is important in providing access to the bus, tram and rail network, access to the taxi and private hire service industries relies on accessible means for making bookings. Many disabled people find taxis and private hire vehicles to be the most appropriate and accessible form of transport – this was a finding of research commissioned by the Disabled Persons Transport Advisory Committee (DPTAC)¹⁶ in their national survey of over 900 disabled people (including people with physical disabilities, people who were deaf or hard of hearing and people who were blind or partially sighted). This is because of the convenience and safety of the door-to-door service being offered by these means of transport, and also the facility of being able to book a (private hire) car at any time of day, (which is not possible with demand responsive services offered by the Community Transport sector). It is especially important, therefore, that such transport resources are made available to as many people as possible. Affordability is acknowledged to be a very important aspect in mobility for disabled people – and taxis and private hire services are, without subsidy, more expensive than, say, buses.

Using public transport

3.18 Key issues relating to the accessibility of public transport vehicles emerging from previous research relate to:¹⁷ perceptions of a lack of consistency in relation to customer care,

¹⁶ "Attitudes of Disabled People to Public Transport", Research Study Conducted for the Disabled Persons Advisory Committee (DPTAC), (MORI, 2001).

¹⁷ These findings are confirmed by research conducted by DPTAC into the transport needs of disabled people, and studies undertaken for the Department for Transport, the Scottish Executive (ref: Transport Provision for Disabled People in Scotland: Progress since 1998), and as part of the West Midlands Multi-Modal Study.

driver courtesy and communication. There are also problems with a lack of consistency of provision of audio and visual information which increases the passenger's reliance on drivers. The physical accessibility of public transport vehicles is also a difficulty for some who have a need for low-floor buses, guaranteed space allocation and seats at the front of the bus.

3.19 There are some problems relating to ticketing – in particular, handling cash to pay for fares on-board a vehicle can be problematic for some people, including blind and partially sighted people and people with learning disabilities. Additionally there is a lack of, or perception of lack of, safety and feeling of personal security. Research studies for DPTAC and the Department for Transport have found that there is an apprehension among many disabled people of being verbally or physically abused when using public transport (e.g. waiting at bus stops and in train stations, and on-vehicle) which can inhibit public transport use, especially at certain times of the day (e.g. after school hours and during the evening). Some 40% of disabled people in England and Wales say they are fearful of travelling by public transport, and 46% say that improvements to public transport would have a positive improvement on their life (DPTAC, 2002).

3.20 Another common concern of disabled people in public transport environments – particularly people who are deaf or hard of hearing, and people with learning disabilities who are at risk of becoming confused – is what might happen to them in an emergency evacuation situation. In the case of people who are deaf or hard of hearing, this is because alarms are often solely audible.

The key barriers highlighted by the literature review included:

- The lack of provision of accurate and timely information, both pre-trip and during the journey, in accessible formats is a key barrier to many disabled travellers.
- A key barrier is accessibility of the public transport network including problems associated with people being able to reach the nearest point of this network (a bus stop, for example) from their home; the quality of the pedestrian environment; and accessing more flexible door-to-door services.
- Using public transport, including both the physical accessibility of vehicles and the lack of availability or inconsistency of public transport staff to support the individual needs of disabled people when they are using public transport.

PRIMARY EVIDENCE: JOURNEY AUDITS

3.21 As indicated in the literature review, there are a complex range of considerations and potential barriers to consider. This is further supported by the audit evidence which also indicates the multi-faceted nature of the potential barriers and the need for packages of planned and tailored responses. It is important to point out that, as all the audits involved those who do travel (albeit some with carers), have access to public transport and whose disability does enable them to travel (albeit with some difficulties), the audits focus specifically on barriers people encounter while travelling, rather than those that may prevent people from travelling.

3.22 Six audits were conducted with disabled people in various locations in the Central Belt and in Dundee. The purpose of the audits was to assess the quality of the street

environment linking the disabled person's home to the nearest bus stop, and from the destination bus stop for a "typical" journey to the final destination. In all but one of the audits this was the trip from the disabled person's home to city centre shops or a city centre station. The assessment consisted of two elements: a checklist evaluation by Napier researchers of the street environment (quality of footways, dropped kerbs, crossings, crossing time, tactile paving, audible signals, bus stop clearways, bus information at bus stops etc.); and a user evaluation by means of a structured questionnaire. The motivation for the audits was twofold: firstly, previous work (as identified in the literature review) has shown that the street environment is as much a barrier to many disabled people's use of public transport as is the public transport itself; and, secondly, because the Disability Discrimination Act 2005 may put a duty on local authorities to carry out similar audits and improve the accessibility of their street environments. Full details of the various audits, including accompanying photographs, are included in Annex Five. Five of them are summarised below.

Audit One

3.23 Audit One, which was undertaken by two disabled people using a wheelchair accompanied by two researchers, indicates the range of barriers and obstacles involved in a short trip from the city centre home of the respondents to shops in the City by bus, and then return without the use of transport.

3.24 The journey by wheelchair from home to the bus stop (around 300 metres) involved some difficulty caused by uneven and cracked paving – this made movement difficult and had, on previous occasions, caused a wheelchair user to get stuck. An additional difficulty was caused by the timing on a pedestrian crossing which the respondents felt did not allow adequate time to cross without rushing. The actual road crossing was also difficult owing to the cracked surface and a high kerb. The remaining journey to the bus stop was made more of a challenge by the placing of utility poles.

3.25 Bus timetable information was displayed but was too high for the participants to view all the information clearly. No raised kerb was provided for boarding purposes. The travellers were unable to access the first bus which arrived as the allocated wheelchair spaces were occupied by children's buggies which the driver did not ask passengers to move. Traveller 1 was able to board the next bus. The driver knelt the bus but did not deploy the ramp or offer to do so and the bus moved off before the traveller was fully secured in the wheelchair space. Traveller 2 waited a further 12 minutes for another bus which she boarded without the bus being knelt or the ramp being deployed. The bus moved off while the Traveller was approximately half way to the wheelchair space. Upon arrival at the destination bus stop, neither driver utilised the ramp. The trip from the bus stop to destination and the return homeward journeys were relatively unproblematic owing to adequate paving and pedestrian crossings in most locations.

3.26 So, in the course of what could be seen as short and relatively simple journeys, the participants faced and had to overcome a range of obstacles in the form of physical barriers (such as uneven paving and accessing the bus without the driver deploying the ramp or utilising kneeling equipment), not being able to travel on the first bus, not being able to travel together and the bus moving off before they were secure.

3.27 The two participants were asked to comment on their general perceptions of the journey and both felt that, if a certain set of requirements could be relied on, the journey would be unproblematic – the driver deploying the ramp, pulling close to the kerb and kneeling the bus, the wheelchair space being unoccupied by buggies and being able to secure themselves before the bus moves off. The key problem for both travellers was the uncertainty surrounding these requirements. There were additional concerns about uneven paving and potholes as these were perceived as dangerous. Thus in general they were reluctant to use conventional public transport.

Audit Two

3.28 The second audit involved a journey from a sheltered housing development in a city suburb to a supermarket about half a mile from the participant's home – again by bus. On this occasion, the traveller was deaf, has a very narrow field of vision and also had difficulty walking owing to a childhood illness. In relation to the trip from home to the supermarket, the following difficulties were experienced:

- There are no dropped kerbs within the sheltered housing development so he had to walk in the road.
- Uneven footways in several locations making walking difficult and potentially dangerous.
- The walk from the destination bus stop into the supermarket entails crossing the wide and un-signalled junction of the car park with a major and busy road. The participant found this to be a significant barrier and was clear that it should be signalled if it was to be made easier for him to cross.
- The short length of time provided at the pelican crossing outside the supermarket was insufficient, given the participant's walking speed.

3.29 Again, the participant was asked to comment on the journey. Particular problems experienced on other occasions when undertaking the journey were:

- When boarding the bus it starts before he can sit down, even though he is unsteady on his feet. Drivers rarely lower low-floor buses for him.
- People do not tend to give up their seat for him, even if they are sat in the older and disabled priority seats at the front of the bus.
- Uneven footway surfaces mean that he trips and falls over quite frequently.
- When he is the only person waiting at the bus stop, he sometimes fails to see the bus and it does not stop.
- He has also been hit by cars when crossing the road. This is because of his limited field of vision as well as other site-specific factors.

Audit Three

3.30 Audit Three involved five participants all living in a residential home and having mobility problems of different types (including blindness, deafness, learning disabilities, and problems with balance). The trip comprised a combined foot and bus journey from home to a City Centre train station. Difficulties and obstacles faced during the journey were as follows:

- Walking was sometimes difficult owing to uneven and cracked paving slabs.
- The travellers had to negotiate several obstacles such as parked cars, bikes or temporary street signs.
- Heavy traffic noise making audible crossing instructions difficult to hear.
- Lack of clearway or raised kerb for boarding buses.
- Lack of information at bus stops (or not clear enough to read).
- Seats in bus stops facing away from approaching buses so people cannot see them.
- Inaccessible seats – not possible for all to sit on owing to design (too narrow and high).
- Bus pulling away before passengers seated or secured.
- Drivers failing to ‘kneel’ buses for passengers to access bus.
- Wheelchair spaces on buses occupied by other passengers (e.g. with buggies).
- Lack of street crossing at convenient place to cross.

3.31 As with other audits, residents were invited to discuss their perceptions of the journey and indicate what they perceived to be the main barriers. Some of the participants no longer used buses at all, with the main reasons being difficulties boarding or alighting, even when ramps were deployed. One participant commented that for her “it is potentially dangerous trying to get on and off buses in my electric wheelchair” and another stated “some drivers will help, but a lot won’t, which means taking the risk that the next bus has a helpful driver on”. Both participants recounted instances in the past where they had asked drivers if they could deploy ramps and were told they (the drivers) were not qualified (have not been trained) to lower ramps. Some of the local buses are fitted with automatic ramps, although in many instances it appeared that they were not working at the times when participants had attempted to use buses previously. Even when ramps were deployed and buses kneeled, all three participants commented that they would not be able to access buses unaided and would have to rely on assistance from their carers. For some participants, this limited their ability to travel, as “there is a lot of places I would like to go to, but cannot unless I can persuade someone to come with me” and “it certainly limits my social life”

3.32 A second problem that affected all participating wheelchair users concerned wheelchair spaces being occupied by other passengers. In most instances, the wheelchair space was occupied by parents/carers with children in buggies, although sometimes by other passengers. All participants commented that, in their experience, drivers had never asked passengers to vacate the designated wheelchair space, and had been told by the driver to wait for the next bus. This could result in lengthy delays for participants if several consecutive buses arrived and wheelchair spaces were occupied.

3.33 A third problem related to concerns manoeuvring wheelchairs into wheelchair spaces once on board buses. The problem was particularly relevant to the two participants in

electronic wheelchairs, which were slightly larger and harder to manoeuvre than manual chairs.

3.34 All wheelchair using participants commented that for most longish journeys they used taxis, in preference to local bus services, due to the problems highlighted above. One participant commented that taxis were more reliable and worth paying the extra cost and another stated 'at least I know I'll get there'.

Audit Four

3.35 This audit involved a person with learning disabilities who uses a wheelchair, travelling with his carer from home to work by bus. The actual bus journey takes approximately 1 hour (including interchange). Based on previous experience, the traveller and his carer allow for additional travel time in case they are unable to board buses due to the wheelchair space already being occupied. A shorter, more convenient route is available, but past experiences of attempting to use this route found that the buses are typically full and wheelchair spaces usually occupied (at the times required), which prevents the traveller from being allowed to board. Apart from this major issue, which means the participant cannot travel using his route and timetable of choice, the following difficulties were faced during the journey:

- Uneven paving.
- Not enough time allowed to cross using the pedestrian crossing.
- No raised kerb to facilitate access to bus.
- Feelings of fear or intimidation while waiting at bus stop.
- Bus driver did not lower the access ramp.
- Bus driver pulled away before secured in wheelchair space.

3.36 When asked to comment on travelling generally, the participant raised the following issues:

- Sometimes drivers do not lower the ramp and will say it is broken. In these instances, without the physical assistance of his carer the participant would not be able to board buses by himself.
- When bus drivers pull away too quickly, he felt quite nervous due to being 'bumped about', causing him to bang into other passengers and poles/seats.
- On some buses the internal layout makes it difficult to negotiate the wheelchair space, making it awkward to enter and secure the wheelchair.
- In many instances the designated wheelchair space is occupied by other passengers, mostly by parents/carers of children with buggies.
- The poor condition of pavement areas (unevenness, cracks) makes his journeys uncomfortable, and raises concerns over possible 'spills' from his wheelchair.
- The presence of various obstacles on pavement areas (e.g. rubbish bins, road work signs and advertising A-boards), which restricted his movement and sometimes forced him to travel too close (sometimes on) to the roadway, which increased his safety concerns.

Audit Five

3.37 This was slightly different from the other audits as it comprised discussions with blind participants about the journey from the Royal Blind School in Edinburgh to Waverley Station. The journey comprises a short walk to a bus stop, two bus journeys, a walk to the train station and entry into the Station. Key problems and difficulties associated with the journey were:

- Negotiating obstacles such as parked cars.
- Taking care not to slip on wet leaves and avoiding overhanging vegetation.
- Poor street lighting.
- Positioning of timetable information possibly blocking drivers' view of waiting passengers.
- Too small font size on bus timetable.
- Bus drivers forgetting to inform passengers that they have arrived at their destination stop.
- Difficulty with unsafe steps and lack of consistent handrail.
- Stairs being partially blocked by street sellers and youths.
- Lack of crossing time available to cross at crossing.

3.38 When participants were asked to comment generally on walking and using buses, the following issues were raised. The main concern in relation to bus use concerned drivers forgetting to inform participants of their correct stop. This created both fear and anxiety amongst pupils, and was their greatest concern about using buses on an independent basis. Three participants mentioned not being able to use buses during peak periods. When buses are full disabled people are not allowed to board and stand (they must be seated), due to the bus providers' health and safety policy. For one participant (an ex-pupil), a lack of information, or not being able to see information at bus stops, created the greatest problem for using buses independently. He described the recently-installed real time passenger information (RTPI) signs as 'totally useless to me'.

3.39 The main problem expressed by participants in relation to walking concerned the presence of obstacles on pavement areas, which both impeded their progress and presented safety concerns when walking. A range of physical obstacles were cited, including advertising boards, rubbish bins, general litter, leaves and dog dirt. In some instances, the presence of obstacles had forced pupils to walk onto the road area, increasing their concerns for personal safety when walking. A more recent problem regarding walking in the local area around the RBS was related to recycling boxes. These are left outside of residents' homes on the pavement area for collection, and several pupils commented on the hazard that they posed.

3.40 A further problem was the general condition of pavement surfaces. Loose slabs, cracks and uneven surfaces present tripping hazards to pupils and several pupils spoke of instances in the past when they had fallen. Cracked pavement surfaces were particularly hazardous to pupils when walking, as their canes would get caught in cracks causing 'jarring' of their cane arm which is 'very painful' for them. Several pupils commented they were forced to walk more slowly than normal in certain areas of the City due to the condition of the pavement surface.

Key points highlighted in particular by the journey audits include:

- The generally poor condition of the street environment. With the exception of some town and city centres, it commonly presents trip and other hazards to people with problems of poor mobility and visual impairment. There is also a lack of adequate crossing facilities, including basic ones such as dropped kerbs. The experience of the few relatively independent disabled people who took part in these audits shows that many have had falls due to trips on poor footway surfaces. Fear of such falls is likely to deter many other disabled people from attempting independent travel at all.
- The inconsistency of bus driver behaviour towards disabled people, and especially disabled people who need assistance when boarding and alighting. It appears that DfT PSV Driver Conduct Regulations – which are part of the training of all PSV drivers - are not regularly adhered to. Because of this inconsistency, disabled people cannot rely on/trust the conventional public transport system – even though they recognise that it has the potential to provide a useful service. They therefore prefer the security and predictability of taxis.

PRIMARY EVIDENCE: TNS SURVEY

3.41 In comparison the Journey Audits, the TNS survey sample comprises a much broader range of respondent types with different travel experiences. Survey respondents were asked the main difficulty they faced in relation to travelling. Data from the quantitative survey indicates that the key difficulties faced by disabled people are largely related to difficulties walking, standing or climbing. There were, however, some different interpretations of the question by respondents with some reporting their general difficulty while others related the difficulty specifically to travelling. Overall, key general difficulties mentioned by respondents are:

- Difficulty walking (39%)
- Restricted mobility due to joint or back problems (13%)
- Breathlessness/asthma (11%)
- Anxiety/panic attacks/agoraphobia (8%)
- Dizziness/balance problems (5%)
- Difficulty seeing/blind (5%)
- Difficulty standing for long periods (4%)
- Difficulty climbing stairs (4%)
- Heart problems/angina (4%)
- Bowel or bladder problems (2%)
- Short-term memory loss (1%)

3.42 Specific difficulties relating to travel mentioned were:

- Difficulty getting on and off public transport (14%)
- Cannot travel alone (4%)

- Inadequacies of public transport (3%)
- Bus drivers not giving you enough time to sit down/get off (3%)
- Can only travel by car/taxi/handibus (3%)
- Lack of wheelchair facilities (2%)
- Difficulty getting in/out of car (2%)

3.43 Several key points can be identified by considering the two lists of difficulties mentioned above. First, as the lists demonstrate, survey respondents have a range of problems and difficulties likely to cause different challenges in relation to travelling. Additionally, respondents were only asked to mention the main difficulty they faced – evidence from other sources and from other parts of the survey data indicates that many respondents – especially older respondents face more than one difficulty caused by a range of illness or disabilities.

3.44 Second, it is clear from some of the problems mentioned that many of the difficulties and barriers are particularly challenging from a travelling perspective and several are not likely to be solved by changes to existing conventional public transport. In fact, the list perhaps demonstrates that the opposite is true – that many of the difficulties or barriers to travel will require solutions outwith the conventional range of adaptations and alterations to conventional public transport.

3.45 For example, the three most commonly mentioned difficulties – difficulty walking, restricted mobility owing to joint problems and asthma or breathlessness – suggest that the most significant barrier to using public transport is the trip to the bus stop or train station from home and from the stop or station to the final destination. Difficulties getting on and off public transport and some drivers not giving sufficient time to sit down were mentioned by a significant minority of respondents but by not nearly as many as general mobility issues. This suggests that driver training is important but is not likely to address the whole problem of accessibility for many of those with mobility issues.

3.46 The data also suggests that some of the particular personal difficulties faced by respondents require personal solutions which are not likely to be able to be addressed merely by changes to public transport. For example, the 8% who have agoraphobia or anxiety attacks, those with short-term memory problems or bowel or bladder problems and those who feel they cannot travel alone are not likely to feel comfortable or confident travelling unaccompanied by bus for example.

Key findings on barriers from the TNS Survey include:

- The majority of survey respondents mention difficulties relating to the accessibility of transport, fear of travel and personal barriers to travel.
- Barriers arising due to lack of information were not mentioned as often, although the literature review has demonstrated the importance of information on ability to travel.
- Results suggest difficulties getting from home to points of transport departure (and to and from destination at embarkation).
- Many barriers to travelling are unlikely to be solved by changes to existing conventional transport.
- Staff training is important but does not in itself address the whole problem of accessibility and use of public transport

CONCESSIONARY FARES: SPT DATA AND TNS SURVEY

3.47 An area which has previously been seen as a key barrier to travel (and provided the original impetus for this research) that has been considered as part of this research is the area of affordability of public transport. As affordability in relation to accessing transport has historically been seen as an important element in making transport accessible for disabled people, the provision of Concessionary Fares has been promoted as a positive way of enabling and encouraging more use of public transport by disabled people. There is, however, currently little data available on the use made of concessionary fares by disabled people in order to test whether the provision of such concessions does indeed encourage use of transport. Among other things, this study has sought to examine, as far as possible, what difference, if any, the provision of concessionary fares makes to the travel patterns of disabled people.

3.48 As highlighted in Chapter 1, previous research carried out in Scotland in 2004¹⁸ has suggested that cost remains an important barrier where other barriers such as availability or accessibility have been addressed, but is not as important where these issues remain. This section draws on two further sources of information. First, analysis was undertaken of evidence gathered from the Strathclyde Passenger Transport area, compared with other unpublished concessionary fares data from an urban area in the East of Scotland and assessed against population estimates. Second, a series of questions were included in the quantitative survey examining the proportion of respondents in possession of concessionary fare benefits and how much these are used.

3.49 The analysis of the SPT data was undertaken to test the hypothesis that, if price were the only barrier for disabled people's use of conventional bus travel, then it is to be expected that their take-up and use of the concession might be similar to that of people who qualify on grounds of age (60 and over)⁷. This assumption was tested using data from the SPT area and from another large urban area in Scotland. The former was able to supply passholder numbers broken down by people qualifying on grounds of age, and those qualifying on grounds of disability. Together with the use of SHS data on the percentage of people who state that they are disabled, and census data on the proportion of the population aged 60 and over, it was possible to calculate a take-up rate for each kind of pass (i.e. the proportion of the population eligible that actually applies for and gets a pass).

3.50 The second area was able to supply the same data as SPT and, in addition, it was able to supply the total number of concessionary trips made on conventional bus services run by the major operator in its area. This permitted the calculation of two trip rates per person: one for disabled people with a pass, and one for people who qualified for a pass because of their age. Clearly of course there will be some overlap between the two groups: some people aged 60 and over are disabled but prefer to claim their pass on grounds of age because the process is simpler. But the numbers do give an indication of the relative take-up of the concession by the two groups; and then how much they use it. This, in turn, can give an indication of how useful the concession is to each group.

¹⁸ Transport Provision for Disabled People in Scotland: Progress since 1998; Scottish Executive Development Department; Research Findings No. 180, (Reid Howie Associates Ltd; 2004)

3.51 The following table shows expected take-up and actual take-up for disabled people and people aged 60 and over in the two areas. Expected is simply equal to the total number of people in each group in each area. Actual is the pass-holder numbers in each category as supplied by the relevant scheme promoter. Trip rates are also shown.

Table 3.4: Expected and Actual Take-up of Concessions

	Expected	Actual	Take-up (%)	Trip rate
SPT				per pass/year
Disabled (SHS)	448,555	63,980	14.3%	N/a
People 60 and over (2001)	460,554	345,799	75.1%	N/a
<i>East of Scotland urban area</i>				
Disabled (SHS)	32,497	2,733	8.4%	117
People 60 and over (2001)	33,502	28,716	85.7%	154

3.52 Even allowing for some people who would qualify because they are disabled choosing to take a pass on grounds of age instead, these figures show significantly different rates of take-up and use by disabled people and people aged 60 and over. (Unfortunately it is not possible to obtain trip rates for disabled people who are aged under 60.) Taking into account the limitations of available data, this suggests that granting a concessionary fare to disabled people perhaps only makes a limited contribution to reducing the difficulties that they have in using conventional public transport and needs to be provided as part of a broad range of other initiatives.

3.53 The TNS survey included a range of questions relating to concessionary fares. Overall, just over 60% of all respondents had some kind of travel concession (it must be noted that respondents are self-defined as having a long-term illness or disability so might not necessarily fit the criteria for eligibility for concessionary fares). Specifically:

- 59% had a concessionary card for bus travel
- 23% had a concessionary card for train travel
- 5% had a concessionary card for taxi travel.

3.54 However, as indicated in the analysis above, possession of concession does not necessarily equate with use of concessions. Of those with bus concession, 79% ever use the concession for bus travel. Of those with a train concession, 60% ever use it and of those with a taxi concession, 91% ever use it.

3.55 The fact that a higher percentage of those with a taxi concession ever use the concession coupled with reasons given by those who do not use their bus or train concessions suggests that the taxi concession is often considered the most useful. The provision of free or cheap fares for bus or train travel clearly leaves a whole range of other barriers to using such transport. Additionally, a significant proportion of those with concessionary travel passes have access to a car or other (more convenient) transport. For example, these are the main reasons given by those who have bus concessions but do not use buses (n=90):

- Have own car/access to car (37%)
- Not able to use buses (20%)
- Have difficulty using buses (owing to steps, not enough time to sit down etc) (16%)
- Too far to bus stop from home (8%)

- Not enough buses in local area (6%)
- Can't travel alone/go out alone (6%)
- Don't like crowds (3%)
- Prefer taxis (3%)

3.56 Similar reasons are given by those with train concessions who do not use trains (n=64):

- Have own car/access to car (11%)
- Not able to use trains (55%)
- Too far to train station from home (9%)
- Can't travel on my own (5%)
- Too many steps at station (3%)

3.57 Only three respondents have a taxi concession and do not use it – two of these do not use taxis as they have access to a car at all times. Just 2% of those who do not currently have any entitlement to concessionary fares (n=274) say that either cheaper fares or a free pass would encourage them to use public transport more than they currently do.

Key Issues identified by the review of evidence on concessionary fares are:

- Previous studies suggest that affordability is a key barrier where other issues of availability and accessibility are addressed.
- Uptake of concessionary fares is less in relation to the population for disabled people than for those aged 60 or over,
- Among those interviewed as part of the TNS Survey, entitlement to taxi concessions were far less common than either bus or train concessions.
- At the same time, a higher proportion of those entitled to taxi concessions actually used them than use either of the two other forms of concession suggesting that such concessions are perhaps more useful and that targeting of concession types rather than blanket provision might be more effective.
- Taken together findings suggest the provision of free or cheap fares is only one of a range of barriers to using these transport modes.
- Generally, there is a lack of evidence relating to the effectiveness and, in particular the cost/benefit of concessionary fares compared with other transport schemes.

SUMMARY

3.58 In summary, the range of evidence examined identifies that there are some key barriers still in existence which negatively impact on the travel behaviour of disabled people. In addition, a key issue identified by evidence presented above (particularly by the Audit evidence) is that, generally, more than one obstacle or barrier exists for each journey type, the barriers vary by journey type and those with different disabilities face different barriers. In essence the evidence shows that because the problem is multi-faceted, no one single 'solution' is likely to make a difference to the travel opportunities of many disabled adults in Scotland.

3.59 Some of the barriers are:

- Difficulties with existing conventional public transport provision in relation to physical accessibility
- Difficulties travelling from home to point of public transport departure
- Difficulties with the physical environment of public transport buildings and infrastructure e.g. railway stations, and the pedestrian environment e.g. kerbs, stairs and pavements
- A lack of trust or confidence in the transport system – even in relation to basic features such as drivers using ramps
- Personal safety issues relating to using public transport
- A lack of a reliable companion or information source for the entire journey
- A key issue relating to the role of concessionary fares is the relationship between eligibility for certain types of travel and the travel needs of individuals. Many people, although eligible for concessionary travel on buses and trains cannot actually use such forms of transport but could use, for example, taxis for which they do not necessarily enjoy concessions.
- The evidence suggests that although affordability is a key element of accessibility, concessionary fares alone are unlikely to have a major impact on travel behaviour unless other, perhaps more visible, barriers have been addressed

CHAPTER FOUR: IDENTIFICATION OF POSSIBLE AND MOST POPULAR TRANSPORT SOLUTIONS FOR DISABLED TRAVELLERS

Chapter 4 Objectives and Sources:

To identify the most useful transport solutions to enable disabled people and those with a long term illness to travel more than they do currently;

Drawing on:

- **TNS Survey;**
- **Case Studies of existing schemes and initiatives;**
- **Results of a feedback exercise.**

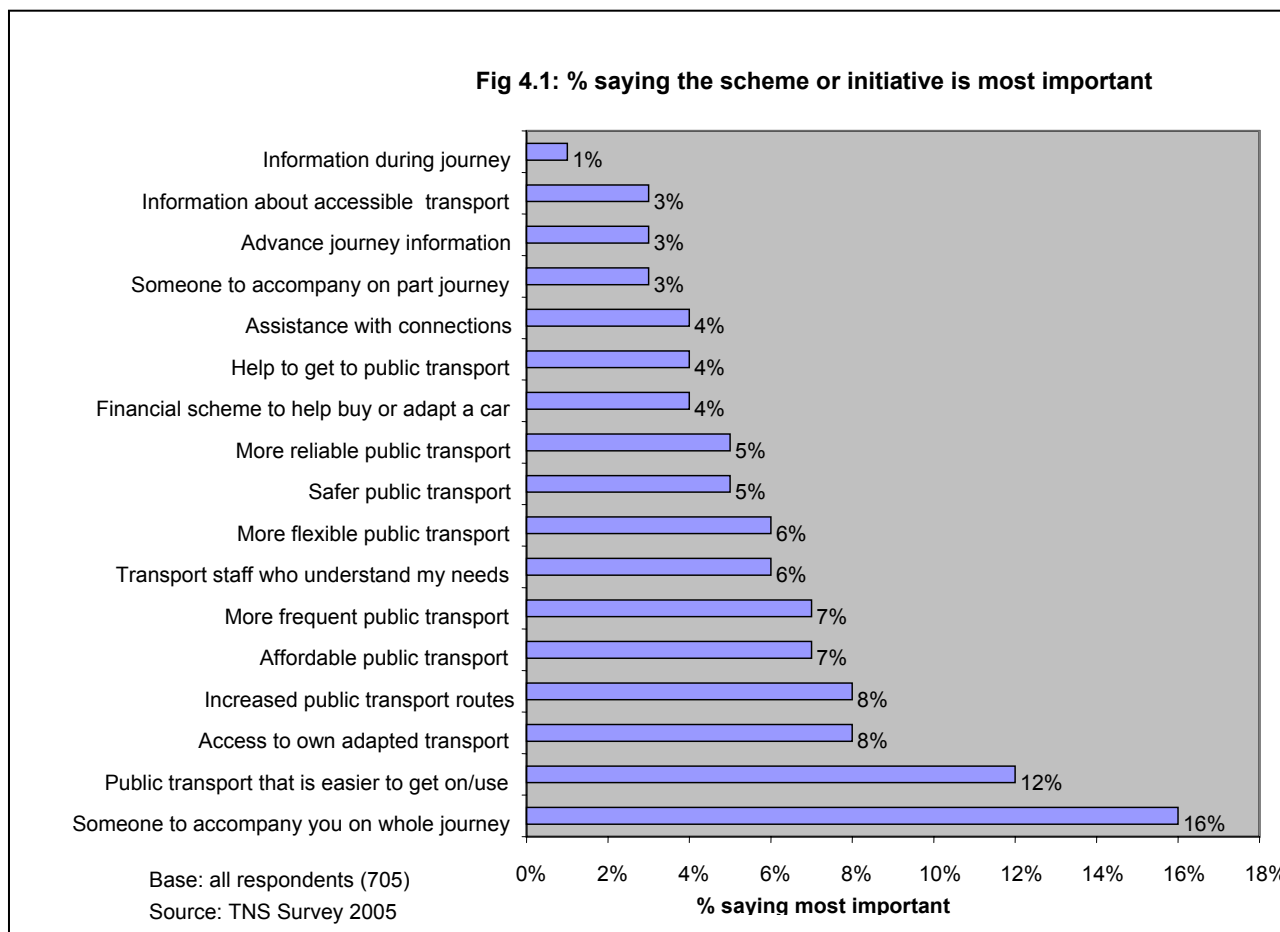
INTRODUCTION

4.1 The preceding chapters have sought to identify the extent of the inequality between disabled and non-disabled adults in relation to travelling and outlined some of the key difficulties and problems contributing to the inequality. This chapter seeks to examine some of the potential solutions to such difficulties and problems as identified in the process of conducting the research. A range of key sources will contribute to the section. First, an examination is presented of the views of the survey respondents in relation to which potential schemes or initiatives they feel would make a positive difference to their travel opportunities. Second, case study evidence from a range of schemes and initiatives currently or historically functioning in the UK and Europe is examined to identify previous successes and pitfalls in order to inform future practice. Finally, results of a feedback exercise aimed at getting the views of service providers and disabled people on the solution priorities identified are presented.

4.2 Two elements of survey analysis are presented here. The first focuses on a broad range of schemes or initiatives that might enable people to travel more easily or more widely, while the second part attempts to identify what types of initiatives and ideas might realistically encourage or enable people to use *public* transport specifically.

TRAVEL SCHEMES AND INITIATIVES: TNS SURVEY

4.3 Respondents were shown or read a list of schemes or initiatives and asked, “as we’ve talked about, there are different things that might make travelling easier. Which of the following would you say is the most important thing?” The figure below shows the most common travel schemes or initiatives chosen by respondents.



4.4 As Fig 4.1 shows, the most commonly chosen option is ‘someone to accompany you on the whole journey’, mentioned by 16% of respondents. Combined with the 17% choosing either ‘someone to accompany me on part of journey’, ‘assistance with connections’ and ‘staff who understand my needs’ and ‘help to get to public transport’ suggests that the absence of a trusted and reliable person to provide information or assistance throughout a journey is a key barrier to travelling for disabled adults with almost a third of all respondents choosing options relating to this issue.

4.5 Tables 4.1 and 4.2 show the travel schemes or initiatives broken down by a range of demographic characteristics. The tables indicate that, although the most commonly chosen option is accompaniment, as expected, there are real differences between different groups in relation to perceptions of the most useful schemes and initiatives. The fact there is such divided opinion as to the most useful option demonstrates that different people in different circumstances have different priorities.

4.6 In relation to current level of travel difficulty, shown in Table 4.1, those who always experience difficulty travelling and those who never travel are significantly more likely than

those in other categories to select ‘someone to accompany me on the whole journey’ as the most important option. In other words, this is by far the most important initiative for those who experience the highest levels of difficulty travelling.

4.7 Those who experience less difficulty travelling are more likely to select options more associated with existing conventional public transport options such as more bus routes, more frequent buses, more affordable transport and more flexible transport.

4.8 These two findings indicate that for some groups of disabled travellers, marginal changes to existing public transport, for example, in relation to the frequency and convenience of buses might make a difference to their ease of travel, but for those who experience more difficulties, more radical or fundamental approaches might be required.

Table 4.1: % selecting option as the most important by current travel difficulty

	Always %	Sometimes %	Occasionally %	Never %	Don't travel %	All
Someone to accompany on whole journey	33	12	9	5	36	16
Public transport that is easier to get on/use	12	12	15	8	21	10
Access to own adapted transport	11	7	6	6	-	7
Increased public transport routes	6	10	10	7	14	6
Affordable public transport	2	7	8	12	-	6
More frequent public transport	3	3	6	16	-	7
Transport staff who understand my needs	4	7	6	5	14	6
More flexible public transport	4	5	10	8	7	6
Safer public transport	2	5	5	7	-	4
More reliable public transport	5	7	1	7	-	5
Financial scheme to help buy or adapt a car	4	3	5	4	-	5
Help to get to public transport	4	7	3	3	-	4
Assistance with connections	2	7	5	3	7	5
Someone to accompany on part journey	4	3	3	1	-	3
Advance journey information	2	3	3	4	-	3
Information about accessible transport	3	2	3	3	-	3
Information during journey	1	0	3	1	-	1

Source: TNS Survey 2005

4.9 Table 4.2 demonstrates that accompaniment is not universally the most common option across all sample sub-groups. Respondents in paid work and respondents with children do not fit the pattern demonstrated by most other sub-groups. For those in paid work, the most common factors are increased public transport, more frequent public transport and public transport which is easier to get on or use. Similarly, respondents with children more commonly chose public transport related options such as ‘increased public transport routes’.

Table 4.2: % selecting option as the most important by key variables

	Paid Work %	Retired %	Unable to work %	Urban %	Rural %	Children %	No Children %	All %
Someone to accompany on whole journey	4	18	18	16	20	7	17	16
Public transport that is easier to get on/use	13	13	5	10	13	10	10	10
Access to own adapted transport	1	8	6	7	4	6	7	7
Increased public transport routes	19	6	9	9	6	16	8	6
Affordable public transport	10	5	7	6	4	8	6	6
More frequent public transport	15	6	6	6	10	6	7	7
More flexible public transport	7	6	4	6	6	4	6	6
Transport staff who understand my needs	4	6	8	6	6	6	6	6
Safer public transport	4	5	4	5	3	6	4	4
More reliable public transport	6	5	6	5	5	10	5	5
Financial scheme to help buy or adapt a car	6	5	5	5	5	10	4	5
Help to get to public transport	0	6	3	4	3	1	5	4
Assistance with connections	5	4	7	5	1	5	5	5
Someone to accompany on part journey	1	2	5	2	6	1	3	3
Advance journey information	4	3	3	3	6	2	3	3
Information about accessible transport	1	3	3	3	3	4	3	3
Information during journey	1	1	1	1	0	0	1	1

Source: TNS Survey 2005

4.10 In relation to type of illness or disability, being accompanied for the whole journey is most important for those with mental health problems or learning disabilities.

4.11 As well as being asked to rank a range of schemes which might make travel easier, respondents were asked to assess whether each of the initiatives would enable them to travel a lot or a little more, or would make no difference. Table 4.3 provides an overview of the perceived impact of a range of initiatives on the travel behaviour of all respondents. Clearly, the ‘door to door’ aspect of transport appears to be a very important factor influencing whether a scheme or initiative will increase the amount of travel. Almost two-thirds (62%) of all respondents said they believed they would travel more if they had access to an on-call, accessible, inexpensive door-to-door taxi service and over half believed that access to an on-call door-to-door bus service would increase their travelling frequency.

4.12 Also, it appears that door-to-door transport in the form of a bus or taxi is more popular than self-driven options. Having said that, the proportion who believe they would travel more if they had access to a shared accessible car is not insignificant, with 14% believing it would help them travel a lot more and 15% believing it would help them travel a little more. Just over a fifth of all respondents felt that a scheme to help buy or adapt a car would enable them to travel more.

4.13 Interestingly, some of the options which respondents believed would make a real difference to their ability to travel more are issues which did not emerge strongly as barriers

or difficulties in early evidence. For example, almost a fifth of respondents believe they would travel a lot more if there were more provision and stricter enforcement of disabled person's parking. Additionally, although Fig 4.1 above showed that only 3% of all respondents chose 'information in advance of journey' as the *most important* travel initiative, information and journey planning emerges as very important in Table 4.3 with a third of respondents believing such a service would increase their frequency of travelling.

4.14 Similarly, 'help to get to public transport' was not often ranked first (as shown in Fig 4.1 above), but the table below indicates that around a third of all respondents feel that 'company/assistance to and from bus stop/ train station/airport etc.' would enable them to travel more.

Table 4.3: % indicating the impact each initiative would have on their travel behaviour

	Travel a lot more %	Travel a little more %	No difference %
An on call, inexpensive accessible taxi service that takes you from door to door	36	26	38
On-call, accessible door to door bus	34	21	45
Increased enforcement and provision of parking for disabled people	22	11	67
A shared accessible car	14	15	71
A scheme to help buy or adapt a car	14	7	79
Company/assistance to and from bus stop/ train station/airport etc.	15	21	64
Tailored journey planning service	13	20	67
A powered wheelchair/scooter loan scheme	7	5	87

Source: TNS Survey

Base = 705

4.15 In order to avoid over-estimating the potential impact of each initiative or scheme on potential future travel behaviour, the following tables (4.4-4.6) examine the proportions in each sample sub-group indicating that the initiative or scheme would encourage them to travel A LOT MORE. It is, important to note that over a third of all respondents believed that the first two options would encourage them to travel 'a lot more' again demonstrating the importance of both the door-to-door and the on-call elements of transport options.

4.16 As Table 4.4 indicates, a greater proportion of those who currently experience the greatest difficulty travelling than other groups believe that the first two options, both involving on-call and door-to-door elements, would encourage them to travel more. The differences between the sub-groups in relation to the other options are less pronounced.

Table 4.4: % indicating the initiative would encourage them to travel ‘a lot more’ by frequency difficulty of travelling is experienced

	Always %	Sometimes %	Occasionally %	Never %	Don't Travel %	All %
An on call, inexpensive accessible taxi service that takes you from door to door	45	44	28	24	14	35
On-call door to door bus	44	37	33	22	21	34
Enforcement and provision of parking for disabled people	28	18	29	12	-	20
A shared accessible car	17	15	22	9	7	14
A scheme to help buy or adapt a car	15	14	14	14	-	14
Company/assistance to and from bus stop etc.	18	21	15	5	7	14
Tailored journey planning service	19	12	13	9	-	13
Wheelchair/scooter scheme	10	7	4	4	7	6

Source: TNS Survey 2005

4.17 The first two options are the ones seen as making the most difference across all types of disability as shown in Table 4.5. There are, however, some other initiatives which appear to appeal more to some groups than others. For example, ‘company/assistance to and from bus stop etc’ was more commonly chosen by those with mental health problems or learning disabilities than those in other groups. Similarly, the chance to own or share an accessible car is also more popular among those with mental health problems or learning disabilities than other groups, perhaps suggesting that independent travel is particularly important for some individuals within this group (whose particular difficulties included agoraphobia and panic attacks for example).

Table 4.5: % indicating the initiative would encourage them to travel ‘a lot more’ by banded type of disability

	Difficulty Walking %	Mental Health %	Chest /Heart problems %	Other %	All %
An on call, inexpensive, accessible taxis service that takes you from door to door	37	46	31	20	36
On-call door to door bus	35	42	29	17	34
Enforcement and provision of parking for disabled people	26	12	9	14	22
A shared accessible car	13	19	14	11	14
A scheme to help buy or adapt a car	14	19	14	14	14
Company/assistance to and from bus stop etc.	14	30	12	2	16
Tailored journey planning service	11	23	10	11	13
Wheelchair/scooter scheme	9	6	5	3	7

Source: TNS Survey 2005

4.18 Table 4.6 shows that there are some differences between some of the demographic and economic sub-groups in the sample. For example, the first two options and the option of ‘company or assistance to and from bus stops’ were particularly popular among the economic sub-group who were of working age but who were unable to work owing to sickness or disability. Higher proportions of adults of working age and those with children see a scheme enabling them to buy or adapt a car as enabling them to travel a lot more than adults in other sub-groups. Enforcement and provision of disabled person’s parking was more commonly

chosen by those in rural than urban areas perhaps reflecting the higher reliance of rural dwellers on personal transport.

Table 4.6: % indicating the initiative would encourage them to travel ‘a lot more’ by sub-group

	Paid Work %	Retired %	Unable to work %	Urban %	Rural %	Children %	No children %	All %
An on call, inexpensive, accessible taxis service that takes you from door to door	34	28	45	38	26	37	36	36
On-call door to door bus	33	27	45	35	28	40	33	34
Enforcement and provision of parking for disabled people	24	18	29	20	32	23	22	22
A shared accessible car	12	10	16	14	10	15	14	14
A scheme to help buy or adapt a car	16	8	20	13	17	30	12	14
Company/assistance to and from bus stop etc.	7	12	26	16	14	21	15	16
Tailored journey planning service	13	6	22	14	5	21	11	13
Wheelchair/scooter scheme	7	6	7	8	4	6	7	7

Source: TNS Survey 2005

4.19 The analysis above relates to travelling in general and respondents were choosing from a pre-developed list of options. For each of the journey types discussed in Chapter 2, respondents were asked to say what initiatives or changes would make specific trips easier to undertake for respondents without any travel options being provided. Table 4.7 shows that ‘door to door transport’ was most common for most journeys; exceptions were ‘going away on holiday’, where accompaniment was most often mentioned, and ‘visiting local shops’ where cheaper taxis/taxi cards were identified more frequently. The importance of accompaniment appears to be greater for trips away for weekends or longer holidays.

Table 4.7: Most common things which would make travelling easier or encourage more trips for main trip types

	Work %	Day Leisure %	Away For Weekend %	Away On Holiday %	Visit Friends %	Local shop %
Cheaper taxis/taxi cards	3	14	2	0	8	13
Less crowded buses	3	1	1	3	1	0
Accompaniment	3	4	10	11	4	7
Use of a car	2	5	3	2	8	6
Low steps to buses	2	1	0	2	2	1
More frequent buses	7	13	4	2	9	7
Seating for queuing	0	0	0	0	1	0
Door to door transport	7	13	13	9	16	8
More lifts or ramps	0	0	1	2	2	0
More help on public transport	0	0	2	2	3	0
Bus stop or train station nearer home	3	1	0	1	0	5
Better parking for disabled people	3	0	1	2	0	2
Cheaper buses or trains	0	0	0	0	1	0
More direct buses or trains	3	3	4	1	0	1

Source: TNS Survey 2005

Key findings in relation to schemes and initiatives designed to increase travel opportunity were:

- The most popular choice from a provided list was ‘someone to accompany me on my whole journey’.
- Options that provided door-to-door transport, either buses or taxis were most likely to enable people to travel a lot or a little more.
- The actual solutions varied according to different circumstances, such as degree of difficulty travelling, type of disability and demographic characteristics of respondents.
- For individual trips, door to door transport was most often mentioned as being important, though there was some variation for particular trips.

DEMAND RESPONSIVE SOLUTIONS: EVIDENCE FROM THE LITERATURE REVIEW

4.20 On-call door-to-door services are often referred to as demand responsive transport (DRT). A recent, as yet unpublished, study commissioned by the Scottish Executive¹⁹ was designed specifically to review evidence on DRT and the contribution it can make to accessibility in urban and rural areas and provide guidance on scheme delivery.

4.21 Demand Responsive Transport (DRT), was defined in the report in simple terms as any form of transport where day to day service provision is influenced by the demands of users. Within the definition, the researchers incorporated taxis; shared taxi/taxibus; community car schemes; non-emergency patient transport; ‘joblink’ services; ring-and-ride; social services transport; education services transport; dial-a-ride, community buses, and many other related services. DRT schemes can operate as area wide services with few or no defined stopping points, resulting in maximum flexibility, although to allow links with other parts of the transport system and to ensure area coverage some degree of flexibility can be applied to particular schemes. Most DRT services are on a small scale, or targeted at specific categories of people in the community.

4.22 There are particular types of transport needs, which cannot be met without the ability to provide a flexible transport solution. In particular, some user groups require door-to-door DRT provision to access the services that they require. This may include for example trips to hospitals and for other medical care. The researchers concluded that expansion of DRT provision is an essential aspect of improving accessibility in Scotland.

4.23 Overall the review concluded that DRT should not be planned in isolation from other transport and recommended that DRT development should form an essential part of an overall transport and accessibility plan. Currently, DRT services often overlap; the strengthening of one service may transfer trips away from others. A second problem is that there is no single legislative niche for DRT services; three main options are currently used which actively constrains the development of or ability to develop efficiencies in DRT services. Sustainability of services was also found to be an issue. The long term

¹⁹ Review of Demand Responsive Transport in Scotland (Scottish Executive Social Research, 2005) Unpublished

sustainability of most of the pilot DRT projects set up by the Scottish Executive was uncertain. There is a heavy reliance on the Scottish Executive funding and for most pilots, the researchers suggest, DRT would probably not be prioritised highly enough by the councils to obtain funding within mainstream budgets.

INCREASING PUBLIC TRANSPORT USE: TNS SURVEY

4.24 Respondents were asked a set of questions about public transport and which initiatives or schemes were likely to encourage or enable them to use *public transport* more. Initiatives and schemes relating to public transport were divided into different elements – availability, accessibility and information.

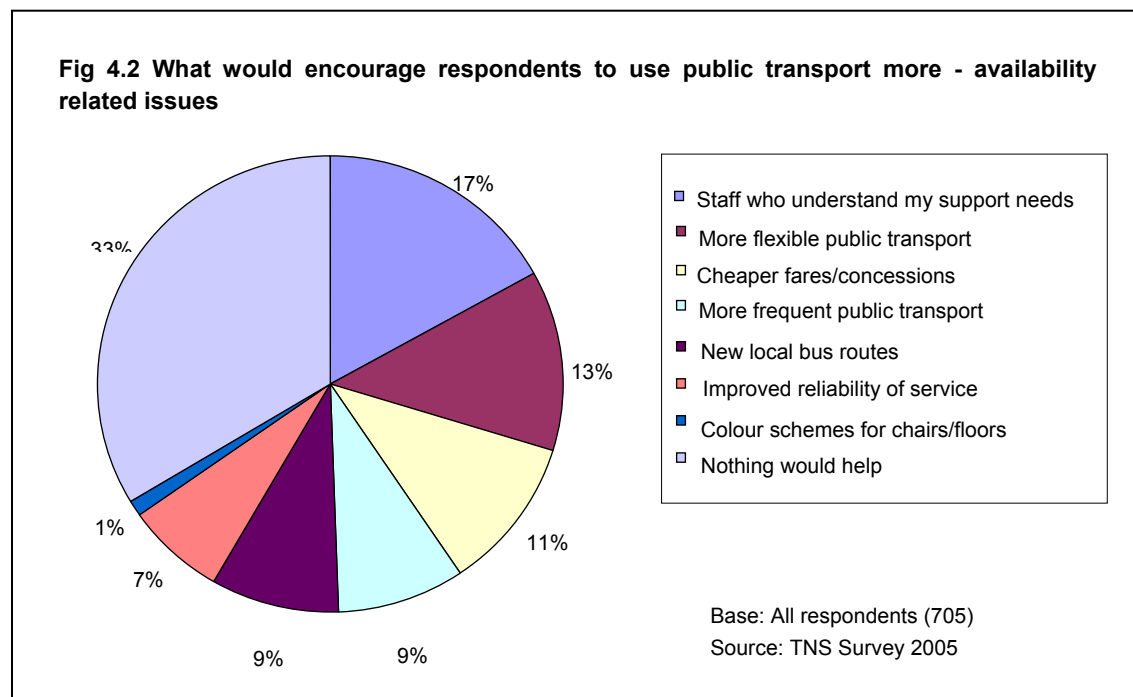
4.25 The next set of figures (4.2 – 4.4) and tables (4.8 - 4.12) relate specifically to current conventional public transport and show the most commonly chosen elements of public transport provision which respondents said would most encourage them to use public transport more. Perhaps the most significant result to be taken from the tables is the very high proportion of respondents indicating that they believe that nothing that could be done to public transport would enable them to use it or use it more. This suggests that the changes required are more fundamental and far-reaching than adaptations to current transport provision. However, the tables do indicate that there are some key changes and improvements which would either make using public transport easier for existing users or encourage some current non-users to use public transport.

4.26 The proportion of respondents believing that nothing would enable them to travel more by public transport varies by sub-group in the sample and in relation to the different tables. The groups containing the highest proportions who say that nothing could enable them to use public transport more are:

- Those who currently experience most difficulty travelling or who never travel
- Retired adults
- Those living in rural areas (areas where generally provision of public transport is more limited owing to demand issues)

Public Transport – Availability

4.27 In relation to the range of schemes or initiatives grouped under the heading ‘availability’, the element most commonly selected as encouraging respondents to use public transport more was ‘staff who understand my support needs’ again indicating that the absence of help during a journey is a key barrier.



4.28 The requirement for ‘staff who understand my support needs’ was particularly common among those who most often experience difficulties travelling. This finding supports the earlier assertion that one of the key issues relating to the use of public transport by disabled people is the understanding and helpfulness of staff. ‘Staff who understand my support needs’ was the option most commonly selected by those with all types of disability (Table 4.8).

Table 4.8: % indicating the initiative would encourage them to travel ‘a lot more’ by banded type of disability

	Difficulty Walking %	Mental Health %	Chest/Heart Problems %	Other %	All %
Staff who understand my support needs	18	21	17	8	17
More flexible public transport	14	11	16	6	13
Cheaper fares/concessions	11	15	12	11	11
New local bus routes	10	8	7	12	9
More frequent public transport	7	8	9	15	8
Improved reliability of service	5	9	10	11	7
Colour schemes for chairs/floors	1	0	0	0	1
Nothing would help	34	28	29	38	33

Source: TNS Survey 2005

4.29 Table 4.9 shows that ‘staff who understand support needs’ is not the universally most popular option across the different sub-groups. Groups by which it was selected more often included retired people, those in urban areas and those without children. People in work more often chose more flexible public transport, while those unable to work and in rural areas favoured cheaper fares/concessions. Equal proportions of respondents with children suggested all of these three options would help them use public transport

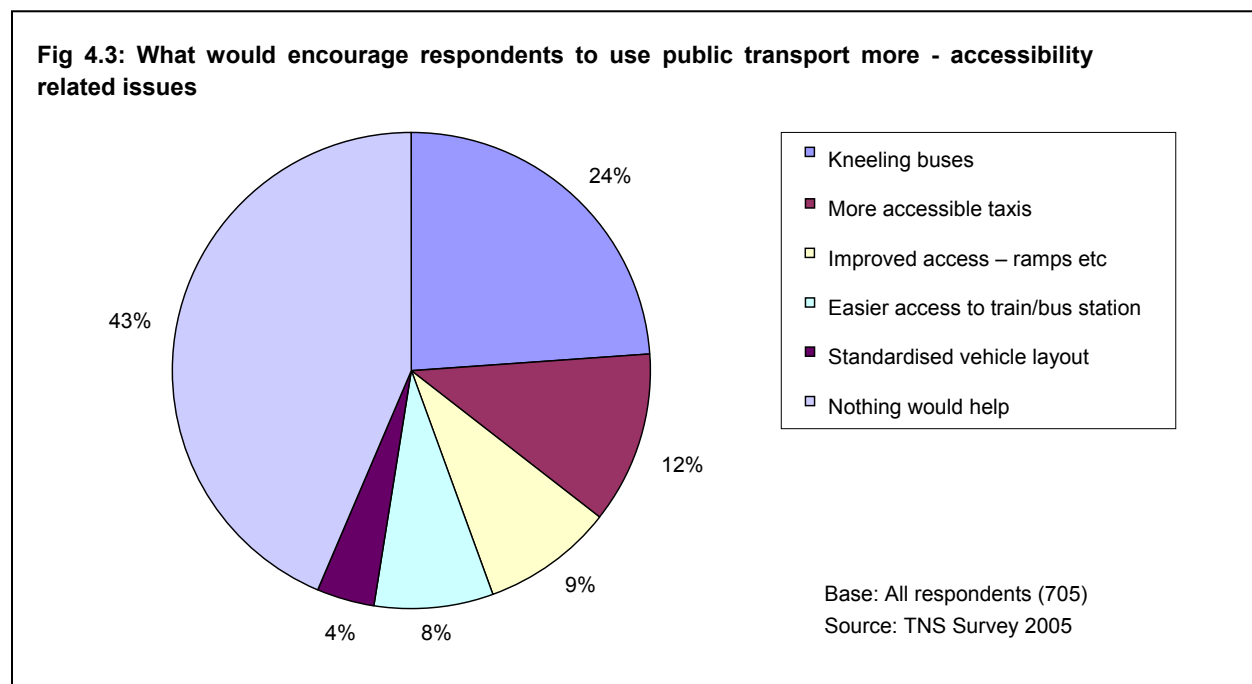
Table 4.9: % indicating the initiative would encourage them to travel ‘a lot more’ by sub-group

	Paid Work %	Retired %	Unable to work %	Urban %	Rural %	Children %	No children %	All %
Staff who understand my support needs	13	20	15	18	15	16	18	17
More flexible public transport	25	12	14	13	13	16	13	13
Cheaper fares/concessions	12	5	19	10	17	16	11	11
New local bus routes	12	8	9	10	6	13	9	9
More frequent public transport	16	7	7	8	10	0	8	8
Improved reliability of service	7	6	7	7	3	10	6	7
Colour schemes for chairs/floors	0	1	1	1	0	1	1	1
Nothing would help	15	41	29	33	38	20	35	33

Source: TNS Survey 2005

Public Transport – Accessibility

4.30 In relation to the range of aspects grouped under ‘accessibility’, the most commonly selected option was ‘kneeling buses’ indicating that for those who can access bus stops, the physical action of getting on to the bus is a key barrier. Almost half of all respondents felt that nothing would make it easier for them to access public transport.



4.31 The options selected as most important in relation to accessibility varied by the disability of the respondent. For example, a higher proportion of adults with difficulty

walking chose ‘kneeling buses’ as the most important option than did those with other disabilities. Conversely, a standardised layout was most important for the majority of those with difficulty seeing.

Table 4.10: % indicating the initiative would encourage them to travel ‘a lot more’ by banded type of disability

	Difficulty Walking %	Mental Health %	Chest/ Heart Problems %	Other %	All %
Kneeling buses	31	14	21	5	26
More accessible taxis	11	17	9	11	12
Improved access – ramps etc	10	5	9	5	9
Easier access to train/bus station	7	10	14	8	8
Standardised vehicle layout	2	2	2	15	3
Nothing would help	40	53	47	58	43

Source: TNS Survey 2005

4.32 ‘Kneeling buses’ were the most commonly selected option across all the sub-groups (Table 4.11). However, almost as high a proportion of those with children and those unable to work selected ‘more accessible taxis’ as the most important option.

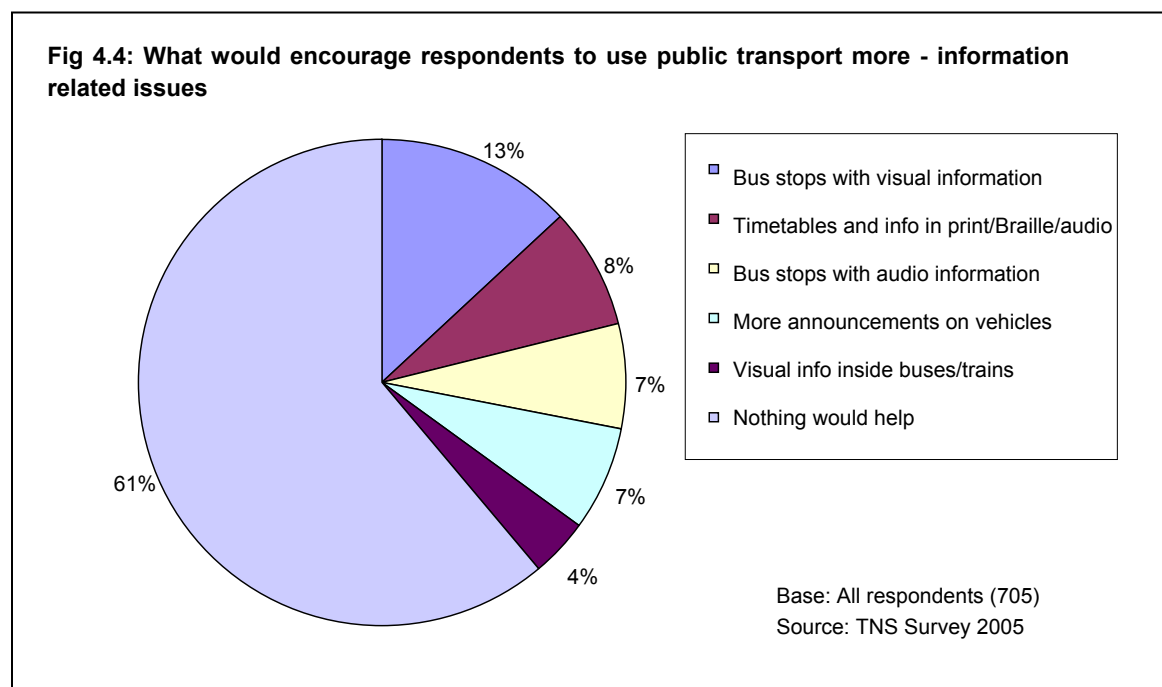
Table 4.11: % indicating the initiative would encourage them to travel ‘a lot more’ by sub group

	Paid Work %	Retired %	Unable to work %	Urban %	Rural %	Children %	No children %	All %
Kneeling buses	21	31	21	26	23	21	26	26
More accessible taxis	7	9	17	12	7	16	11	12
Improved access – ramps etc	7	10	7	8	11	8	9	9
Easier access to train/bus station	13	7	7	9	3	7	8	8
Standardised vehicle layout	6	2	3	3	4	10	3	3
Nothing would help	46	42	45	42	52	38	44	43

Source: TNS Survey 2005

Public Transport – Information

4.33 The fact that six in ten say none of the initiatives mentioned would help them to use public transport more (Fig 4.4) suggests that although lack of information provision appears to be a key barrier to use of public transport, the provision of information in the formats suggested in the table are not likely to have a major impact on use of public transport without other factors being addressed.



4.34 Just over one in ten respondents said that ‘bus stops with visual information’ and a slightly lower proportion said ‘timetables and information in large print or audio’ would be the most important information factor encouraging them to use public transport. However, almost a third felt that none of the suggested changes in relation to the provision of information would encourage them to use public transport more, perhaps suggesting that none of the proposed changes were comprehensive or radical enough to make a difference.

4.35 There was little variation by demographic sub-groups in terms of information on public transport in Table 4.12., except that a greater proportion of respondents in rural areas said that none of the options would help them use public transport more.

Table 4.12: % indicating the initiative would encourage them to travel ‘a lot more’ by sub group

	Paid Work %	Retired %	Unable to work %	Urban %	Rural %	Children %	No children %	All %
Bus stops with visual information	10	11	16	13	7	19	11	12
Timetables and info in print/Braille/audio	4	6	8	8	5	10	7	8
Bus stops with audio information	7	7	6	8	2	7	7	7
More announcements on vehicles	5	8	6	8	1	7	7	7
Visual info inside buses/trains	11	3	4	5	3	6	4	4
Nothing would help	64	64	61	59	83	51	64	62

Source: TNS Survey 2005

4.36 In addition to the options shown, respondents were asked what, if anything else, would make them use public transport more, without any further options being provided. The most common options mentioned in addition to those already shown in the tables were:

- More seats at bus stops 1%
- Being eligible for free pass 1%
- Toilets on buses 0.5%
- Cleaner buses 1%
- Better security on buses (cameras or wardens) 1%
- Help getting on and off 1%
- More comfortable seats on buses 1%

Key findings in relation to initiatives that would help increase *public transport* use include:

- A high proportion of respondents indicated that they believe that nothing could be done to public transport that would enable them to use it or use it more.
- Proportions were higher for those who had most difficulty travelling, who were retired, and those living in rural areas.
- Measures related to availability were more often considered to be of benefit than those relating to accessibility or during journey information
- Where respondents did think initiatives would make a difference, ‘staff who understand my support needs’ and ‘more flexible public transport’ were considered important.

EVIDENCE FROM BEST PRACTICE CASE STUDIES

4.37 The principle behind the selection of Case Studies for consideration was that the list of those selected should be representative of different modes of transport and different types and lengths of journey, and that they should have the potential to be rolled out in different parts of Scotland. This necessitated a co-ordinated search for examples of good practice in Scotland and elsewhere in the UK, avoiding overlaps and duplication, but ensuring that ideas for accessible transport provision were set in contexts ranging from rural environments to cities.

4.38 For example, three variations of demand responsive transport were included in the recommended list of studies. Bristol’s dial-a-ride service operates within a city of over 500,000 people. The remaining two case studies described operated in rural Scotland. The five Dial-a-bus services in Aberdeenshire are intended to improve the mobility of older and disabled people. Strathclyde Passenger Transport’s (SPT) Ring and Ride and Dial a Bus provide a door-to-door, fully accessible bus service with trained drivers for the entire Strathclyde Passenger Transport area, funded from Rural Transport Fund monies as well as core SPT funding. Passengers must book their trips, but this can be as little as a few hours in advance, and users make around 300,000 trips per year, at a current average subsidy per trip of £8. The buses will take passengers anywhere within one of 25 defined rural and urban service zones for a normal (concessionary) bus fare. A limitation of the service is that users can only book on the service within the zone in which they live. Despite this, the service has been growing for the past ten years. Its longevity can be ascribed to the fact that it is a core

part of SPT's operations, and is clearly identified with the achievement of SPT's wider strategic objectives.

4.39 Similarly, improving the accessibility of taxi services for disabled people was examined in the contexts of both a rural and an urban environment, with studies of Kirklees MBC's taxi voucher scheme for making this mode of transport more affordable, and West Lothian's rural taxi service, "Carlink". Dundee's Local Transport Strategy was reviewed in the context of the ways in which the Council has promoted social inclusion, the reduction of car dependency, the provision of information on alternative modes of transport and the creation of a safe and attractive pedestrian environment, whilst Victoria Coach Station, in London, provided an example of the accessibility features that might be incorporated into a major urban transport interchange. The list of case studies also featured two alternative schemes for improving the mobility of people with learning disabilities, namely Warrington Borough Council's scheme which includes the provision of a special travel wallet and electronic key fob that can be used to access information, and the visual mapping training initiative run in Montrose by the Angus Transport Working Group. Case studies were also made of two unique schemes that feature important aspects of the travel needs of older and disabled people. These were the Transport Matters service, which provides travel information and support for disabled people in Bedfordshire, and the Scootability service, which provides a loaned electric mobility scooter for older and disabled residents of the London Borough of Camden.

4.40 Information or knowledge provision was examined in the study of the Angus Visual Mapping Scheme which assists independent bus travel for clients experiencing learning disabilities attending an Adult Resource Centre, in Montrose. The scheme was started by Angus Transport Working Group (ATWG) working in collaboration with parents and the Council. The main focus of the scheme is the provision of training for these clients to use a new tendered bus service (52) from Montrose town centre to the Resource Centre. This scheme very much reflects the 'knowledge' rather than 'information' focus of initiatives as it consists of a combination of training and information. The relative success of the scheme is illustrated as in mid 2002, four individuals travelled independently to the resource centre. By April 2005, this figure had grown to 43. Some users are now making independent journeys to other areas using the same method.

4.41 The key issue of staff awareness and training was examined by consideration of the Travel Dundee Driver Disability Awareness Training. The disability awareness training for Travel Dundee drivers started in September 2004 and 263 out of 270 drivers are now trained. The programme consists of 17 minute video, going through a booklet with an explanation of Driver Conduct regulations, some basic sign language and training in the use of the ramp on Travel Dundee's 100% low floor bus fleet. The latter includes role playing different passengers. Drivers are encouraged to treat all disabled people with respect, to pay attention to their needs (e.g. announcing stops), and to deploy the ramp whenever and wherever it is needed, and safe to do so. Disability awareness bus driver training is overwhelmingly welcomed by disabled people and representative groups in Dundee and should be considered as a good model for other operators to adopt.

4.42 The studies listed above were assessed using a common methodological framework, which included consideration of the type of geographical area and population served by each scheme, the type of trips facilitated, the extent to which each scheme was part of an overall

strategy for improving the mobility of older and disabled people, and the evidence that existed for measurable outcomes on people's lives.

4.43 The full case study assessments are provided as Annex Four while here in the body of the report we summarise the key benefits and drawbacks. The aim of this exercise is to outline how the positive elements of previous initiatives can be taken forward in Scotland while learning from any pitfalls or problems.

4.44 Broadly, it is fair to say that each of the case study initiatives, in itself, makes a positive contribution to some element of the travel needs of its target groups. There are, however, some key structural or organisational drawbacks which need to be addressed in order for such schemes to make a fundamental difference.

4.45 First, and perhaps most fundamental is the fact that the considerable majority do not operate within coherent strategy (with perhaps the SPT example being an exception). As a result, many are reliant on short term funding leaving them vulnerable – e.g. Kirklees taxi card scheme. Such schemes are rarely funded as part of an overall strategy and commitment – good schemes are all too often reliant on charitable donations or the energy and driving force of one individual. The problem, then, is that the scheme merely raises expectations, which are ultimately not fulfilled. Several of the Case Studies can be seen as good examples of potentially useful schemes which could have been very successful given different approaches to long-term strategy and resourcing. The lack of a strategic context also means that many of the initiatives are piecemeal, addressing the needs of particular groups of disabled people or of specific aspects of travel and leaving other needs unmet.

Key findings from the case study evidence was that as well as an initiative or scheme needing to fit within an overall package of services or a planned strategy, a crucial element of the success of any scheme is sustainable funding and resourcing.

FEEDBACK FROM TRANSPORT OPERATORS AND GROUPS REPRESENTING DISABLED PEOPLE

4.46 Although a broad range of organisations and individuals (see list at Annex 6) were invited to contribute to the feedback exercise (a copy of which is provided as Annex 6) response was limited. However, the responses received were broadly positive about the aims of the research and supportive of the key findings indicating that the research evidence reflected the experiences of those providing feedback. In addition, some important additional points and issues were raised

4.47 The key issues raised by respondents were as follows:

- Broadly, the solutions and initiatives suggested as being important by the researchers are accepted by respondents although several indicate that the ideas are not new but any move toward their introduction so far has been limited.
- The need for schemes to be national, fair and simple in relation to eligibility was considered important to avoid confusion and inequality.

- It was pointed out that transport in Scotland comprises more than buses, trains and taxis and that all ideas, initiatives and legislation should also relate to ferry services.
- The key role of information and the importance of the way it is provided was broadly embraced. Some operators pointed out that they were already participating in schemes to improve information provision – for example real time information. Some representatives of different disability groups re-iterated the need for careful consideration of the range and format of information provision so that it meets the needs of the broad range of users (for example those with dementia and those with visual limitations). The provision of standardised information in Plain English and available in a range of formats was seen as crucial.
- Additionally, the concept of ‘information’ was broadened out by some respondents to relate to ‘confidence and trust’ or ‘predictability’. Information provision was seen as just one element of the broader range of initiatives and services required to enable transport to be seen as safe, familiar, reliable and predictable to disabled users. It was noted that perhaps the term ‘knowledge’ should be used rather than ‘information’ – i.e. the aim being to ensure that people have the full range of information about how to use transport, what facilities will be available, the necessary knowledge to use transport and the certainty that what they are expecting to happen will happen.
- Furthermore, it was noted that several key factors need to be considered in relation to whether a transport system (or element within a system) is accessible – people need to know about it, be confident to use it, be able to get to it, be able to get on it and be able to afford it. This demonstrates the need for initiatives to be set within broader strategies.
- Some operators raised the issue of the importance of infrastructure and that to a certain extent, what individual operators can achieve is dependent on broader initiatives in the hands of other agencies and/or authorities. In particular, it was noted that the broader physical environment is a challenge but not just for operators – it needs to be seen as the responsibility of local and central government as well.
- The issue of funding such infrastructure and broader environmental changes was also raised as a key issue. Funding is a particular issue given that discretionary funding is currently seen as being in crisis – it is rising at less than the rate of inflation alongside cutbacks in local authority funding leaving non-statutory services potentially vulnerable.
- Another key issue related to infrastructure and funding was raised by a large operator. It was noted that it is important for targets and standards to be set, a timetable agreed and the requirements not be changed in the meantime. Problems with current or previous changing or conflicting guidelines and targets was raised as an issue. Consultation with operators in relation to setting targets and good practice guidelines was seen as crucial in order to set realistic and practical targets.
- Other operators also pointed out the importance of recognising how initiatives aimed at improving the situation for one group of disabled travellers can have an adverse affect on other travellers. Therefore, the challenge is to find ways to meet the needs of a range of (disabled and non-disabled) people while not adversely affecting other groups or individuals.
- It was also noted that mainstream public transport is limited in the service it can provide for disabled travellers owing to other pressures and demands and that, therefore, additional services are required to provide the total service necessary.
- The area of disability awareness training and staffing at all journey points was considered of crucial importance. While recognising the importance of removing

physical barriers to travel, some disability groups also noted the importance of less physical issues relating to, for example, route recognition, paying fares etc.

- The option for accompaniment (or at least free travel for companions) was noted as being particularly important for some groups of disabled travellers.
- Several respondents noted particular issues relating to parking for disabled travellers. While all who commented felt that such provision was crucial, some felt that the current blue badge scheme was not working well while others felt that additional provision of parking for disabled would not be necessary if current provision were adequately policed.
- In relation to potential legislative ‘teeth’ for helping in a move towards equality for disabled travellers, the Disability Rights Commission for Scotland note that the Disability Equality Duty is likely to be crucial. Whilst the Disability Discrimination Act (DDA) 2005 enables retrospective powers (i.e. the power to take an authority to court for discriminating against disabled people), the DED will force local authorities to develop a strategy for promoting equality. Even the Scottish Ministers, including those in key Cabinet positions, will be subject to the Specific Duties. The DED should have a similar impact to the Race Relations Amendment Act. Furthermore, monitoring of performance against this detailed strategy will be carried out through current audit and inspection bodies. The DRC has produced a code of practice to support this legislation, entitled “The Duty to Promote Disability Equality: Statutory Code of Practice for Scotland”. DED will relate to all policies and procedures, and will be the responsibility of senior, strategic management. It will involve Equality Planning.

Summary

4.48 By far the most common suggestion in relation to what might make people use *public transport* more is ‘transport from door to door/someone to pick me up’ suggesting that the problem is not with existing modes of transport but with getting to stations and bus stops from home and getting to the final destination at the other end. Similarly, the options considered by the largest proportions of respondents as likely to encourage them to travel a lot more were ‘an on call, inexpensive and accessible door-to-door taxi service’ and an ‘on-call accessible door-to-door bus. This further demonstrates that the key element is the door-to-door factor perhaps coupled with the ‘on-call or on-demand’ element. A further significant proportion of respondents suggested that ‘someone to accompany me’ would be the most important solution to their travel difficulties. A significant minority feel they are unable to travel without a companion suggesting that any change to existing transport options in relation to accessibility, frequency etc will not make a difference.

4.49 Although several specific suggestions were made in relation to improving some aspects of existing public transport provision – for example, ‘more frequent trains/buses’, ‘more direct buses/train routes’, these were less common and in fact, largely reflect the comments made by the general population in relation to what would make them use public transport more.

4.50 Broadly, it would suggest that apart from some marginal or minor changes (‘seats for use while in queues’, ‘more lifts and ramps at stations’ and ‘more help from staff on transport’), the significant changes required are not necessarily to the functioning of the existing public transport system but rather an additional element to be overlaid enabling

people to get to and from existing services and, in some cases to be accompanied while doing so. One of the following most common suggestions was to make taxis cheaper or provide taxi cards which again echoes the importance of the door-to-door aspect of transport. There is a significant minority who feel that the only way they would travel more would be by having access to a car or affordable taxi service.

4.51 So far, evidence from the different sources examined for this extensive and comprehensive research indicates that there are a range of potential individual solutions which need to be examined as follows:

- The opportunity to be accompanied by a companion from door to destination spanning different modes of transport.
- Adding on a flexible, user-friendly, fully accessible, affordable door-to-door element to existing transport provision (with appropriate concessions).
- Further provision and stricter enforcement of parking for disabled people.
- Providing a reliable pre- and during-journey information service encompassing all elements of travel (times, stairs, staffing, vehicle quality etc) and spanning different modes of transport.
- Making existing conventional public transport provision easier to use in relation to:
 - physical accessibility
 - freedom from fear or intimidation
 - affordability
- Funding to enable access to personal adapted car or system of facilitating access to shared accessible car.
- Improving the physical environment of public transport buildings and infrastructure e.g. railway stations, and the pedestrian environment e.g. kerbs, stairs.
- Building customers' confidence and trust that they can rely on all elements of a transport system that by its nature involves a chain of provision and guaranteeing accessibility and reliability across the whole journey.

4.52 However, as evidence from the various elements of the study indicates, none of the above solutions can be viewed in isolation. The case studies, audits and evidence from the quantitative survey indicate that there is rarely one barrier facing disabled people in relation to travelling freely and widely. Additionally, different people face different barriers; different forms of transport have their own barriers, using more than one form of transport for a journey throws up additional challenges. Therefore, it is clear that any move towards creating equality of travel opportunity will require a range of co-ordinated schemes and initiatives tailored to both the local physical environment, the needs of specific people in any local area and dovetailing with existing transport opportunities. Additionally, all modes of transport need to be included – of particular importance in the Scottish context is ferry and air travel for example. A transport policy enabling a disabled traveller to arrive at a ferry port by bus but then not cover ferry accessibility would be a failure in the chain of provision.

4.53 A danger would be for a local authority or regional transport authority, for example, to introduce a scheme such as a Dial a Bus scheme without a) assessing the potential impact on the travel opportunities for local disabled people b) without addressing other barriers such as information provision, pavement and other obstacle issues and linkages with other forms of transport and c) most importantly without ensuring the scheme formed part of an overall

strategy to ensure sustainability of provision. In other words, a careful assessment of the current local transport system, the existence of particular schemes and the needs and particular barriers of local disabled people needs to be undertaken in order to match the kinds of solutions identified in the case studies and survey work with the actual needs of the local community.

4.54 Additionally as referred to throughout the report, previous research has clearly identified barriers and solutions, but as discussed in Chapter 2, key inequalities still exist demonstrating that more is required than has so far been achieved. Therefore, the following and final chapter focuses on the specific recommendations which the researchers believe need to be adopted in order to make a real difference to the travel opportunities and travel behaviour of disabled people and, in addition, discusses how such recommendations could best be introduced and implemented.

CHAPTER FIVE: CONCLUSIONS AND RECOMMENDATIONS

Chapter 5 Objectives:

Overall the chapter recommends what actions are required in order to move towards equality of opportunity in relation to travel. Specific objectives include:

- **Identify structural barriers that have prevented fundamental changes in the past;**
- **Outline the specific range of initiatives and schemes required to move towards equality of travel opportunity;**
- **Provide recommendations as to how to facilitate the introduction of such initiatives and schemes.**

INTRODUCTION

5.1 Previous chapters have clearly demonstrated that there are currently inequalities in the travel behaviour of disabled and non-disabled people. Additionally, Chapter 2 showed that generally, disabled people do wish to travel more than they currently do. This indicated that the different travel behaviour is largely caused by differences in equality of opportunity and ease of travel between disabled and non-disabled people (and between people with different disabilities). Earlier chapters have also demonstrated that many of the difficulties facing disabled people (and indeed some of the potential solutions to these difficulties) have been identified by previous research. However, despite this, the situation remains that there are decided differences in opportunity and hence travel behaviour. This suggests that there are some additional structural barriers which have prevented recognised changes from being introduced.

5.2 This chapter, therefore, seeks to address two key issues relating to addressing inequalities in travel opportunity. First, the chapter discusses some of the structural and administrative barriers which might, at least, be partial causes of why some of the barriers to equal opportunity of travel have not previously been addressed. Second, the chapter examines how to achieve the additional travel opportunities that disabled people want and who should take responsibility for bringing about the required changes. Specifically, an indication is made of what needs to be contained in the National Travel Strategy or addressed at a national level (including the potential need for new primary legislation) and what needs to be addressed at the local/regional level. The policy context of the Disability Discrimination Act and the Disability Equality Duty is also considered.

LACK OF STRATEGIC CONTEXT

5.3 There is evidence from this and previous studies that, if public transport provision for disabled people is to flourish, it needs to be placed in the context of a strategy. There are many examples of schemes that have been well-received by users and successful against other measures, but which have then folded because they were reliant on one or two enthusiastic people and/or short-term funding. If such schemes are to continue to provide benefits, they need the certainty of being part of an authority or operator's core functions.

This has been demonstrated by the example in this research of Dial a Bus and Ring and Ride in the SPT area: this scheme has continued to expand, and is fully institutionalised within SPT's activities, because it can be seen to clearly assist in the organisation's strategic objectives, as set out in the Strathclyde Passenger Transport Strategy (SPTS).

5.4 The case study evidence clearly shows that as well as an initiative or scheme needing to fit within an overall package of services or a planned strategy, a crucial element of the success of any scheme is funding. The Case Studies demonstrate the point that such schemes are rarely funded as part of an overall strategy and commitment – good schemes are all too often reliant on charitable donations or the energy and driving force of one individual. The English Case studies illustrate this very well, with Transport Matters due to end when the Lotteries Commission money runs out, in 18 months time, and the Kirklees Taxi Voucher Scheme having already been terminated. The problem, then, is that the scheme merely raises expectations, which are then ultimately not fulfilled. These two Case Studies can be seen as good examples of potentially useful schemes which could have been very successful given different approaches to long-term strategy and funding.

It is the research team's recommendation, therefore, that public transport for disabled people is set firmly within the context of wider transport policy. If a separate strategy is prepared, as has been proposed in previous studies, there are two possible problems: firstly, the strategy might never be prepared; and, secondly, there is a risk that a separate stand-alone Transport Strategy for Disabled People might be marginalized.

STRUCTURAL BARRIERS

5.5 A real barrier to the development of a coherent strategy for disabled travellers (or more broadly, fundamental changes to transport provision as a whole) is the organisation of travel provision and transport legislation; up to now there has been a lack of strategic direction and there is a spread of responsibility at UK, Scotland, Regional, and Local levels, as well as the wide range of different travel providers.

5.6 The delivery of strategy to improve transport for disabled people is dependent on the interplay of many different actors and, as in other areas of transport, they are motivated by a range of different factors. Private bus operators must be profit-maximising (or at least optimising) and will introduce improvements where they perceive there to be a short or long term financial benefit and/or where they are required by legislation to do so. However, as evidenced by the DDA Regulations on the accessibility of public transport vehicles, such legislation is clearly negotiated. Local authorities are motivated primarily by a need to fulfil their statutory duties; by financial inducements from national government; and by local political priorities. They will also respond to exhortation/guidance from central government, but a consistent response to that from all authorities equally is unlikely to be forthcoming. Private rail operators will introduce those improvements that they are required to introduce according to the terms of their franchise; and Network Rail is ultimately answerable to its Board although, since the Railways Act 2004, Network Rail (Scotland) is, arguably, now much more responsive to national political imperatives. Thus a national strategy for improving transport for disabled people must consider ways in which these different players can best be induced or encouraged to realise those parts of the strategy in whose delivery they have a role to play.

BROADER SOCIAL AND SPATIAL CONTEXT

5.7 It must also be noted that not all the barriers faced by disabled people relate to transport policy. There are other key inequalities which contribute significantly to current inequalities in relation to differences in socio-economic status and levels of social inclusion. This is not the place for a broad discussion of inequalities in society but clearly, changes to transport policy need to be set within a broader context of changes to broader social policy in relation to access to education and employment for example. Achieving equality of opportunity to travel will not necessarily lead to equality of employment opportunity without broader and more fundamental changes.

5.8 It is also clear that there are some circumstances whereby it will not be possible, almost whatever a transport operator does, to enable some disabled users to use public transport. There may be situations where provision could be made which would enable small numbers of users to access some forms of public transport but that the cost involved in such provisions would be prohibitive. Evidence from the MATISSE²⁰ project also indicates that if the actual mobility levels of disabled people are to achieve parity with those of non-disabled people, then social and policy changes need to be effected beyond the sphere of transport. In order to take part in this process, therefore, those responsible for providing transport should engage with policy makers in other sectors, such as those responsible for employment, education and social services. Whilst taking such a holistic approach, the importance of accessible transport provision as an important enabler and potential catalyst for change should nevertheless be promoted. In other words, the solution does not always lie within the system of public transport and the responsibility for the provision of viable alternatives (or the funding of such) will rest with government.

5.9 There are recognised spatial differences in travel, for example people living in rural areas tend to make fewer trips, that are often multi-purpose, than do those in urban areas. Analysis of the SHS demonstrates differences in car use between urban and rural areas, which are linked to the lack of availability of alternative forms of public transport and distances travelled for amenities and employment. Addressing the needs of disabled people in rural areas will require different solutions to be developed from those that may be priorities in urban areas. At the same time it is necessary to address the lack of availability of public transport generally in rural areas; only then will some of the solutions discussed below become relevant.

ISSUES: AFFORDABILITY, FEAR AND STAFF TRAINING

5.10 Before going on to discuss specific changes and priorities, we discuss some exceptions and assumptions that we have made in relation to the requirements

5.11 The affordability of transport emerges as an interesting and complex issue. It did not appear to be a priority for survey respondents – accessibility and ease of travel appeared much more important. However, we can surmise that for transport to be accessible it needs to be affordable, but that in the first instance, people consider accessibility to be the key. Cost of travel is almost an irrelevance if journeys are considered insurmountable for other reasons. It

²⁰ Manual for Assessing the Impacts of Transport Policy on Social Exclusion (European Commission, DG for Employment and Social Affairs 2003)

only becomes an issue where for example in the case of taxis in some areas at least, accessibility has been addressed. The discussion of the role of concessionary fares for disabled people to use conventional public transport in Chapter 3 demonstrates that such an initiative only brings about a partial improvement in travel opportunities, and should not be considered as a complete solution. Additionally, in Chapter 1 we noted the suggestion made in a previous research study that concessionary fares for older people may have led to more crowded buses which in turn may lead to lower use by some disabled people.

5.12 Another issue which emerges as important but is dealt with differently in this analysis is the issue of fear and intimidation while using public transport. There are two aspects to this. One is the fear of witnessing or becoming a victim of crime and antisocial behaviour while travelling. The other, is a lack of confidence in making the journey. Fear and intimidation is clearly a barrier to using transport for many disabled people (evidence from the SHS shows that it is a more common barrier among disabled than non-disabled people). While some of the solutions will specifically address the issue of confidence to travel, we do not directly address the issue of fear of crime in the current analysis. This is because it is an issue which is partly addressed by some of the other initiatives and solutions discussed below. Additionally, the issue is much broader than the focus of the current study and is the subject of other research being undertaken by the Scottish Executive in relation to addressing the problem as a whole rather than just for disabled people.

5.13 Almost all proposed initiatives require staff training and awareness raising. Either that, or the appointment of specialist staff and more staff on buses such as conductors to help address the fear of travel – both in relation to fear from crime or intimidation and uncertainty in relation to being confident of reaching the destination. The survey and audits have shown that many disabled people have had negative experiences with staff on public transport and that, even for those that have not, there is a fear of so doing, which puts them off travelling.

5.14 The Travel Dundee driver disability awareness training case study shows how one bus company has addressed this issue. However, unless required by statute, or via a contract (where services are contracted for by a public body, for example, as with bus services in London), it is not possible to ensure that all companies will act in this way, nor that all drivers will follow their training even where they have been trained. Some bus companies use mystery shoppers to assess driver behaviour (although Travel Dundee does not). However, even where mystery shoppers are used, it is the company's responsibility to define appropriate levels of customer service from its drivers – and these may or may not be sufficient to make a disabled traveller feel confident enough to use the company's services.

CHANGES AND PRIORITIES

5.15 As identified at the end of Chapter 4, there are a range of key changes identified as priorities for change by survey respondents. The different changes reflect differences in the needs and priorities of those in different socio-economic situations and with different disabilities. For example, access to a car is seen as more important by those of working age with children while the opportunity for accompaniment is seen as more important by older respondents. In summary, the key changes or requirements are:

- Door-to-door transport (either an on-call door to door bus or an on-call inexpensive, accessible taxi service)

- The opportunity for accompaniment during travel
- Adequate provision and enforcement of parking for disabled drivers and passengers
- Tailored journey planning/ in-trip information
- Improved physical accessibility of vehicles
- Improved accessibility of stops, stations and interchanges
- Improvement in the general physical environment including pavements, roads, signage and street furniture.
- Access to a suitable adapted car (either through grant/subsidy or shared car scheme)

The key changes or requirements are now discussed in relation to:

- What change or initiative is required?
- What would it overcome?
- What implementation options are there?
- What obstacles would still be left?

The chapter then moves on to examine:

- Who should be responsible?
- What are the key barriers to implementation?
- How could these be overcome?

Provision of door-to-door transport

5.16 This emerges as the most commonly required option for a significant proportion of disabled travellers and potential travellers and both the idea of an on-call door to door bus service and an on-call, affordable taxi service were popular among respondents to the survey. A key component of both options is the ‘on-call’ or ‘on-demand’ element. This feature does raise some important questions for consideration about cost and availability so that a fully on-demand service might not be possible. Despite this, it is important to note that this is perceived to be very important by disabled travellers. While noting the potential practical difficulties associated with the implementation of an on-demand service it is important to accept that as most non-disabled travellers can travel without pre-booking. In the spirit of aiming for equality of opportunity to travel, the enablement of spontaneity in travel for disabled people is crucial. This point also relates to the provision of accompaniment discussed below. However, it could also be argued that as among the general population most people who don’t have access to a car all or some of the time cannot afford taxis instead, and so are limited by the bus timetable which by its very nature is not on-demand, nor is it door to door. Therefore, the argument might be that it is unrealistic to expect that disabled people should have such on-demand services which are not available to all members of society. The priority given to this needs to be considered by the Scottish Executive alongside other transport related policies aimed at closing the opportunity gap for people and places, which is an aspiration of the 2004 Transport White Paper²¹.

5.17 Perhaps obviously, the provision of on-demand, door-to-door transport (whether bus- or taxi-based) would contribute to removing a range of obstacles and difficulties identified by disabled travellers (or potential travellers). First, there are some disabled people who are unable to make the journey from home to a public transport stop or interchange and from a

²¹ Scotland’s transport future; (Transport white paper, June 2004)

destination stop or interchange to final destination. Second, it addresses the issue of lack of confidence to travel. This encompasses uncertainty about the reliability of different stages in the journey, (including availability of support when required, reliability of transport, ability to access and use vehicles safely, ability to access interchanges and negotiate obstacles en route,) as well as personal safety while travelling. Thirdly, this will decrease some disabled peoples' reliance on friends and relatives for travel; and reduce the cost of relying on taxis.

5.18 Options for introducing such a system generally relate to the types of vehicle used, the providers, and access/booking systems. The Ring and Ride/Dial a Bus system currently operated by SPT throughout its area provides one bus-based model which could be adopted as a base model. It does have some drawbacks, notably the need to book 12-24 hours ahead, and the (sometimes) quite geographically small service zones in which Dial a Bus operates. Additionally, any system of this nature will have a high unit cost. SPT's system costs £8 per passenger trip in subsidy (most users pay nothing); West Lothian carlink (again based on relatively small service zones) £10.60 per trip (net of a fare of between £1 and £1.60). Alternative options (perhaps to offer additional flexibility or in areas where demand is likely to be lower) relate to the use of taxis (for example like, once again, West Lothian carlink) or the use of a pool of specialist vehicles operated (or funded and enabled) by the local authority (again depending on demand).

5.19 Whatever delivery option was used, some key elements would be required in order for the service to be successful. First, the service needs to be as 'on-demand' as possible, meaning that if it is impossible for an on-demand service, booking should be as flexible and as last minute (combined with an option for block or repeat booking for regular trips such as to work or education for example)²². Second, the drivers/operators need specific training in disability awareness and part of their duties needs to be the provision of help (if required/necessary) to access and exit the vehicle for example, and from the vehicle to final destination (e.g. SPT's Dial a Bus drivers carry shopping and push wheelchairs into homes from the street outside). Third, the cost to service users needs careful consideration. For example, as noted above, there is a gap developing between those who can use conventional public transport and who have a concessionary pass and those who can't currently use public transport, are therefore unable to utilise concessionary bus passes but are not eligible for concessions for taxis or other door-to-door alternatives. From an equity point of view, there are arguments for making such transport free for disabled people, so that they can enjoy the same benefits as older people who are not disabled do on conventional buses at present.

Accompaniment

5.20 Some disabled people consider it to be an absolute impossibility for them to travel without a travel companion while others can perhaps manage but find the journey difficult or challenging. A significant proportion of survey respondents felt that the opportunity for accompaniment from door-to door was the most important potential solution to travel difficulties. Again, a key requirement here would be for the service to be as on-demand as possible within the confines of making this practical. The issue is not to be reliant on

²² The research team recognise that there are vast challenges relating to the development of demand-responsive transport – not least the development of systems for booking, planning and despatch. It was beyond the scope of this research to examine in great detail the optimum options for developing such a system and we would suggest this is an area for further research.

availability of carers as this means individuals are tied to travelling at a time convenient to them. There is also the point that not all disabled people have, or need, carers.

5.21 There are some different delivery options for such a service. First, at a basic level, this might involve free travel for carers, to make it easier for those who already have a travel companion to travel. Another option would be the provision of a pool of trained people who can be booked to accompany disabled travellers (perhaps employed and operated by local authorities or properly funded voluntary organisations). For example, in Paris, the city's transport providers, SNCF and RATP, combine to offer a service known as "Les Compagnons du Voyage". Available since 1993, this scheme provides a trained escort for anyone who feels the need to be accompanied when making a journey by public transport. When it is a very young person being accompanied, then the service has an element of travel training and education. Importantly, the pool of escorts includes people trained to respond to a number of different needs, who are able to properly assist young children, older people and disabled people, and who are skilled in using sign language and in effectively guiding blind and partially sighted people.

5.22 A drawback to the Paris model is that it only operates within the Paris metropolitan area. A truly effective scheme would need to be designed in such a way that transport provider and geographical boundaries can be crossed with ease. Additionally, this should not be seen as a replacement for addressing some of the inadequacies of public transport in relation to information provision, physical accessibility and staffing. There is a significant sub-group of disabled travellers who do not need accompaniment to travel but do need to be able to rely on accessing information in a suitable format and deal with disabled aware staff. These are discussed in detail below.

Adequate provision and enforcement of disabled person's parking

5.23 This is an area where further research and analysis is required, particularly at the local level as, clearly demand and availability of parking for disabled drivers varies significantly across the country²³. There are also key differences in relation to the private provision (off street parking spaces for disabled people such as supermarket car parks for example) and public provision (designated parking bays within controlled parking zones or parking concessions related to Blue Badges). It is also unclear to what extent the issue of misuse of parking for disabled people relates to use by those without Blue Badges or misuse by Blue Badge holders. In interviews, operators pointed out the irony of Blue Badge holders being able to park at bus stops (those without bus stop clearways), thus negating the benefits for disabled people of investment in low floor buses.

5.24 The first stage in relation to assessing the provision of adequate parking would be a local authority (or settlement) based study of current provision. However, the issue of enforcement is complex – first as there is no 'official' role in relation to the enforcement of parking for disabled people in private car parks. Second, as the status of the misuse of public parking or Blue Badges is often outwith the current powers of traffic wardens or parking attendants owing to its position as a fraud rather than a simple parking offence.

²³ The Scottish Executive has commissioned research into the abuse of parking for disabled people, which is ongoing.

Tailored Journey Planning Service and Information Provision

5.25 This encompasses both on-board and pre-journey related information with the importance of each differing between those with different disabilities. The importance of on-board information such as when a bus or train is nearing a particular stop or is about to move off has been demonstrated particularly by the audits that were discussed in previous chapters. Additionally, the importance of the provision of real-time timetable information at bus stops and train stations in accessible formats including both visual and audible announcements (and displayed in readily accessible places) has been shown. Perhaps the most important element is the reliability of the information being available with some minimum guarantee of what will be displayed and available at a stop, station, interchange or on-board so travellers have some consistency to rely on.

5.26 A tailored journey planning service entails the provision of a much broader range of information in order for journeys to become as predictable and reliable as possible for disabled travellers. The ideal service should be able to provide full information across all modes of a complete journey – however long or complex. For example, a traveller wanting to travel from their home town of North Berwick to Inverness, using a combination of bus and train travel, should be able to obtain full journey information well in-advance of proposed travel date in relation to: timetables, on-board facilities (accessibility, toilets, staff, luggage facilities, on-board announcements) connections, journey within and between interchanges (stairs, lifts etc), length of wait, waiting facilities (and accessibility), availability of staff etc.

5.27 Clearly, there are some key challenges to address in order to be able to provide such detailed information spanning a range of modes of transports, transport providers and regions/local authority areas²⁴. Not least, a full physical audit of all stations, interchanges and vehicles would be required. However, such information is crucial to some disabled travellers so such a service is a key element of any move towards equality of opportunity. Such a service would need to be introduced in a phased way with the prioritisation of different stages and incorporating existing systems and services. Start with audit and inclusion of major nodes and interchanges and build from there prioritising on the basis of potential demand. Also, some operators, for example Scotrail, currently are able (and do) supply such information about journeys made wholly on their services, including interchange information; this would need to be linked with information from other transport providers. Government provided services such as Transport Direct or Traveline could be used as vehicles to provide such a service, which would need to be accessible to all in a range of formats

5.28 The introduction of such a service would clearly require some kind of incentive or potential penalties for operators. Local Authorities (or Regional Transport Partnerships), where the relevant power was ceded to them by their constituent local authorities) could facilitate this by, for example, specifying what information should be available about timetables, accessibility of vehicles, driver training and on-board facilities as part of their Bus Information Strategy – should they choose to use the powers over bus information that they have under Part 2 of the Transport (Scotland) Act 2001. It is however possible to envisage a situation where, if operators perceived the requirements of a draft Bus Information Strategy to be too demanding, they might appeal against it, so there is no guarantee that all these

²⁴ The Scottish Executive has already commissioned work examining issues around transport accessibility information, currently unpublished.

things could be delivered in this way. Furthermore, the situation could arise where bus operators in one area accepted them, but operators in another area did not. For this reason, responsibility would need to be at the largest possible geographical level in order to ensure that services did not cease once a particular geographical boundary were hit.

Physical accessibility of vehicles

5.29 Arguably, this is perhaps the furthest developed element of a move towards improving accessibility of transport in general. However, so far, these targets for improvement have been agreed in negotiations between the industry, legislators and the groups lobbying on behalf of disabled people. The viewpoint of operators – which came out strongly in the feedback discussions – was that these targets could be brought forward and/or applied to existing vehicles, but that additional money would be needed from government to pay for this.

Physical accessibility of stations, stops and interchanges

5.30 Although, as discussed above, the accessibility of vehicles is being addressed (however slowly) similar targets are not in place in relation to public transport stops and stations. Clearly, an accessible train is only useful if the station itself is accessible so the physical environment of stations and stops are as important as the actual vehicles. Accordingly there should be a phased plan for the development of all stations and interchanges prioritised on the basis of flow-through and potential demand.

5.31 As all train stations in Scotland (with the exception of Edinburgh Waverley and Glasgow Central) are Scotrail operated, this could be relatively simple to plan. Accessibility improvement is already part of service and franchise agreements but a key barrier is that money provided is very limited. The only way of speeding up the phasing-in of accessible stations is to provide more money, as it is very costly to upgrade all stations.

5.32 The situation relating to bus stations and stops is more complex given the range of owners of bus stations (including local authorities and transport operators). This makes the mechanisms for setting targets to upgrade such interchanges more difficult. Again, this is perhaps best brought about by duties placed on operators and local authorities.

Removal of barriers in the general physical environment (including pavements, roads, signage and street furniture).

5.33 Local Authorities should be given a statutory duty to programme planned improvements to the pavements and roads in their area with the needs of disabled travellers in mind and giving priority to areas where it is known there are concentrations of disabled people.

5.34 Also there is a need to issue clear guidelines to other organisations in relation to signage and street furniture. Again, this needs policing/monitoring, and detailed training of contract supervisors, to ensure that issues such as sign placement, layout of tactile paving, layout of street furniture, and maximum tolerances for crossfalls, gradients and kerb

upstands, are dealt with in such a way so as to deliver an increasingly “barrier-free” environment. Nonetheless, for such “micro-level” matters, a consistent approach will be difficult to deliver across the country, since so many different people are responsible for the design, construction and maintenance of the street environment.

Access/aid to access adapted, accessible car

5.35 One way of facilitating this would be an extension of the current system whereby the Higher Rate Component of the Disability Living Allowance can be spent on leasing a vehicle. There are four main ways in which Motability currently seeks to meet the needs of disabled people; the independent, not-for-profit organisation can provide,

- a new car on a three-year contract hire lease.
- a new or used car on hire purchase, over a term of two to five years.
- a new or used powered wheelchair or scooter on hire purchase, over a term of one to three years.
- a new or used powered wheelchair or scooter on contract hire lease for up to three years.

5.36 Most Motability customers choose the contract hire option, which involves a single, regular payment that includes comprehensive insurance, maintenance and breakdown cover.

5.37 Another option, rather than providing individuals with help to purchase or adapt a car (and an option which fits in with broader transport policy in relation to congestion reduction and reducing emissions), would be the adoption of a model similar to the Car Club scheme which currently operates in Edinburgh. An additional barrier (over and above general difficulties introducing Car Clubs in general) is the likely geographical dispersal of potential club members.

5.38 A similar scheme to the proposed is the ScootAbility mobility scooter loan service, run by the London Boroughs of Islington and Camden, aims to overcome barriers to travel for older and disabled people by delivering a fleet of mobility scooters to the homes of suitable users, leaving them for a period of several days at a time. The objective of this scheme is to address the problem of social exclusion, and increase quality of life, through mobility. An initial project, the “Access to Quality of Life” project, which was funded through the Older People’s Health Improvement Programme (HImP) by the Health Action Zone in Islington and Camden, undertaken in 2000/2001, showed that the provision of mobility scooters provided an effective alternative to accessing conventional public transport for people who had a limited ability to walk. The travel patterns of participants were recorded both before and after the commencement of the loan scheme and showed that users were able to reduce the number of car trips provided by friends and relatives. Feedback received at the end of the scheme was extremely positive and indicated that quality of life had been improved for the duration of the loan period.

Additional elements for consideration

5.39 Despite the broad range of initiatives discussed above, the introduction of the full range might still lead to some gaps potentially not being filled. Such gaps might need to be addressed by broader social policy but should be given consideration in any strategy.

5.40 The introduction of a door-to-door transport system (such as a dial a bus) – still leaves the problem of negotiating the end destination. If this is another transport related place it should be covered by another element of strategy. If not, this re-iterates the need for a holistic approach to equality of access and opportunity that is wider than merely transport related elements.

5.41 An issue which is mentioned at several points but is perhaps not clearly stated above is that some elements do not properly address longer journeys – for example going on holiday. Any strategy must consider ways of ensuring that crossing different geographical boundaries and using different forms of transport as far as possible does not adversely affect opportunity of travel.

KEY REQUIREMENTS FOR IMPLEMENTATION

5.42 As identified by previous research and clearly evidenced in the current research, some element of national planning and strategy is required for any real move towards equality of opportunity to be achieved. The previous lack of strategic context, enforcement (in the form of duty or penalty) and difficulties in introducing comprehensive changes within a piecemeal structure, have limited progress to date.

5.43 It is probable that the introduction of the Disability Discrimination Act (DDA) 1995 and associated legislation and organisations will have a positive impact on future developments. Since 1995, the rights of disabled people have been safeguarded in law in the UK by the DDA. Since the 2nd of December 1996, it has been unlawful to treat disabled people less favourably, for a reason related to their disability; since the 1st of October 1999, service providers have had to make “reasonable adjustments” to enable disabled people to use their service. More recently – since the 1st of October 2004 – service providers have had to make “reasonable adjustments” in relation to physical features of their premises in order to overcome physical barriers to access.

5.44 The DDA aims to eliminate discrimination against disabled people, and is divided into several parts. The parts of the Act that have a particular relevance to transport are Part 3, which deals with access to services, and Part 5, which sets access standards for certain types of vehicle. Other parts of the Act are Part 1 (The Meaning of Disability), Part 2 (Employment and Occupation) and Part 4 (Education).

5.45 Any service consisting of the use of a means of transport was exempted from Part 3 of the 1995 version of the Act, although services associated with transport infrastructure were not covered by this exemption. This meant that services at stations and interchanges, as well as information services, were subject to Part 3 of the Act. This exemption for transport was lifted when the 1995 Act was amended by the Disability Discrimination Act 2005.

5.46 The 2005 Act also places a duty on all public sector authorities to promote disability equality, and thus impacts significantly on how public services are run. This Disability Equality Duty for the Public Sector means that public sector bodies have a duty to promote disability equality in all aspects of their work and in this way is similar to the Race Relations Amendment Act. This duty provides a framework for public authorities to tackle discrimination and its causes in a proactive way, and encourages them to “mainstream” disability equality into all activities. Authorities are required to both have “due regard” to disability equality when making decisions that will affect the future, and take action to rectify the consequences of past decisions that have compromised disability equality. The implications for this in Scotland are set out in the Disability Rights Commission’s Code of Practice on the Disability Equality Duty (Scotland). This Code of Practice was laid before Parliament on the 24th of November 2005, came into force on the 1st of February 2006.

5.47 Section 3 of the 2005 Act imposes duties on public authorities to promote equality of opportunity for disabled people. The Scottish Parliament confirmed, on the 24th of February 2005, that it was content for Parliament to legislate for Scotland in this devolved area. The proposed new duty for the public sector to proactively promote disability equality (DED) is likely to have a key role in the improvement of accessibility for disabled people.

5.48 However, it will still be necessary for a range of primary legislation to be introduced in order to provide a coherent structure for the development of appropriate transport strategies at different levels and, in particular to enable the effective monitoring and policing of such strategies and initiatives.

It is the research team’s recommendation, therefore, that public transport for disabled people is set firmly within the context of wider transport policy. A clear strategy should be developed and should firmly state that as well as adhering to the spirit of the DDA, the range of initiatives and schemes identified as necessary in this research must be supplied where need is identified. The auditing of the need for particular schemes in local areas should be a duty of local authorities and the Disability Equality Duty should be a useful tool in facilitating this.

5.49 As discussed above, the delivery of strategy to improve transport for disabled people is dependent on the interplay of many different actors and, as in other areas of transport, they are motivated by a range of different factors. Thus a national strategy for improving transport for disabled people must consider ways in which these different players can best be induced or encouraged to realise those parts of the strategy in the delivery of which they have a role to play.

The Scottish Executive is currently developing the National Transport Strategy (NTS). It is this team's recommendation that the NTS is used as an opportunity to identify and to state that disabled people have significant problems in travelling, that they travel much less than people who are not disabled, and that there are significant transport challenges for national, regional and local strategies if this situation is to be improved to allow disabled people to take a fuller part in society. The authors of the NTS may also wish to consider whether there is a need to set an aspirational target (at least) for the level of mobility of disabled people, towards which Scotland should work.

5.50 This research has identified and measured the scale of the transport problems that disabled people in Scotland face. It should therefore allow the NTS to include objective(s), to be achieved through a combination of national, regional and local actions that will bring about a reduction in these problems. The inclusion of these problems and objectives in the NTS could enhance how seriously they are viewed by those at the regional and local levels.

It is the research team's understanding that the NTS will *not* include a detailed list of projects and measures to be pursued at the national level, but it is to be followed by a National Strategic Projects Review (NSPR). Some of the measures that this research identifies that could bring significant improvements for disabled people's travel are dependent largely on some level of national action and it is recommended that these measures are therefore appraised alongside other projects in the NSPR.

5.51 These might include for example a systematic prioritised set of enhancement to the accessibility of the busier rail and bus stations in Scotland; and enhancements to Traveline Scotland to provide the level of pre-journey information that disabled people require. These are projects that would need to be taken forward at a national level.

Introduction of duties and penalties

5.52 As noted above, there is no method currently in Scotland to ensure that local authorities all work together towards common transport objectives, one of which may be to improve transport for disabled people. Without inducements to do so, or the threat of withdrawal of funding if they do not, then, as argued above, they are likely to pursue local political priorities. This tension between local autonomy on the one hand, and providing a consistent level of service across Scotland on the other, is one that has been recognised in other studies and is an issue that goes much wider than transport. However, with specific regard to transport for disabled people, without some national and local targets, monitoring of those, and incentives and disincentives for local (and now regional) authorities to achieve them, then the research team is of the opinion that there is a greater risk that transport for disabled people will not improve on a consistent basis across the country.

There is a need to allocate responsibilities for different elements of transport for disabled people according to the spatial level at which activities are best addressed and whether they are best public or private sector led. A further need is outcome, as opposed to output, based monitoring of strategies. For example, one simple outcome might be the narrowing of the gap in trips made between disabled and non-disabled people, as measured by the SHS. There is also a requirement to have incentive based contracts for transport providers that specifically include targets for provision for disabled people that are properly monitored. Clearly allocating responsibilities and obligations will require additional funding to meet these new requirements.

Regional Strategies

5.53 New statutory regional transport partnerships (RTPs), which will be formally constituted on 1st April 2006, must adopt a statutory regional transport strategy (RTS) by April 2007. The RTS must, by law, show how transport in the region will “promote social inclusion” and “encourage equal opportunities and, in particular, the observance of the equal opportunities requirements” (Section 5, Transport (Scotland) Act 2005). This is encouraging from the point of view of transport for disabled people. However, the draft guidance on RTSs (November 2005) does not give a great deal of further advice as to how such objectives might actually be operationalised, nor an indication of any desirable minimum levels of provision of transport (e.g. taxicards, Dial a Bus, quality of street environment) for disabled people.

Without a clear lead from the Executive, there is a risk therefore that different RTSs will deal with the issue of transport for disabled people in very different ways and give it very different levels of priority, even though this research has identified broadly similar needs amongst disabled people right across the country. It is recognised that there is a need to allow local and regional variations to be reflected in RTSs, but in the case of transport for disabled people there may also be a need for stronger central prescription.

Local Strategies

5.54 Local Authorities are now developing their second round Local Transport Strategies. These are non-statutory documents that give an indication of (some of) the planned transport activities of local councils. Guidance from the Scottish Executive has indicated in broad terms what the content of an LTS should be, although (unlike in England) there is no link between the content of the document and the amount of transport capital funding that an authority receives. The guidance is clear that LTSs should explain how well the transport system currently meets the needs of disabled people. However, it is not prescriptive in stating that authorities should then set out policies and measures to *improve* this situation (with the exception of the accessibility of taxis). In contrast, it does state that there is an expectation that LTSs will seek to improve local bus services, improvements in local rail infrastructure, and improvements in road safety – amongst other things. A more consistent approach to meeting the transport needs of disabled people across Scotland might have been achieved had the Guidance on LTSs asked for each one to contain:

- Consideration of improvements to existing public transport provision for disabled people (Dial a Bus, Handicabs, CT schemes).
- A costed and prioritised programme of footway, crossing and dropped kerb enhancements to benefit disabled people’s mobility.
- An analysis of the use, cost and demand for existing Taxicard schemes, and evaluations of possibilities for their enhancement.

5.55 However, even if such requirements had been included, there is no direct means for the Executive, or an RTP, to monitor the implementation of such improvements. In contrast, the English LTP system²⁵, were it to be adopted in Scotland, would provide a mechanism of monitoring and evaluation against the plan’s objectives, targets and programmes, and thus an ability for a higher authority to ensure that plans were actually implemented.

Local authorities should have a duty to audit need and arrange supply on the basis that most journeys made by most people are local. It is necessary for a means for monitoring to be created. Without this approach there is a greater risk that Scottish local authorities’ approaches to demand responsive transport schemes, Taxicard and footway maintenance and enhancement will remain inconsistent and piecemeal across the country.

Summary of recommendations

5.56 A coherent and comprehensive strategy for achieving equality of mobility must be an integral part of a National, Regional and Local Transport Strategies rather than being separate or ‘add-on’. Evidence from previous research, the feedback exercise undertaken for this study and case study evidence indicates that unless the strategy is integrated, only piecemeal rather than comprehensive developments will occur.

5.57 The sheer scale of some of the current problems needs to be recognised (for example the challenge of adapting all rail and bus stations or creating a comprehensive pre-journey information service) and realistic phased targets should be set in consultation with transport operators. Schemes aimed at information provision should be set within the broader context of ‘knowledge expansion’ as indicated in the feedback exercise. Information provision should be combined with initiatives to ensure that the services are reliable and operate as expected.

5.58 Linked to this, the inevitable cost of implementing some of the necessary changes and initiatives needs to be recognised by government. Setting duties and responsibilities for other agencies and transport operators without the provision of additional funding will not achieve the required outcomes. As indicated in the feedback from operators, funding is already in crisis and the current climate is more likely to see cutbacks rather than expansions in non-statutory services.

²⁵ The system in England involves local transport authorities preparing Local Transport Plans (LTPs) which are effectively bidding documents to central government for local transport funding. The LTP is then “judged” by the DfT and the regional Government Office, and funding awarded according to its quality. Every year the authority must submit a monitoring report to show how it has spent money and what this spending has achieved. Further funding awards are related to the quality and scale of achievements. Such a system can be criticised for being too centralised and reducing local autonomy; however, it does provide evidence of how money is spent and what it is achieving.

5.59 Duties for transport authorities and providers need to be enshrined in law and policed through the setting of targets that are in some way enforceable and are properly monitored. Such targets need to relate to measurable outcomes of transport initiatives rather than the provision of services. Contracts with transport operators should include specific relevant performance measures.

5.60 Such duties should specifically relate to the provision of the schemes and initiatives outlined above (and identified in previous research). Local authorities must have a duty to audit need for each and arrange for supply accordingly. This is likely to be aided by the Disability Equality Duty which should be utilised as a useful tool in enforcing and monitoring developments.

5.61 To be at all effective, monitoring needs to be focused on measuring outcomes rather than monitoring the existence of schemes and initiatives. This should be facilitated by a set of benchmarks against which to measure success. The development of a national framework should be developed to guide local activity and direct outcome monitoring.

5.62 Schemes which require co-ordination across different transport operators and geographies must be overseen by regional or national authorities in order to ensure that the chain of accessibility is maintained.

5.63 In addition to the provision of schemes and initiatives discussed above, minimum national standards should be introduced in relation to staff training and awareness which again should be carefully monitored.

5.64 Concessionary fares policy should be reviewed in terms of priority in relation to the other substantial funding requirements highlighted above and to ensure the concessions are meeting the needs of disabled people. Additionally, there needs to be a requirement to measure the outcome and cost-effectiveness of concessionary fares in keeping with other transport initiatives. Policies and practice related to parking for disabled people should also be reviewed.

GLOSSARY

Terms used in the report

Disabled people and people with a long term illness

1. The Scottish Household Survey asks: ‘*do you have any long term illness, health problem or disability that limits your daily activities or the kind of work that you can do?*’ The respondent’s own assessment of what constitutes a long-standing illness, health problem or disability is therefore used rather than a medical assessment of illness. The analysis of existing SHS data uses this self- definition when referring to disabled people and those with a long term illness. Where individuals reported both being disabled and having a long term illness, they are generally included in the disabled people’s group for analysis purposes. When the analysis refers to non-disabled people, it means people who did not defined themselves as being disabled or having a long term illness. The sample used in the TNS survey was drawn from the previous respondents to the SHS who had defined themselves as having a long term illness or being disabled. We also adopted the same means of categorising respondents in the TNS survey analysis.

Public Transport

2. Although the report is titled ‘Improved Public Transport for Disabled People’, it actually considers the travel opportunities and transport needs of disabled people. This means that all forms of personal transport are included in the report (i.e. cars, taxis, minibuses as well as buses and trains for example). When *public* transport is referred to in the body of the report, for example in chapter 4 when presenting evidence form the TNS survey, this does refer to a narrower definition including buses, trains, coaches, ferries and air transport that might more conventionally be described in this way.

Data Sources

Scottish Household Survey

3. The Scottish Household Survey (SHS) is a continuous survey based on a sample of the general population in private residences in Scotland. The aim of the survey is to provide representative information about the composition, characteristics and behaviour of Scottish households, both nationally and at a more local level. The survey questionnaire is in two parts; part 1 gathers information about the household and part 2 about a randomly selected adult (aged 16+) from within the household. Further information about the SHS, including Annual and Technical reports is available at www.scotland.gov.uk/shs

SHS Travel Diary

4. The SHS Travel Diary collects information about travel by randomly selected adults from within households selected to take part in the SHS. The respondent is asked about his/her travel on the day prior to interview. Topics covered include numbers and purposes of trips, means of transport, time of day and distance travelled. Further information about, and results from, the 2005 travel diary can be found in the Scottish Executive Statistical Bulletin: Scottish Household Survey Travel Diary results for 2004 (Trn/2006/3) which is available at www.scotland.gov.uk/stats

Data analysis

Urban/rural classification

5. The Scottish Executive six-fold urban/rural classification of Scotland is used as an analysis variable within the SHS. This classification is based on settlement size and remoteness (measured by drive times). It includes the following categories:

- **Large urban areas** – settlements of over 125,000 people.
- **Other urban areas** – settlements of 10,000 to 125,000 people.
- **Accessible small towns** – settlements of between 3,000 and 10,000 people and within 30 minutes drive of a settlement of 10,000 or more.
- **Remote small towns** – settlements of between 3,000 and 10,000 people and with a drive time of over 30 minutes to a settlement of 10,000 or more.
- **Accessible rural** – settlements of less than 3,000 people and within 30 minutes drive of a settlement of 10,000 or more.
- **Remote rural** – settlements of less than 3,000 people with a drive time of more than 30 minutes to a settlement of 10,000 or more.

In the analysis carried out in the TNS survey, the six categories have been combined into 2: urban (including the first 3 categories) and rural (including the last 3 categories)

Data analysis variables

6. Categories describing analysis variables used in the TNS survey were:

Economic Status	Included
Paid Employment	Employed full or part time; self employed
Retired from Paid Work	Permanently retired from work
Unable to work owing to illness or disability	Permanently sick / long term health condition; disabled
Other	Voluntary work; looking after home/family; unemployed and seeking work; at school; in higher or further education; government work/training scheme; other

Household Type	Included
Single pensioner	Households with one adult of pensionable age (60 for women and 65 for men)
Pensioner couple	Households with two adults of pensionable age
Single adult of working age	Households including one adult of working age, with or without children
Couple of working age	Households including two adults of working age with or without children
Other	All other households

Organisations and Services

Advisory Group

7. An advisory group provided advice and guidance throughout the development and conduct of the study. It included representatives from the Enterprise Transport and Lifelong Learning Department, the commissioning department, and the Equalities Unit of the Scottish Executive. Other bodies represented on the group included the Mobility and Access

Committee Scotland; the Disability Rights Commission; Capability Scotland; the Association of Transport Co-ordinating Officers (local government) and the Confederation of Passenger Transport (transport operators).

Mobility and Access Committee for Scotland

8. The Mobility and Access Committee for Scotland (MACS) is a committee set up to advise Scottish Ministers how best they should take account of the interests of disabled people in the formulation of transport policies. Its members each serve for a three year term and were appointed by Scottish Ministers after an open recruitment process. MACS considers all transport consultation documents issued by the Scottish Executive and occasionally runs its own investigations. The committee applies private and public pressure to Ministers and transport operators to make changes to transport services to ensure that they are accessible to all.

Transport Direct

9. Transport Direct is a non-profit service funded by the UK Department for Transport, The Welsh Assembly Government and the Scottish Executive. It provides door-to-door travel information for both public transport journeys and car journeys around Britain through the Transport Direct Portal. It is planned that in the future, the Portal will provide integrated journey planning, real-time travel information and through ticketing. Transport Direct joins together information held by the traveline regions (see below) with road information. It also uses data and retailing services developed and funded by external stakeholders.

Traveline

10. Traveline Scotland is a partnership between Transport Operators, Local Authorities and Transport Scotland who contribute funds, information and expertise towards its day to day running. Its aim is to provide up to date, accurate, impartial and understandable information on all Public Transport services within Scotland and from Scotland to major destinations in other parts of the U.K. Traveline Scotland is one of eleven partnerships across the U.K. which, together, deliver the National Traveline Service.

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