



2023

FY23 Update





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WHO WE ARE

The NJTPA is the federally authorized Metropolitan Planning Organization (MPO) for 7 million people in the 13-county northern New Jersey region. The Region has 384 of the state's 564 municipalities. Each year, the NJTPA oversees more than \$2 billion in transportation improvement projects and provides a forum for interagency cooperation and public input. It also sponsors and conducts studies, assists county planning agencies, and monitors compliance with national air quality goals.

A MPO is a federally mandated and federally funded transportation planning agency made up of representatives from local government and key transportation agencies. Congress created MPOs to give local elected officials a stronger role in guiding federal transportation investment and to ensure that these decisions are based on a continuing, cooperative, and comprehensive ("3C") planning process.

The NJTPA **Board of Trustees** includes 15 local elected officials representing 13 counties—Bergen, Essex, Hudson, Hunterdon, Middlesex, Monmouth, Morris, Ocean, Passaic, Somerset, Sussex, Union and Warren—and the cities of Newark and Jersey City. These are called the NJTPA "subregions." The Board also includes a Governor's Representative, the Commissioner of the New Jersey Department of Transportation, the President & CEO of NJ TRANSIT, the Chairman of the Port Authority of New York & New Jersey, and a Citizen's Representative appointed by the Governor.

The mission of the NJTPA is to:

- Create a vision to meet the mobility needs for people and goods;
- Develop a plan for transportation improvement and management to fulfill the vision;
- Partner with residents, counties, cities, state, and federal entities to develop and promote the transportation plan;
- Prioritize federal funding assistance to make the plan a reality; and
- Link transportation planning with safety and security, economic growth, environmental protection, growth management, and quality of life goals for the Region.

Further information on the NJTPA and the planning process it oversees is available in the NJTPA **Board of Trustees handbook** (pdf) and the **Brief Guide to NJTPA Planning**.

Three standing **committees**—Planning & Economic Development; Project Prioritization; and Freight Initiatives—make recommendations on action items to be considered by the full Board. The Board and committees are supported by a 50-person **staff**, located in Newark. The NJTPA staff also supports and directs planning work by county and city member **subregions**. A **Regional Transportation Advisory Committee** composed of planners and engineers from the subregions meets bi-monthly to review regional issues.

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INTRODUCTION

2017 GO FARTHER Plan Overview

The regional Coordinated Human Services Transportation Plan (CHSTP) [GO FARTHER](#), identified the transportation needs of older adults (65+), low-income people, veterans, and individuals with disabilities. The plan provided strategies for meeting those needs and prioritizing transportation services for funding and implementation. Human services transportation planning profoundly affects the lives of the people it serves. The right systems, services, and policies can facilitate access to employment, education, social support, and personal independence. Lack of coordination, poor communication, and non-integrated service areas can leave passengers stranded, frustrated, and isolated.

The plan was prepared with consultant support from the Alan M. Voorhees Transportation Center at Rutgers University and data collection and public outreach support from the eight Transportation Management Associations serving New Jersey. The 2017 CHSTP was developed through a local planning process that included transportation providers (public, private, and non-profit), human services providers, and members of the public.

Plan Update

The staff-led CHSTP update includes the creation of a briefing memorandum that updates the needs and recommendations of the regional CHSTP, in consultation with service providers, community representatives, and agency partners. The update includes the following:

1. Demographic Update

County level data from the U.S. Census Bureau's 2017-2021 American Community Survey (ACS) was used to update the distribution of human services populations across the region and 2050 population projections are also included.

2. Stakeholder Survey Results

The NJTPA CHSTP stakeholder group contact list from the 2017 Regional CHSTP was updated to address staff changes. The NJTPA created a survey to send to this updated list to capture whether the needs and recommendations documented in the 2017 Regional Plan are less, the same, or more relevant today.

3. Focus Group Results

On May 31, 2023, NJTPA Central Staff conducted a focus group of human services transportation stakeholders comprised of transportation providers, human services (low income, older adult, workforce, and disabled persons) service providers, and veterans service providers. The focus group's purpose was to review the survey results and to further evaluate the recommendations of the 2017 Regional CHSTP considering trends in community needs and relevance. The focus group was also solicited to identify missing recommendations. The result of the focus group meeting includes a re-prioritized list of plan recommendations.

4. Re-Prioritized Recommendations

Based on the survey results and focus group collaboration, the existing recommendations were evaluated and re-prioritized in addition to new recommendations being made based on the current needs of older adults (65+), low-income people, veterans, and individuals with disabilities.

CHSTP POPULATION, TRANSIT ACCESSIBILITY, AND TRENDS

To update the CHSTP, the most recently available data was reviewed related to demographic trends and transportation habits among the four target populations, which are defined as follows:

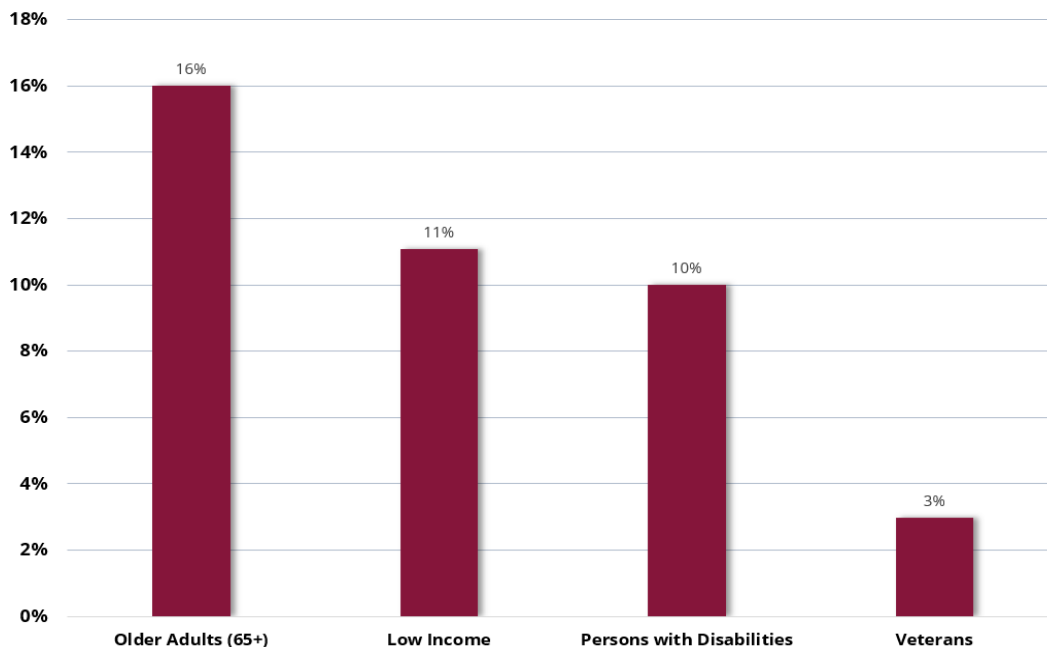
- **Older Adults:** persons aged 65 and older.
- **Low-Income Persons:** Two definitions of poverty were used for this analysis: (1) persons from households with incomes less than 100 percent of the U.S. Census Bureau poverty threshold and (2) persons from households with incomes less than 150 percent of the U.S. Census Bureau poverty threshold. The results presented below are based on persons that qualify as low-income according to the 100 percent poverty threshold definition.
- **Persons with Disabilities (PWD):** people who report having at least one type of disability and are 18 years and older.
- **Veterans:** persons who have served on active duty in the U.S. Armed Forces, Reserves, or National Guard.

CHSTP POPULATION IN THE NJTPA REGION

CHSTP target populations comprise over 2 million people within the 7 million people in the NJTPA region; the relative percentage of each group is shown in **Figure 1**. In the past five years, older adult and low-income populations have increased while the region's persons with disabilities and veteran populations have decreased. In the 2017 plan, it was noted that older adults made up 13 percent of the NJTPA region; now, they make up 16 percent. Based on the updated demographic data, within the last six years, there have been changes not only in the number of people who identify as older adults, low-income, persons with disability, or veteran but where these communities reside as well, which is essential to identify current and future transportation decisions.

FIGURE 1: CHSTP POPULATIONS AS REGIONAL PERCENTAGE OF REGIONAL
CHSTP Populations as Percentage of Regional Population

ACS PUMS: 2017-2021



CHSTP Population Overlap

The ACS Public Use Microdata Sample (PUMS) was analyzed to examine the location of the four target groups at the Public Use Microdata Areas level, of which there are 56 in the NJTPA region. Compared to the 2017 data, this chart was updated to further understand the intersectionality of each CHSTP population. The use of this data provides the advantage of being able to determine multiple characteristics of a single person. For example, the sample dataset shows whether a person who is over 65 is also low-income, has a disability, and/or is a veteran. Therefore, the data can be used to identify people who fit into multiple marginalized groups facing transportation barriers.

TABLE 1: CHSTP POPULATION OVERLAP BY COUNTY

CHSTP Population Overlap	One Category	Two Categories	Three Categories	All Four Categories	Totals
In Poverty	564,022				564,022
Disability	268,034				268,034
Over Age 65	641,901				641,901
Veteran	65,751				65,751
Poverty and Disability		78,735			78,735
Poverty and Over Age 65		54,806			54,806
Poverty and Veteran		3,276			3,276
Disability and Over Age 65		230,527			230,527
Disability and Veteran		9,692			9,692
Over Age 65 and Veteran		76,562			76,562
In Poverty, Disability, and Over Age 65			62,221		62,221
In Poverty, Disability, and Veteran			2,091		2,091
In Poverty, Over Age 65, and Veteran			3,415		3,415
Disability, Over Age 65, and Veteran			41,850		41,850
In Poverty, Disability, Over Age 65, and Veteran				5,251	5,251
Totals	1,539,708	453,598	109,577	5,251	2,108,134

Source: ACS 2017-2021 PUMS

Unique Disadvantaged Persons

Another way to look at the four categories of the target populations would be to view each person as a unique disadvantaged person, whether they belong to only one or multiple groups. For this measure, if a person over age 65+ has a disability, they would be counted only once as a disadvantaged person instead being counted once as a person age 65+ and another time as a person with disabilities. By eliminating multiple counting, the measure of unique disadvantaged persons can help estimate the number of persons for whom needs must be estimated. Due to the absence of duplication, the measure can also help to allocate resources appropriately.

Projected Changes in the CHSTP Population

All data within the following sections use the county level ACS U.S. Census 2017-2021 data sets except for the age population from the New York Metropolitan Transportation Council (NYMTC) forecast process for use in the 2050 forecast table. It is important to note some inconsistencies within the data sets:

- Total population inconsistent between Age 65+ and Low-income: The total population numbers in these two tabs are different despite coming from the same source (ACS 2017-2021). The Low-income tab shows

a slightly lower population. This is because the low-income table from ACS has a universe only for the "population in the United States **for whom poverty status is determined.**" This makes the "Change" column in the second table slightly off since the current poverty numbers exclude those whose poverty status was **not** determined.

- The total of 18+ population is inconsistent between the disabilities and veterans' data. This is due to a similar reason as above (the inconsistency between age 65+ and the low-income total population). Therefore, the same issues are present between the disabilities and veterans' tables as with the 65+ and low-income tables.

Key Findings

Key findings related to demographics and population location help implement the strategies recommended in this CHSTP update.

- Among the four target populations, persons aged 65+ constitute the most significant proportion of the NJTPA population. While they constitute 16 percent of the total population, low-income persons constitute 11 percent, persons with disabilities constitute 10 percent, and veterans constitute 3 percent.
- Between 2017 and 2050, persons aged 65+ may increase by 246,617, or 22.1 percent.
- The number of persons from low-income households can be expected to increase by 13.9 percent, and persons with disabilities can be expected to increase by 10.9 percent between 2017 and 2050. Forecasting veterans is less relevant since their numbers can change due to significant and unforeseeable external factors.
- Similar to the 2017 plan, among all counties, Ocean County ranks highest or very high for all four target populations. The county can be expected to add a substantial number of persons in all four groups between now and 2050.
- Highly urban counties such as Essex, Hudson, Passaic, and Union Counties rank very high for low-income persons, whereas Bergen County ranks very high for persons aged 65+.
- Essex County has the largest number of persons with disabilities, but Ocean County has the highest proportion.
- Ocean County continues to have the most significant number of veterans, and its veteran population is substantially larger than all other counties.

Population Aged 65 and Over

Current Population

According to the 2017-2021 ACS, the total population of the NJTPA region is about 7 million, of which 1,116,978 older adults, make up 16 percent of the region's total population.

The updated population for older adults by county is similar to the previous data collection results for each county profile. Still, the total older adult population for the NJTPA region has increased by a little more than 2 percent.

TABLE 2: OLDER ADULT POPULATION BY COUNTY

Older Adult (65+) Population in NJTPA Counties, ACS 2017-2021

County	Total Population 2017-2021	Population 65+ 2017-2021	Percent 65+
Bergen	952,979	163,686	17.2%
Essex	852,720	115,923	13.6%
Hudson	713,264	85,185	11.9%
Hunterdon	128,807	24,266	18.8%
Middlesex	858,770	129,636	15.1%
Monmouth	642,160	113,974	17.7%
Morris	508,347	86,640	17.0%
Ocean	630,057	139,780	22.2%
Passaic	521,067	76,012	14.6%
Somerset	343,950	54,430	15.8%
Sussex	144,492	25,453	17.6%
Union	571,963	82,007	14.3%
Warren	109,354	19,986	18.3%
NJTPA Total	6,977,930	1,116,978	16.0%

Source: ACS 2017-2021

POPULATION 65+

The largest total older adult population is within Bergen County (163,686), followed by Ocean, then Middlesex, Essex, and Monmouth counties. Warren County has the lowest total older adult population (19,986).

PERCENT 65+

While Bergen County has the largest older adult population, Ocean County, at 22.2 percent, has the highest population percentage of older adults compared to the other counties in the region. Hudson County has the lowest at 11.9 percent. The proportion in Essex County is low, whereas the ratio in Bergen County, Warren County, Monmouth County, and Morris County falls at the high end of the spectrum. Despite having a modest proportion, the total number of persons aged 65+ is also very large in Middlesex County.

Population Projections

Population projections were forecasted using 2017-2021 ACS data and the NYMTC forecast process. Compared to the 2014-2045 older adult population projections, the 2017-2050 projections predict less of an increase in this population. Although the updated projection predicts less of an increase in the older adult population than the previous 2017 plan projection, there will still be a substantial increase within the NJTPA region that will likely need transportation services.

TABLE 3: OLDER ADULT POPULATION PROJECTION BY COUNTY

Older Adult (65+) Population in NJTPA Counties 2050 and Change 2017-2050 , ACS 2017-2021

County	Total Population 2050	Population 65+ 2050	Forecast 2050 - ACS 2017-2021	Percent Change
Bergen	1,083,869	190,181	26,495	16.2%
Essex	920,335	143,288	27,365	23.6%
Hudson	856,947	123,786	38,601	45.3%
Hunterdon	132,858	28,215	3,949	16.3%
Middlesex	939,723	160,918	31,282	24.1%
Monmouth	669,624	133,752	19,778	17.4%
Morris	528,760	102,125	15,485	17.9%
Ocean	727,653	163,283	23,503	16.8%
Passaic	599,628	92,144	16,132	21.2%
Somerset	363,486	66,850	12,420	22.8%
Sussex	152,337	35,321	9,868	38.8%
Union	652,581	97,485	15,478	18.9%
Warren	115,320	26,248	6,262	31.3%
NJTPA Total	7,743,120	1,363,595	246,617	22.1%

Source for Forecasts: New York Metropolitan Transportation Council

Table 3 illustrates the projected 2050 older adult population for each county. Bergen County has the largest total projected older adult population (190,181) and is followed by Ocean, then Middlesex, Essex, and Monmouth counties while Warren County has the lowest total projected older adult population (26,248). It is forecasted that Hudson County will experience the largest increase in the 65+ population, but Ocean County has the highest 65+ projected population percent change.

Low-Income Persons

The U.S. Census Bureau defines low-income persons as those below the poverty income threshold. The Bureau determines the annual expenditure needed for essential food consumption by households of different sizes. When a household's income is lower than the required expenditure level, persons from that household are considered below the poverty level. People below the poverty line are defined as 100 percent below the poverty income threshold. Since the Census Bureau establishes the poverty income threshold at the national level, some regions use a threshold more significant than 100 percent of poverty income, such as 150 percent, to define low-income persons. When the threshold is set at 150 percent, people from households with incomes up to 50 percent higher than the minimum required expenditure are considered low-income. An income threshold greater than 100 percent of the poverty level is often justified for areas with high housing costs. Housing costs are not considered to determine the poverty level despite wide variations in housing costs across the country.

The 100 percent and 150 percent thresholds were used for this update to be consistent and comparative to the 2017 report. However, as NJTPA continues to further our equity work, when measuring the region's low-income population in the future, we will align these percentages to be consistent with other data sources at the NJTPA, which uses 200 percent.

Current Population

Table 4 shows the people below the 100 percent poverty income threshold and those below the 150 percent poverty income threshold for the NJTPA region and the counties within the Region. The total low-income population below the 100 percent threshold within the 13-county NJTPA region is 652,803, representing 9.5

percent of the total NJTPA population. When looking at the entire population below the 150 percent threshold, the low-income population is 1,055,914, accounting for 15.4 percent of the total NJTPA population.

TABLE 4: LOW-INCOME POPULATION BY COUNTY

Low Income Population in NJTPA Counties, ACS 2017-2021

County	Total Population ACS 2017-2021	Population Below 100% Threshold, 2017-2021	Percent 100% Threshold	Population Below 150% Threshold, ACS 2017-2021	Percent 150% Threshold
Bergen	942,365	62,027	6.6%	100,211	10.6%
Essex	831,578	126,984	15.3%	194,673	23.4%
Hudson	704,304	101,255	14.4%	160,091	22.7%
Hunterdon	124,957	4,648	3.7%	8,970	7.2%
Middlesex	831,228	69,630	8.4%	111,173	13.4%
Monmouth	635,691	41,588	6.5%	68,180	10.7%
Morris	500,305	25,033	5.0%	40,561	8.1%
Ocean	622,935	65,237	10.5%	107,013	17.2%
Passaic	513,811	74,920	14.6%	120,990	23.5%
Somerset	340,361	17,394	5.1%	28,772	8.5%
Sussex	143,027	7,320	5.1%	12,464	8.7%
Union	565,128	48,380	8.6%	89,652	15.9%
Warren	107,700	8,387	7.8%	13,164	12.2%
NJTPA Total	6,863,390	652,803	9.5%	1,055,914	15.4%

Source: ACS 2017-2021

Population low-income

The estimates show that Essex County has the largest total low-income population (126,984 and 194,673 for the 100 percent threshold and 150 percent threshold respectively). Essex is followed by Hudson, Passaic, Middlesex, and Ocean counties. Hunterdon County has the lowest total low-income population (4,648), compared to other NJTPA subregions.

Percent 100 low-income

Additionally, Table 4 illustrates Essex County as having the highest proportion of low-income people within the community. The low-income population proportion varies from 3.7 percent in Hunterdon County and 15.3 percent in Essex County. The proportion in Hunterdon, Morris, Somerset, and Sussex counties are on the low end of this range, whereas the proportion in Essex, Hudson, and Passaic counties falls on the high end of the spectrum. Essex County ranks highest in terms of percentage when looking at the 100 percent threshold in the chart above and total low-income population amongst all counties in the NJTPA region. Despite having a modest proportion, the total number of low-income persons is also very large in Ocean County.

The 150 percent threshold population results in Table 4 are almost identical to the Percent 100 population, except that Passaic County has a slightly larger low-income population than Essex County. The rate of low-income individuals ranges throughout the regions, with 7.2 percent in Hunterdon as the lowest proportion and 23.5 percent in Passaic County. Essex, Passaic, Hudson, Ocean, and Union counties surpass the NJTPA percent 150 threshold average.

Population Projections

Table 5 illustrates the estimated number of low-income persons in the NJTPA counties in 2050 and the increase in their number between 2021-2050. Population projections for the low-income populations were forecasted using 2017-2021 ACS data and the NYMTC forecast process. The estimates were obtained by assuming that the 2021 proportions of low-income persons will remain the same in 2050 for the counties, but since the total population of the counties will increase at different rates, the net change in the total number of low-income persons will be different.

TABLE 5: LOW-INCOME POPULATION PROJECTIONS BY COUNTY

Low Income Population in NJTPA Counties 2050 and Change 2017-2050, ACS 2017-2021

County	Total Population 2050	Population Below 100% Threshold, 2050	Total increase 100% Threshold Forecast 2050		Total increase 150% Threshold Forecast 2050	
			ACS 5yr 2021	Percent Change	ACS 5yr 2021	Percent Change
Bergen	1,083,869	71,341	9,314	15.0%	115,259	15.0%
Essex	920,335	140,537	13,553	10.7%	215,451	10.7%
Hudson	856,947	123,200	21,945	21.7%	194,787	21.7%
Hunterdon	132,858	4,942	294	6.3%	9,537	6.3%
Middlesex	939,723	78,718	9,088	13.1%	125,684	13.1%
Monmouth	669,624	43,808	2,220	5.3%	71,819	5.3%
Morris	528,760	26,457	1,424	5.7%	42,868	5.7%
Ocean	727,653	76,204	10,967	16.8%	125,002	16.8%
Passaic	599,628	87,433	12,513	16.7%	141,198	16.7%
Somerset	363,486	18,576	1,182	6.8%	30,727	6.8%
Sussex	152,337	7,796	476	6.5%	13,275	6.5%
Union	652,581	55,867	7,487	15.5%	103,526	15.5%
Warren	115,320	8,980	593	7.1%	14,095	7.1%
NJTPA Total	7,743,120	743,859	91,056	13.9%	1,203,228	14.0%

Source: Estimated by applying ACS 2017-2021 Proportions to NJTPA population forecasts for 2050

PROJECTION OBSERVATIONS

The highest increase in low-income persons is expected to be within Essex, Hudson, Passaic, and Ocean counties, but Bergen, Middlesex, and Union counties will also experience substantial increases. This projection has changed slightly since the 2017 plan, which did not project Bergen and Middlesex to have a more significant growth. The lowest projected low-income population is Hunterdon County, with an increase of 294 individuals. Hunterdon is followed by Sussex (476) and Warren (593) counties. The projections suggest that Hudson County will have the most significant increase in the low income population by 2050.

Between 9.6 percent and 17.2 percent of the people in the NJTPA region are low-income persons, depending on whether a 100 percent or 150 percent poverty income threshold is used to define low-income.

Persons with Disabilities

The number and proportion of persons with disabilities in the NJTPA region and the counties are shown in Table 6. Since the ACS provides disability status for persons aged 18 and over, the first column shows the total population of persons of that age, and the second column shows the persons with disabilities. The persons with disabilities shown in the table may have any of the six types of disabilities considered by the ACS: hearing difficulty, vision difficulty, cognitive difficulty, ambulatory difficulty, self-care difficulty, and independent-living difficulty. Some may have multiple types of disabilities.

Current Population

Since the previous report, there has been an increase of 21,578 people with disabilities in the NJTPA region. Additionally, 11.5 percent of persons aged 18 and over have disabilities – a 0.3 percent increase from the 2017 plan populations.

TABLE 6: PERSONS WITH DISABILITIES POPULATION BY COUNTY

Persons with Disabilities Population in NJTPA Counties, ACS 2017-2021

County	Total Population 18+ (ACS 2017-2021)	Total 18+ with Disabilities (ACS 2017-2021)	Percent Persons with Disabilities
Bergen	744,022	72,654	9.8%
Essex	636,891	88,877	14.0%
Hudson	562,050	55,618	9.9%
Hunterdon	100,891	10,047	10.0%
Middlesex	663,566	74,397	11.2%
Monmouth	502,097	60,459	12.0%
Morris	396,781	40,010	10.1%
Ocean	470,558	74,560	15.8%
Passaic	393,254	40,631	10.3%
Somerset	266,461	25,340	9.5%
Sussex	114,911	14,647	12.7%
Union	432,948	46,058	10.6%
Warren	87,085	12,212	14.0%
NJTPA Total	5,371,515	615,510	11.5%

Source: ACS 2017-2021

Table 6 above displays that Essex County has the largest number of people with disabilities, followed by Ocean, Middlesex, and Bergen counties. This demonstrates a slight change from previous totals when Essex County had the largest number of persons with disabilities, followed by Ocean, Bergen, and Middlesex counties. Hunterdon County has the lowest number of people with disabilities in the NJTPA region but does not have the lowest percentage of persons with disabilities compared to its total population. The following counties have a higher proportion of people with disabilities than the regional average: Ocean, Essex, Warren, Sussex, and Monmouth counties spreading from the norther part of the NJTPA region to the southern portion along the NJ coast.

Population Projections

Table 7 shows the forecast number of persons with disabilities in the year 2050 and the increase in their number per county. Among the counties that have a high volume of persons with disabilities that may also experience a high growth, Hudson and Ocean stand out. Both counties also have large volumes of persons age 65+ and low-income persons.

TABLE 7: PERSONS WITH DISABILITIES POPULATION BY COUNTY
Persons with Disabilities Population in NJTPA Counties 2050 and Change 2017-2050, ACS 2017-2021

County	Total Population 18+ 2050	Persons 18+ with Disabilities 2050	Total increase Forecast 2050 ACS 5yr 2021	Percent Change
Bergen	846,212	82,633	9,979	13.7%
Essex	687,392	95,924	7,047	7.9%
Hudson	675,272	66,822	11,204	20.1%
Hunterdon	104,064	10,363	316	3.1%
Middlesex	726,118	81,410	7,013	9.4%
Monmouth	523,571	63,045	2,586	4.3%
Morris	412,714	41,617	1,607	4.0%
Ocean	543,447	86,109	11,549	15.5%
Passaic	452,545	46,757	6,126	15.1%
Somerset	281,595	26,779	1,439	5.7%
Sussex	121,150	15,442	795	5.4%
Union	493,972	52,550	6,492	14.1%
Warren	91,836	12,878	666	5.5%
NJTPA Total	5,959,888	682,329	66,819	10.9%

Source: Estimated by applying ACS 2017-2021 Proportions to NJTPA population forecasts for 2050

Veterans

By ACS definition, a veteran has served on active duty in the US Armed Forces, Reserves, or National Guard. The number of veterans for the NJTPA region and the counties is shown in Table 8. The table also shows veterans as a proportion of persons age 18+ since veteran status is not pertinent to lower ages. While the proportion of veterans is 3.8 percent for the NJTPA region, many counties have significantly higher proportions. In contrast, counties with large urban centers, such as

TABLE 8: VETERAN POPULATION BY COUNTY

Veteran Population in NJTPA Counties, ACS 2017-2021

County	Total Population 18+ (ACS 2017-2021)	Total Veterans 18+ (ACS 2017-2021)	Percent Veterans
Bergen	749,586	26,810	3.6%
Essex	648,432	19,033	2.9%
Hudson	566,334	11,395	2.0%
Hunterdon	103,944	5,105	4.9%
Middlesex	670,718	23,506	3.5%
Monmouth	505,352	23,518	4.7%
Morris	400,821	15,526	3.9%
Ocean	474,769	33,551	7.1%
Passaic	396,021	11,907	3.0%
Somerset	268,703	9,982	3.7%
Sussex	115,990	6,881	5.9%
Union	436,623	13,155	3.0%
Warren	87,790	5,578	6.4%
NJTPA Total	5,425,083	205,947	3.8%

Source: ACS 2017-2021

Essex, Hudson, Passaic, Union, and Middlesex have a smaller proportion of veterans. The proportion of residents that identify as veterans has decreased since the last plan by 1.6 percent.

Current Population

The veteran population experienced the most significant percent change out of all CHSTP population groups – a 2.5 percent decrease. Ocean County, which is home to a portion of Joint Base McGuire–Dix–Lakehurst, has the highest number of veterans, followed by Monmouth and Middlesex counties. In terms of the proportion, the

counties are ranked in the following order Ocean, Warren, Sussex, and then Hunterdon. This is similar to the data collected for the 2017 plan.

Population Projections

The 2050 forecasts of veterans for the region and the counties are shown in Table 9. Like the estimates for persons with disabilities, the 2050 estimates for veterans are based on the assumption that their proportion will remain the same over time for the counties. The assumption was necessary since it is NOT possible to predict when wars will begin and how many soldiers will participate in future wars. Thus the 2050 estimates are essentially determined by how many veterans live in the region and the counties and how the total population of the region and the counties will change over time.

TABLE 9: VETERAN POPULATION 2050 PROJECTIONS BY COUNTY

Veteran Population in NJTPA Counties 2050 and Change 2017-2050, ACS 2017-2021

County	Total Population 18+ 2050	Veterans Age 18+ 2050	Total increase Forecast 2050 ACS 5yr 2021	Percent Change
Bergen	852,540	30,492	3,682	13.7%
Essex	699,848	20,542	1,509	7.9%
Hudson	680,419	13,690	2,295	20.1%
Hunterdon	107,213	5,266	161	3.1%
Middlesex	733,944	25,722	2,216	9.4%
Monmouth	526,965	24,524	1,006	4.3%
Morris	416,916	16,149	623	4.0%
Ocean	548,311	38,748	5,197	15.5%
Passaic	455,729	13,702	1,795	15.1%
Somerset	283,965	10,549	567	5.7%
Sussex	122,287	7,255	374	5.4%
Union	498,165	15,009	1,854	14.1%
Warren	92,580	5,882	304	5.5%
NJTPA Total	6,018,881	227,531	21,584	10.5%

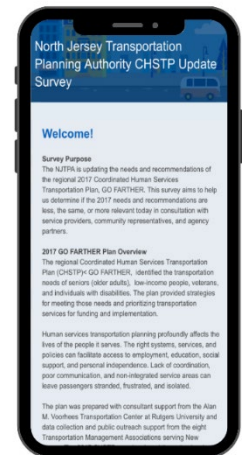
Source: Estimated by applying ACS 2017-2021 Proportions to NJTPA population forecasts for 2050

According to the estimates in Table 9, Ocean County will experience a substantially greater increase in the number of veterans in the future than the other counties. Bergen, Essex, Passaic, Middlesex, and Union counties can also be expected to experience a modest growth, but the remaining counties can be expected to experience little or no growth in the number of veterans.

STAKEHOLDER SURVEY

In May 2023, the NJTPA administered the North Jersey Transportation Planning Authority CHSTP Update Survey to stakeholders who work with older adults (65+), low-income individuals, persons with disabilities, and veterans. Staff distributed the survey through email to 50 human services contacts within the region and received 17 responses.

This survey aimed to determine if the 2017 needs and recommendations (outlined below) are less, the same, or more relevant today in consultation with service providers, community representatives, and agency partners. Survey results were analyzed to better understand what needs and recommendations should be prioritized to better serve the CHSTP populations within the NJTPA region.



Key Findings

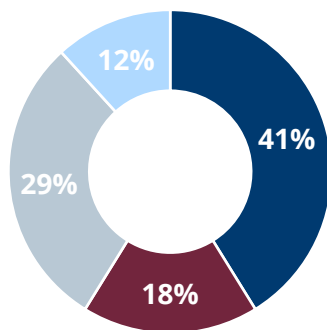
- Many survey respondents work for either state, county, or municipal governments.
- Regarding spatial needs, respondents expressed that CHSTP populations have difficulty reaching public transportation or accessing transportation services in more suburban and rural areas to get to work, food shopping, etc.
- Lack of drivers appears to be a major impediment to transportation service providers, and in turn, CHSTP populations. It was also observed that the increase in multiple car services has impacted both drivers and passengers.
- Respondents expressed that CHSTP populations have reported a lack of transportation options to get where they need to go.
- After COVID-19, there has been an increased need in available transportation resources for medical reasons, as there are still insufficient resources for transportation to work, food shopping, etc.
- Survey participants noted that vulnerable populations have frequently cited lack of information, awareness, and understanding of how to schedule and use available services.
- Survey results suggest *Fare Subsidies* to be the most relevant need out of the 19 identified in the 2017 plan.
- Compared to the other 19 needs, human services providers found *New Technology* to be the least relevant need.
- The strategic theme *Enhancing and Expanding Service*, received the most votes compared to the other nine strategic groups when asked what strategies are still important/relevant today.

Who Completed the Survey?

Of the respondents, about 41 percent work for the State of New Jersey, a county government or municipality; 18 percent work for a transportation research center or Transportation Management Association; 29 percent work for a non-profit organization or as a volunteer; and 12 percent are part of a council or advisory committee relating to coordinated human services populations. The results are displayed below in Figure 2.

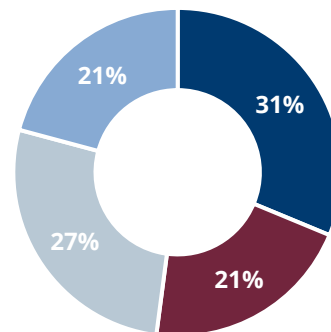
FIGURE 2: STAKEHOLDER SURVEY DEMOGRAPHICS:

Stakeholder Organization



- State, County, or Municipal Gov't
- Transportation Research Center, TMA
- Non-profit/Volunteer
- Council/Advisory Committee

CHTSP Populations Served by Stakeholder Respondents



- Older Adults
- Low-income People
- Persons with Disabilities
- Veterans

Not only was there representation among different organizations, but there was also a somewhat evenly distributed number of stakeholders that work with each coordinated human service transportation population. Thirty-one percent of respondents work with older adults, 27 percent with persons with disabilities, 21 percent with low-income populations, and 21 percent with veterans.

Needs, Strategies, and Recommendations

The 2017 plan identified service gaps, unmet needs in transportation services, and nine strategic themes that address the transportation needs of CHSTP target populations. The strategic themes emerged from public engagement activities, input from the Advisory Committee and experienced transit users, and a review of county human services transportation plans and innovative practices.

2017 NEEDS

Spatial. Gaps in the transportation network exist when locations and/or destinations are not served.

Temporal. Gaps occur when service is unavailable at the times or frequency consumers need.

Institutional. Gaps exist when the rules, regulations, and/or requirements that govern transportation service provision create barriers that limit mobility.

Infrastructure. Gaps exist when conditions in the physical network or technological infrastructure prevent or limit individuals from accessing available transportation options.

Awareness. Gaps occur when providers and consumers lack information.

2017 STRATEGIES

Increasing Auto Connections with Assistance. Involves the use of automobiles with extra help from drivers to connect older adults with their desired destinations.

Reducing Financial Barriers. Increasing access to various modes of transportation that are typically unavailable to low-income populations due to financial constraints.

Coordinating Regional Destinations. Maximizing resources and increasing efficiency by identifying common destinations of the target populations.

Improving Customer Experience. Providing training to operators and services to customers that promote human dignity and customer satisfaction.

Enhancing Communication. Strengthening communication between transportation providers and passengers; providing information, assistance, and training to increase awareness of available services.

Infrastructure Improvements. Increasing vehicle accessibility and removing barriers in the physical landscape that impede access to transit options.

Enhancing and Expanding Service. Expanding effective models and creating new connections to targeted locations using customer input.

Promoting Mobility on Demand. Capitalizing on transportation network companies and their potential ability to offer accessible and flexible on-demand services that can work in tandem with fixed route transit.

Incentivizing Operational Coordination. Reducing redundancies in service and optimizing existing resources through interagency coordination.

Needs

The 2017 Plan Research Team identified unmet transportation needs among the NJTPA region CHSTP target populations (older adults, low-income, persons with disabilities, and veterans) through a "Go to Them" public engagement process and assessment of available services and current conditions. Public engagement activities included focus groups, Community Planning Sessions (CPS), and a customized survey that was broadly disseminated across the 13-county region. The strategic themes emerged from public engagement activities, input from the Advisory Committee and experienced transit users, and review of county human services

transportation plans as well as innovative practices. The following table summarizes the Update Survey responses to each need identified from the 2017 CHSTP:

TABLE 10: UPDATE SURVEY RESPONSE - NEED RELEVANCY

Need Theme	Need	Percent Relevant			
		Less	Same	More	Other
SPATIAL	Crossing County Lines	6%	59%	24%	6%
	Hubs Matter	18%	53%	29%	0%
	NYC Focus	6%	47%	29%	18%
	First-Last Mile	0%	53%	35%	12%
TEMPORAL	Additional Evening/Weekend Service	0%	53%	47%	0%
	Travel and Wait Time	0%	59%	35%	6%
INSTITUTIONAL	Coordination	0%	59%	41%	0%
	Driver training, performance, and retention	12%	24%	59%	6%
	Customer Service and Experience	6%	47%	47%	0%
	Fare Payment	6%	47%	41%	6%
	Fare Subsidies	6%	29%	59%	6%
	Flexible Service	0%	41%	53%	6%
INFRASTRUCTURE	Repairs and updates	12%	35%	53%	0%
	New Technology	18%	29%	47%	6%
	Accessibility	6%	35%	53%	6%
	Customer Convenience	6%	53%	35%	0%
AWARENESS	Many to one (many services...one customer)	6%	41%	53%	0%
	One to many	6%	53%	35%	6%
	Extra help	0%	65%	35%	0%

The major identified human services transportation needs were initially prioritized based on scoring 50 percent or more within the more relevant category. Additional prioritization was conducted with the focus group to evaluate the results to a greater extent, which is discussed in the next section.

Out of the 19 needs, six scored 50 percent or more within the "more relevant" category:

- Fare Subsidies:** The cost of transportation may sometimes inhibit travel among human services transportation users. While the cost of taxis and ridesharing is especially prohibitive, even fares for some bus services may be too costly for low-income persons.
- Flexible Services:** Transit service restrictions on clientele and trip purposes can be a barrier to mobility. These restrictions may be based on federal, state, or local government or service provider regulations, policies, or procedures. Members of CHSTP target populations are sometimes excluded from taking advantage of certain services because they do not meet qualifications, such as having a specific disability or living within a targeted area, even though the vehicle may have available capacity.
- Many to one (many services...one customer):** Each transit and human services transportation provider in the NJTPA region provides its own source of service information, which can make trip planning complex and frustrating. However, local governments, other service providers, and service users in the region continue to advocate for the creation of a centralized information source that includes all modes of transit, human service transportation, and paratransit services, regardless of funder (e.g., private, public, contract carrier, county, municipal, non-profit).

4. **Driver training, performance, and retention:** Driver performance is a major determinant of trip quality. Transit agencies should ensure drivers consistently deliver service as required by the Americans with Disabilities Act (ADA). Human services transportation users reported that drivers don't always operate vehicles safely or stop at designated stops. Some users feel that drivers and dispatchers require additional and improved training. Paratransit providers in the region face challenges in recruiting and retaining qualified drivers; a shortage of qualified drivers sometimes leads to canceled trips.
5. **Accessibility:** Built environment and vehicle conditions in the NJTPA region do not consistently facilitate transit access. Many accessibility needs are related to infrastructure repairs and updates. Human services transportation users, especially those with disabilities, often experience difficulty walking to and waiting at transit bus stops due to distance or lack of appropriate pedestrian infrastructure.
6. **One to many (One customer...many service possibilities):** Human services transportation users obtain travel information from a variety of sources and media, including the internet, paper schedules, newspapers, word of mouth, libraries, calling dispatchers, and others, but often have difficulty obtaining them. There is a need to effectively disseminate this information in a suitable media to the diverse CHSTP target populations. Furthermore, members of CHSTP target populations are not always aware of available transportation services or how to use them. Service users would benefit from the development or expansion of marketing activities, providing more targeted information for the specific user, as well as training and education on how to access available transportation services.

Eight of the 19 needs from the 2017 plan received 50 percent or more in the same relevancy category. These needs are listed below:

1. **Extra help:** Some passengers have assistance needs. These "extra help" needs are not necessarily system-wide institutional or infrastructure issues, and some cannot be addressed merely by developing and implementing broad, system-wide policies.
2. **Crossing County Lines:** Community transportation services, including deviated fixed-route and demand response services, are often confined to the borders of the provider jurisdiction.
3. **Coordination:** CHSTP target populations frequently rely on transportation services provided by a wide array of organizations, often working independently of each other with disparate missions, organizational capacity, clientele, and geographic service areas.
4. **Travel and Wait Times:** Paratransit wait times and travel times can be particularly burdensome. For example, Access Link clients must make a reservation at least one day prior to the trip, and pick-up times can be up to 20 minutes prior to or after the designated time.
5. **Additional Evening/Weekend Service:** Limited transit availability on the weekend and during the evening prevents CHSTP target population members from accessing various destinations, including shopping destinations and religious services.
6. **First-Last Mile:** Lack of feasible transportation connections to distant transit stops can impede mobility. This issue affects transit riders but is especially problematic for CHSTP target populations due to limited physical ability and/or cost barriers. In addition to connections to transit stops, public engagement participants identified a lack of door-to-door transportation services and bus stops close to places of residence (such as senior centers) and destinations as hindrances to mobility and access.
7. **Customer Convenience:** Quality of infrastructure also impacts customer experience in terms of convenience, comfort, safety, and a sense of dignity.

- Hubs Matter:** Activity hubs offer access to multiple and varied destinations through a single trip. Human services transportation users often find making local trips in the NJTPA region challenging. This makes it difficult to carry out daily routines like dropping off children at school or childcare before heading to work. Urban centers, including county seats and towns serving large rural areas, are important destinations for CHSTP populations in the NJTPA region, offering multiple resources and opportunities in centralized locations.

Strategies and Recommended Activities

The 2017 CHSTP articulates nine strategic themes that address the transportation needs of target populations. The Research Team drew the themes and corresponding strategies from public engagement activities held throughout the planning process, input from the Advisory Committee and experienced transit users, recommendations included in county human services transportation plans, and a review of innovative practices both within New Jersey and nationally. The nine strategic themes are depicted below:

FIGURE 3: CHSTP STRATEGIC THEMES



In the 2017 plan, the nine strategic themes are broken down even further and include 33 implementable activities. These strategies and recommendations were included in the survey to determine the relevancy of the existing strategies, just as was done with the needs. Respondents then voted on what strategies they have observed to be less, the same, or more relevant after the COVID-19 pandemic and recent trends. The survey results can be found on the next page.

TABLE 11: UPDATE SURVEY RESPONSE – STRATEGY RELEVANCY

STRATEGIC THEME	ACTION	PERCENT RELEVANT			
		LESS	SAME	MORE	OTHER
Increasing Auto Connections with Assistance	Promote and explain existing concierge ride-hailing scheduling services that do not require a smartphone	24%	47%	29%	0%
	Expand and replicate existing cab subsidy programs for older adults	6%	35%	59%	0%
	Expand and replicate existing non-profit car services with paid or volunteer drivers for older adults (65+) and people with disabilities	6%	35%	59%	0%
	Provide door-to-door service with driver companions	6%	41%	53%	0%
Reducing Financial Barriers	Survey auto-based mobility strategies designed to serve low-income people for potential replication/adaptation in the NJTPA region	6%	65%	29%	0%
	Reduced fare for older adults and people with disabilities	0%	53%	47%	0%
	Facilitate the use of a reduced fare program for older adults and customers with qualifying disabilities	0%	24%	76%	0%
Coordinating Regional Destinations	Coordinating multi-county trips to regional destinations and medical centers	0%	65%	35%	0%
	Coordination among 55+ communities within Ocean, Middlesex, and Somerset counties	6%	47%	41%	0%
	Expanding dedicated services to V.A. medical centers and local providers of VA services	0%	53%	47%	6%
Improving Customer Experience	ADA+ sensitivity training for operators	0%	53%	47%	0%
	Coordinated information: Inclusive of NJ TRANSIT fixed-route, private carrier, commuter buses, scheduled county services	6%	41%	53%	0%
	Universal payment/pre-paid fare card	18%	25%	59%	0%
Enhancing Communication	Holistic, multidimensional regional marketing campaign	6%	65%	29%	0%
	Provide live customer service during peak travel hours	6%	53%	41%	0%
	Expand existing public outreach to improve pedestrian safety	0%	53%	47%	0%
	Address busy signal & excessive wait times for phone reservations	6%	29%	65%	0%
	Increase and enhance information at transit stops and key destinations	6%	53%	41%	0%
	Provide travel training and concierge assistance	6%	35%	59%	0%
Infrastructure Improvements	Install and improve bus stops, benches, shelters & sidewalks to facilitate pedestrian movement and transit use	6%	41%	47%	6%
	Comprehensive bus stop/shelter policy for placements and maintenance	6%	41%	47%	6%
	Improve accessibility and accommodations for wheelchair use – on board and environmental path of travel to transit	6%	47%	41%	6%
	Prioritize projects and funding to target areas of need	6%	41%	53%	0%
Enhancing and Expanding Service	Evaluate routes and services based on customer needs	6%	35%	59%	0%
	Expand night and weekend services	6%	35%	53%	0%
	Feeder services and first-last mile strategies to expand fixed route transit services (e.g. to reach jobs & training sites)	6%	56%	29%	6%
	Transit access to One Stops and emerging employment sites in region	13%	47%	41%	0%
Promoting Mobility on Demand	Accessible Transportation Network Company (TNC) vehicles	6%	29%	65%	0%
	Medical trips – subsidized TNC rides	6%	29%	65%	0%
	Partnerships with TNCs	13%	24%	65%	0%
Incentivizing Operational Coordination	Connect transit stations on different corridors	0%	59%	35%	6%
	Shared maintenance services	6%	65%	29%	0%
	Data visualization to improve coordination & facilitate customer trip planning	0%	65%	29%	6%

The activities that scored 50 percent or more in the "more relevant" category are listed below in order of rank:

1. Facilitate the use of a reduced fare program for older adults and customers with qualifying disabilities
2. Partnerships with TNCs
3. Address busy signal & excessive wait times for phone reservations
4. Accessible TNC vehicles
5. Medical trips – subsidized TNC rides
6. Expand and replicate existing non-profit car services with paid or volunteer drivers for older adults (65+) and people with disabilities
7. Universal payment/pre-paid fare card
8. Evaluate routes and services based on customer needs
9. Expand and replicate existing cab subsidy programs for older adults
10. Provide travel training and concierge assistance
11. Expand night and weekend services
12. Coordinated information: Inclusive of NJ TRANSIT fixed-route, private carrier, commuter buses, scheduled county services
13. Prioritize projects and funding to target areas of need
14. Provide door-to-door service with driver companions
15. Reduced fare for older adults and people with disabilities

Implementing these strategies will entail overcoming funding and institutional challenges. Some recommendations require large capital investments and others significant new technology. And most will require cooperation and coordination not only between multiple transportation agencies and jurisdictions, but also between the transportation sector and other sectors serving CHSTP populations, such as One-Stop Centers, Veterans Affairs, social service agencies, and non-profits. The same goes for the needs since many of the institutional and awareness need categories seem to be where the most change is essential.

Some will also require cooperation between public and private sector entities, such as TNCs, real estate developers, and private companies employing low-income workers.

FOCUS GROUP

A focus group was convened to capture the transportation needs, issues, and concerns directly observed by the region's coordinated human service experts. The focus group consisted of 11 attendees, of which four responded to the Update Survey disseminated in March 2023. Organizations involved included NJ TRANSIT, the New Jersey Travel Independence Program (NJ TIP) at the Rutgers Voorhees Transportation Center, goHunterdon, Avenues in Motion, EZ Ride, Somerset County, New Jersey Advocates for Aging Well, and New Jersey Council on Developmental Disabilities. Participant recommendations for re-prioritizing the 2017 CHSTP, GO FARTHER, needs and recommendations emerged from these discussions. On May 31, 2023, a focus group session was convened virtually with the attendees from the above-mentioned organizations to discuss the survey results. These

participants represented the stakeholders that work most closely with the study's core populations – persons with disabilities, older adults, veterans, and low-income persons. The NJTPA conducted the session.

Key Findings

Out of the top six needs, the focus group found flexible service, accessibility, many-to-one, fare subsidies, and drivers training to be the most important.

FIGURE 4: CHSTP NEED RANKING

Survey Ranking	Focus Group Ranking
1. Fare Subsidies	1. Flexible Services
2. Driver training, performance, and retention	2. Accessibility
3. Flexible Services	3. Many to One
4. Accessibility	4. Fare Subsidies
5. Many to One	5. Driver training, performance, and retention
6. One to Many	6. One to many

- The focus group expressed that **Flexible Services** should be the top-ranking need based on what riders are communicating to them recently. Riders want more flexible options, whether it be time of day or weekend trips. Participants also expressed that riders want to be able to cross municipal and county borders. Much of the current transportation available to human service populations is bound to the jurisdiction it serves, limiting the mobility of older adults, low-income individuals, persons with disabilities, and veterans.
- **Accessibility**, initially ranked number four in the survey, was considered more important to the focus group. Many individuals expressed the importance of safe paths to travel and how the current infrastructure conditions prohibit human services populations from getting where they need to go.
- **Many to One** was another high-ranking need that the focus group recognized needed to be elevated based on recent conversation and feedback from riders. Navigation is difficult for all CHSTP groups, but it was specifically noted that for older adults, trip assistance is imperative. To have a successful trip, many factors are involved before and after the trip for an individual. The concept of the "complete trip" was discussed as something CHSTP populations need and want more, but this requires a large amount of information for it to be executed properly.

Focus Group Discussion Summary

In addition to the prioritization exercise, a portion of the focus group included having an open discussion with NJ TRANSIT, NJTIP, goHunterdon, Avenues in Motion, EZ Ride, Somerset County, New Jersey Advocates for Aging Well, and New Jersey Council on Developmental Disabilities on what they have been noticing in recent years.

WHERE DO PEOPLE WANT TO GO?

- After COVID-19 there was a noticeable change in where people wanted to go, and human services providers had a difficult time understanding their riders' new travel patterns and needs. Employment, day

programs, and medical appointments moved to the bottom of the list. Before COVID-19, there was a clear idea of where people were going.

- Social activities began to see more priority after the pandemic, and CHSTP populations began to make more social trips.
- Human service populations are looking for transportation options to bring them to employment during non-traditional hours and/or days. People can't accept positions due to these transportation barriers.
- For young adults with developmental disabilities, recreation was the most desired and the most difficult destination to access. Employment is also difficult to access as well.
- Older adult populations have expressed wanting transportation services for medical trips, shopping, and recreation.
- There has been more discussion recently with orienting transportation information to be "purpose to route" because often there are transportation services available, but people don't know what route to take to get to x, y, and z. For example, many CHSTP populations need assistance getting to grocery stores. Providing information about specific routes to grocery stores will increase their mobility.

DESTINATIONS THAT ARE DIFFICULT TO REACH

- The focus group expressed riders' have trouble reaching destinations during weekend and nighttime service.
- Many transportation services available to CHSTP populations do not cross county borders, making traveling across New Jersey and the NJTPA region difficult.
- Riders also need to get to everyday places (grocery, barber, salons, etc.), and occasionally the focus is on the larger things (doctors, events, etc.)
- It was discussed that human service populations also have difficulty getting to their pharmacy if it is not part of a grocery store.
- Some focus group members also communicated that older adults, low-income individuals, people with disabilities, and veterans have difficulty getting to places on time when using services available to them, especially when they are trying to get to work.
- Across the NJTPA region, after the COVID-19 pandemic, human services providers are observing different travel patterns.
- CHSTP populations often wish to take NJ TRANSIT services that are available to them, but they can't safely get to the stop, it's too far, or the transit stop they are going to has poor infrastructure.

RECOMMENDATIONS

The 2017 regional Coordinated Human Services Transportation Plan (CHSTP) [GO FARTHER](#), identified the transportation needs of older adults (65+), low-income people, veterans, and individuals with disabilities. The plan provided strategies for meeting those needs and prioritizing transportation services for funding and implementation. This update examined how needs might have change since the plan was completed and

prioritized the needs and strategies to give human services providers better guidance on what to focus on. The CHSTP update included a Demographic Update, Stakeholder Survey, Focus Group, and Re-Prioritized Recommendations.

The CHSTP Update Survey and focus group helped prioritize six needs and 15 of the most relevant strategies today. The results can be found below.

Prioritized Needs

It is essential for those who provide human services transportation to understand the current needs of their service populations, the solutions to these problems, and what could be done now to provide accessible and equitable transportation for older adults, low-income persons, people with disabilities, and veterans.

① FARE SUBSIDIES

- Transportation **costs can inhibit travel** among CHSTP users.
- While the cost of taxis and ridesharing is especially prohibitive, even fares for some bus services may be too costly for low-income persons.

② DRIVER TRAINING, PERFORMANCE, AND RETENTION

- **Driver performance is a major determinant of trip quality.**
- Transit service standards – required by the ADA.

③ FLEXIBLE SERVICES

- Transit **service restrictions** can be a **barrier to mobility.**
- CHSTP target populations are sometimes excluded from taking advantage of services because they do not meet qualifications.

④ ACCESSIBILITY

- Built environment and vehicle conditions in the NJTPA region do not consistently facilitate transit access.
- Many **accessibility needs** are related to **infrastructure repairs and updates.**
- More CHSTP populations would take existing NJ TRANSIT services, but poor infrastructure leading up to and surrounding transit stops has limited the mobility of these individuals.

⑤ MANY TO ONE

- Multiple sources of information make trip planning complex and frustrating.
- Need for the **creation of a centralized information source.**

⑥ ONE TO MANY

- While many service users find travel information online, a substantial portion of CHSTP riders continue to **rely on paper schedules** but often have **difficulty obtaining them.**

Prioritized Strategies

- 1 REDUCED FARE FOR OLDER ADULTS AND PEOPLE WITH DISABILITIES
- 2 FACILITATE THE USE OF A REDUCED FARE PROGRAM FOR OLDER ADULTS AND CUSTOMERS WITH QUALIFYING DISABILITIES
- 3 PARTNERSHIPS WITH TNCS
- 4 ADDRESS BUSY SIGNAL & EXCESSIVE WAIT TIMES FOR PHONE RESERVATIONS
- 5 ACCESSIBLE TNC VEHICLES
- 6 MEDICAL TRIPS – SUBSIDIZED TNC RIDES
- 7 EXPAND AND REPLICATE EXISTING NON-PROFIT CAR SERVICES WITH PAID OR VOLUNTEER DRIVERS FOR OLDER ADULTS (65+) AND PEOPLE WITH DISABILITIES
- 8 UNIVERSAL PAYMENT/PRE-PAID FARE CARD
- 9 EVALUATE ROUTES AND SERVICES BASED ON CUSTOMER NEEDS
- 10 EXPAND AND REPLICATE EXISTING CAB SUBSIDY PROGRAMS FOR OLDER ADULTS
- 11 PROVIDE TRAVEL TRAINING AND CONCIERGE ASSISTANCE
- 12 EXPAND NIGHT AND WEEKEND SERVICES
- 13 COORDINATED INFORMATION: INCLUSIVE OF NJ TRANSIT FIXED-ROUTE, PRIVATE CARRIER, COMMUTER BUSES, SCHEDULED COUNTY SERVICES
- 14 PRIORITIZE PROJECTS AND FUNDING TO TARGET AREAS OF NEED
- 15 PROVIDE DOOR-TO-DOOR SERVICE WITH DRIVER COMPANIONS

Next Steps

Identifying the transportation needs of NJTPA's human services populations and strategies that will serve older adults, low-income individuals, people with disabilities, and veterans who live, work, or play within the region allows for more safe, accessible, and equitable mobility for vulnerable populations.

As mentioned in the 2017 plan, funding and institutional challenges must be addressed to realize these strategic themes. This also requires coordination between multiple transportation agencies and jurisdictions, and also between the transportation sector and other sectors serving CHSTP populations, such as One-Stop Centers, Veterans Affairs, social service agencies and non-profits. Some recommended activities require cooperation between public and private sector entities, like TNCs, real estate developers, and private companies employing low-income workers. Overcoming these jurisdictional and sectoral divides will require ongoing coordination, policy development, and a focus on implementation.

The next steps outlined below are geared towards all human services providers, local governments, Transportation Management Associations, other public and private companies, and the NJTPA to continue to advance CHSTP efforts:



Routine CHSTP information exchange with NJTPA subregions and other human services providers.



Consistently track projects in the region that are within the proposed strategies.



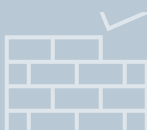
Monitor the needs of human services populations to be aware of any changes.



Convene a leadership group to brainstorm, discuss, and share current and new information regarding CHSTP work.



Develop and attend appropriate and relevant webinars and conferences related to CHSTP and age friendly work.



Prioritize, coordinate, and encourage regional investment and maintenance of infrastructure that supports walkable communities and better access to and around transit, especially bus stops.