

Elderly and Handicapped Transportation in Texas

Defining the Problem

PREPARED BY THE
TRANSPORTATION PLANNING DIVISION,
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IN COOPERATION WITH THE
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Summary

DISCUSSION OF THE PROBLEM NATIONWIDE

This section of the report is an overview of the developments nationwide in elderly and handicapped transportation. National policy dictates that public transportation which can be effectively utilized will be available to the elderly and handicapped. Efforts by Congress to implement this policy are discussed.

The transportation problems and needs of the elderly and handicapped are considered as well as travel barriers faced by elderly, handicapped and even in some cases able-bodied passengers. Proposed solutions are explained including modification of existing vehicles on regular routes, taxis, the TRANSBUS program, the small bus program, and door-through-door demand-responsive transportation. It becomes evident that door-through-door demand-responsive transportation is the most acceptable solution in that it would serve all gradations of the handicapped. In this service there is a trained attendant to assist the elderly and handicapped from the doors of their homes into the vehicle and from the vehicle through the doors of their destinations. This is very significant since most problems associated with travel by the elderly and handicapped involve getting into and out-of the vehicle or getting to and from the bus stop or terminal. However, this form of transportation is very expensive and may not be feasible for every area in Texas. In some areas, simply subsidizing the local taxi service may be an appropriate solution since taxis pick up passengers at their homes and take them directly to their destinations.

The Denver, Colorado solution and the Lincoln, Nebraska solution are included as examples of how different areas with different needs and resources will, by necessity, have different solutions.

IDENTIFYING THE ELDERLY AND HANDICAPPED IN TEXAS

This is the statistical section of the report dealing with the number and location of elderly and handicapped in Texas. The data in the section is divided into the 25 State Department of Highways and Public Transportation Districts to aid in the discussion. However, Appendix B includes the data arranged by counties for reference.

The 1970 Census reported 1,623,541 people in Texas who were elderly or handicapped. By the year 1980, this number is expected to increase by 21.4 percent to 1,971,198 elderly and handicapped in the State. These numbers include persons ages 65 and over and handicapped persons ages 16-64 who are noninstitutionalized.

The number of elderly in the State in 1970 was 992,059 and is expected to be 1,229,852 by 1980. Handicapped and disabled numbered 631,482 in 1970 and is expected to number 741,346 by 1980. These total figures are arranged by Districts in the section in order to locate where the need exists.

Also included in the section is data on the number of special education students in the State (ages 3-15) for use in identifying the number of handicapped children. The 1970 Census did not provide information on handicapped and disabled children below the age of 16. The number of special education students considered transportation handicapped (visually handicapped, orthopedically handicapped and other health impaired, and minimal brain injury) numbered 15,525 in the school year 1970-71. In the school year 1973-74, the number rose to 20,627.

If the 15,525 special education students in the VH, OH/OHI, and MBI categories are added to the 1,623,541 elderly and handicapped, the 1970 total is 1,639,066 or 14.6 percent of the State population. It is estimated that by 1980 there will be 22,286 students in these three categories for a total number of 1,993,484 elderly and handicapped in the State or 15.2 percent of the total population.

REVIEW OF FEDERAL AND STATE FUNDING SOURCES

The Urban Mass Transportation Administration (UMTA) programs are discussed including Section 16b(1), 16b(2), and 16c. Section 16b(1) authorizes loans and grants to States and local public bodies and agencies to assist them in providing mass transportation services to meet the special needs of the elderly and handicapped. Section 16b(2), on the other hand, provides grants exclusively to private non-profit organizations to assist them in providing transportation to the elderly and handicapped. Section 16c is funding to be used for increasing the information and technology which is available to provide improved transportation facilities and services to meet the special needs of elderly and handicapped.

Section 147 of the Federal-Aid Highway Act which authorizes demonstration grants to encourage the development, improvement, and use of public transportation systems within rural areas is discussed.

The consideration of state programs includes programs within the State Department of Highways and Public Transportation, Governor's Committee on Aging, Texas Department of Community Affairs, Texas Rehabilitation Commission and the Department of Public Welfare.

DISCUSSION OF THE PROBLEM IN TEXAS

This section discusses progress that has been in Texas to this point through federal, state and local programs. The most pressing need now is for coordination among these many programs in order to avoid duplication of effort and service. Duplication of effort leads to fragmentation of service among multiple transportation providers and is an inefficient use of public funds. Texas needs to plan now to ensure that this does not happen. Local areas will, of course, need to structure their

roles according to their own particular needs and resources. However, this should be done in cooperation with surrounding areas to ensure the best results and to avoid duplication. State agencies and local organizations involved with transportation for the elderly and handicapped need to join together with local governments in the planning and implementation of these transportation services to meet the special needs of the elderly and handicapped of Texas.

DISCUSSION OF THE PROBLEM NATIONWIDE

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DISCUSSION OF THE PROBLEM NATIONWIDE

HISTORY

Section 16(a) of the Urban Mass Transportation Act of 1964, as amended, declares as national policy that urban public transportation, which can be effectively used shall be available to the elderly and handicapped.¹ How to implement this national policy; however, is still a question. Attempts by Congress to address the transportation needs of the elderly and handicapped have spanned over the last several years; however, the problems associated with the implementation of these laws have prevented significant change in the mobility of this portion of our population.

The first attempt by Congress was in the form of an amendment in 1970 to the Urban Mass Transportation Act introduced by Congressman Mario Biaggi of New York City. This amendment is Section 16(a) discussed above. The reaction to this amendment was not overwhelming. Mr. George Cronin addressed this reaction in a statement presented to the Governor's Committee on Aging - Research Utilization Workshop:

"During the next four years the Department of Transportation studied the problem. They hired consultants. They conducted demonstrations, but in general the elderly and the handicapped did not experience notable changes in mobility or accessibility."²

Again in 1973 Congress acted. The 1973 Federal Aid Highway Act stated that Federally financed public and mass transportation projects shall be planned and designed so that the facilities and services provided can be utilized by elderly and handicapped persons as effectively as persons not so affected.³

Then in 1974, the National Mass Transportation Assistance Act was passed authorizing \$11.8 billion for mass transportation.⁴ The Act provides \$7.8 billion for capital grants and \$3.9 billion for operating subsidies and/or capital grants over a six-year period. The Act also requires applicants to grant reduced fares not to exceed one-half the rates during peak hours to the elderly and handicapped.

Also in 1974 the Federal-Aid Highway Amendments included the following statement:

"The Secretary of Transportation shall require that projects receiving Federal financial assistance. . . shall be planned, designed, constructed, and operated to allow effective utilization by elderly or handicapped persons who, by reason of illness, injury,

age, congenital malfunction, or other permanent or temporary incapacity or disability, including those who are non-ambulatory wheelchair bound and those with semi-ambulatory capabilities are unable without special facilities or special planning or design to utilize such facilities and services effectively. The Secretary shall not approve any program or project to which this section applies that does not comply with the provisions of this subsection requiring access to public mass transportation facilities, equipment and services for elderly or handicapped persons."⁵

Congress took a further step in 1974 with an amendment by Congressman Biaggi to the Department of Transportation appropriation bill prohibiting the use of funds for services that were not accessible to the elderly and handicapped. The amendment read as follows:

"None of the funds provided under this Act shall be available for the purchase of passenger rail or subway cars, for the purchase of motor buses or for the construction of related facilities unless such cars, buses and facilities are designed to meet the mass transportation needs of the elderly and handicapped."⁶

As a result of this amendment, a legal suit on behalf of the elderly and handicapped was filed in the United States District Court in the State of Maryland. The Maryland Mass Transit Administration had planned to purchase 205 buses for the Baltimore area which Plaintiffs in the suit contended could not accommodate the needs of the elderly and handicapped. The parties of the suit including the U.S. Department of Transportation signed a Memorandum of Understanding on October 30, 1974. This Memorandum of Understanding stipulated that the:

"United States Department of Transportation will propose rules and regulations within one year governing the planning and design of mass transportation facilities and services to assure the availability to elderly and handicapped persons of mass transportation which they can effectively utilize."⁷

This out-of-court settlement contained provisions other than the rule-making discussed above. These same provisions are now being used to a large extent as precedents for other settlements. They include:

- (1) The specifications for the 205 buses to be changed to add stanchions and grab rails, additional signs to denote destinations, and lighting of stepwells; and to reserve three longitudinal seats behind the driver for the elderly and handicapped;

- (2) A program to designate the three seats behind the driver as reserved on all present MTA buses;
- (3) Maryland DOT to apply to UMTA for ten special buses that will take wheelchairs and fund a study to determine how to use these buses;
- (4) Maryland DOT and U.S. DOT to expedite these grants.⁸

The proposed rules and regulations governing the planning and design of mass transportation facilities and services to assure the availability to elderly and handicapped were announced by the Urban Mass Transportation Administration (UMTA) in the Federal Register of February 26, 1975, Volume 40, Number 39. At this writing, the comments on the proposed rules gathered during the public comment period which ended April 30, 1975 are being evaluated by UMTA. Final rules and regulations are expected to be published in early 1976.

The proposed rules and regulations published in the Federal Register, including the following:

- (1) Planning - The purpose of the planning requirement is to ensure that careful thought and study is given to the issue at the local level. "Effective October 1, 1976, the five-year transportation improvement programs and plans must include an element designed to analyze and meet the transportation needs of elderly and handicapped persons."
- (2) Capital Assistance - "Prior to October 1, 1976, each capital grant application must incorporate assurances that the planning is under development and the other requirements of this part are being met. After October 1, 1976, the capital grant application must either incorporate specific requests for funding parts of the program or must indicate when such requests will be forthcoming."
- (3) Fixed Facilities - After the effective date of these regulations it will be required that stations, terminals, buildings, or other facilities designed, constructed or altered be controlled by the minimum standards contained in the "American Standard Specifications for Making Buildings and Facilities Accessible to, and Usable by the Physically Handicapped." In addition UMTA is proposing standards with respect to features that are unique to transit facilities.
- (4) Transit Vehicles - "All transit vehicles purchased with funds from grants made after the effective date of these regulations will be required to have padded interior handrails and stanchions, slip-resistant floor surfaces, priority seating arrangements, improved interior lighting, vehicle destination signs that are designed and located for maximum visibility, public address systems, barrier-free fare collection arrangements, improved

door control mechanisms and an additional retractable lower step to minimize passenger difficulty in entering the vehicle."⁹

Again, remember that the above are only proposed rules and regulations and the final rules have not been published at this writing.

During the last several years while Congress worked toward the goal of providing transportation for the elderly and handicapped through national policy, an attempt was being made by various human service programs to meet the travel needs of their clients by establishing specialized transit systems. Funds from the Administration on Aging in the Department of Health, Education, and Welfare are being utilized to provide transportation services in order to assure that the aged can participate in the programs offered under the Older Americans Act.

These specialized transportation services have addressed the problems of transportation for the elderly and handicapped but the present situation in most cases is very fragmented and certainly does not meet all the needs. The magnitude of the problem is severe. According to the U.S. Bureau of the Census there were 20,066,000 people in the United States age 65 and over in 1970. Approximately seven million of the elderly are handicapped to a degree such that the use of mass transportation services is difficult or impossible while 6,340,000 persons under the age of 65 suffered from handicaps that would cause them difficulties in using mass transit systems. Therefore, the transit dysfunctional handicapped is 13,340,000 as of the 1970 Census. Add to this figure the other two-thirds of the elderly and we find 26,406,000 elderly or handicapped in the United States as of 1970 or 13.0 percent of the population.¹⁰

In Texas, disabled and handicapped people between the ages of 16 and 64 numbered 631,482 or 5.6 percent of the total Texas population in 1970. There were 99,059 people age 65 and over or 8.9 percent of the Texas population; therefore, 14.5 percent of Texas' population was either elderly or handicapped in 1970. This significant portion of our population has faced physical and psychological barriers to transportation for many years and the time has come to seek solutions to their problems.

ELDERLY AND HANDICAPPED - "THE MOBILITY-LIMITED"

Our society has evolved around the private automobile. Our residences are physically separated from places of employment, schools, medical facilities and entertainment. For the majority of the population, it is no problem to jump into the family auto and drive anywhere for goods and services. However, for people who do not own an automobile or are unable to operate one because of age or handicap, the problem of transportation is severe. Add to this the inability to use public transportation, and one must ask how these people reach the goods and services necessary for their everyday lives.

In the past, very little emphasis was placed on providing these people with transportation, and they had no choice but to depend on friends or relatives for rides. If they were physically able, a taxi was another alternative although an expensive one. Certain social service organizations such as the Easter Seal Foundation and other state and local social agencies have attempted to provide specialized transportation for the elderly and handicapped. However, in order for the mobility-limited to participate in normal lives, public transportation service specifically designed to meet their needs is a necessity.

Who are the elderly and handicapped? How do we define these persons? Section 16(d) of the Urban Mass Transportation Act of 1964, as amended, used the following definition:

"The term 'handicapped person' means any individual who, by reason of illness, injury, age, congenital malfunction, or other permanent or temporary incapacity or disability, is unable without special facilities or special planning or design to utilize mass transportation facilities as effectively as persons who are not so affected."¹¹

John B. Schnell defines gradations within the handicapped group as follows:

- (1) "Invalids - persons who are disabled for active service or movement and are virtually confined to bed;
- (2) Nonambulatory - persons who, for all practical purposes, are confined to wheelchairs;
- (3) Semiambulatory - persons who, although handicapped to some extent, can walk with difficulty and generally use crutches or canes;
- (4) Ambulatory - persons who, although handicapped by age or infirmity, can walk without serious difficulty; and
- (5) Able-bodied."¹²

Mr. Schnell proposes that any solution to providing the most effective transportation to this group of people should take the above gradations into account.

The elderly are generally defined as those persons 65 years of age or older. The elderly can be divided into two groups: those who can effectively use public transportation and those who cannot use it so effectively as the first group without special facilities or special planning or design.¹³

It is important to note that not all persons age 65 and over are in need of public transportation. Many own and operate their own private automobiles or they may have close family members who drive and are available

to transport them where they need to go. It is true; however, that the potential for reliance on others for transportation increases at this age.

John B. Schnell who is the Manager of Research at the American Public Transit Association (APTA) and Philip H. Braum, a Senior Transportation Planner at APTA have listed a number of interrelated specific issues that must be resolved in order to provide useful transportation services for the elderly and handicapped:

- (1) "What is the appropriate organizational structure? Should service be provided by a transit operator, one or more mission-oriented social service agencies, a separate organization, or a combination of these?
- (2) How should the specialized service be integrated with existing transportation services? Should handicapped persons be carried on existing vehicles and routes, should a separate service be provided, or should a combination of both types of service be implemented?
- (3) What will the effect of new services be upon existing transportation systems? If separate specialized operations are implemented, will existing transit lose any of its ridership through shifts of elderly and minimally handicapped persons to the new mode?
- (4) For whom should service be provided? Should every person, regardless of the nature and permanence of the handicap, be accommodated?
- (5) What are the dimensions of the need? How many people with what types of handicaps want to travel, where do they wish to go, and when?
- (6) What is the value of these services? Although the goal of providing specialized service is worthwhile, how much of our resources are we as a society willing and able to invest in the equipment and the manpower necessary to achieve the goal?
- (7) How and by whom should specialized services be funded? How much public funding should be used, and what levels of government should provide it? How much of the financial burden should elderly and handicapped individuals be forced to bear?"¹⁴

Another important question not noted by Schnell and Braum but one that also needs study is should transportation actually be provided to these people or should a transportation subsidy be provided to these individuals who would then purchase the needed transportation?

Comprehensive answers to the above questions have not been provided although study has been initiated in several areas. Therefore, any specialized transit service to date has been a "stop-gap" approach to a complicated problem without a complete understanding of what the best overall approach should be.

Specialized transit for elderly and handicapped persons is a very expensive undertaking; therefore, little service of this type has been offered by transit operators. The service which has existed consists of transportation services established by certain social service organizations to serve their clients. This has produced limited service with little or no coordination with other providers of transportation.

John B. Schnell has researched the merits and drawbacks of certain approaches to providing transportation services for the elderly and handicapped. His research includes modification of the types of vehicles currently in service, taxis, TRANSBUS and Small Bus Program vehicles and demand-responsive vehicles. From his research he concluded the following:

"The consensus among those interviewed was that modifying regular commuter transit service will not fully meet the needs of invalids and the nonambulatory and that the preferred means of achieving the objective is through use of a combination of standard transit vehicles, specialized small vehicles, and demand-responsive service."¹⁵

TRAVEL BARRIERS

It is estimated that in 1970 there were approximately six million physically handicapped whose mobility was limited as a result of a chronic or long-term medical condition and at least another 4.6 million people whose mobility was limited by a serious but short-term illness or injury. The largest group of people that consistently experience difficulty with transportation is the aging and there are others excluded by over or undersize, or pregnancy. These groups combined total nearly 44 million people with limited social and economic opportunities who would benefit significantly in time savings, comfort, and convenience for the duration of their handicap if transportation were improved. The able-bodied passenger, such as the passenger who carries his suitcases or bulky parcels around the terminal or a mother with a child to look after, may at one time or another be handicapped in his travel experience. It can be seen that the design and operating changes that could be made to accommodate the chronically handicapped could improve the quality of transportation for the rest of the population.¹⁶

The publication, Travel Barriers lists a number of handicaps which limit people in their willingness and ability to travel:

"Wait standing
Go more than one block

Go up stairs
Go down stairs
Go up/down inclines
Stoop, kneel, crouch
Lift and carry weights up to ten pounds
Reach
Handle or grasp
Move in crowds
Identify visual cues
Identify audio cues."¹⁷

Figure 1 identifies typical barriers for train, subway, bus and airplane travel. Figure 2 suggests some solutions to barriers in bus and trolley travel.

The publication then states the following reason why many handicapped avoid public transportation:

"The handicapped avoid public transit not only because of the barriers in the system, but also out of fear for their personal safety, the inconvenient routes and the difficulty making transfers. While these factors influence all of our decisions to use public transit, they are much more likely to be prohibitive for the handicapped."¹⁸

Movement-related barriers are another obstacle for the handicapped and elderly. Studies show that more than half of the handicapped are unable to maintain their balance in a moving vehicle as it starts, stops or goes around corners. Sixty-one percent are so fearful or embarrassed by crowds that they avoid public transportation entirely. A little less than half can cross a street in the time allowed by a pedestrian light. Also about half cannot climb a long flight of stairs, negotiate bus and train steps or use an escalator.

REMOVING TRAVEL BARRIERS

The feelings expressed in the publication, Travel Barriers are that the best approach to the problem is to plan new transportation systems that are free of barriers or remove existing barriers in today's systems. In speaking of the desirability of specialized transit systems, the author of Travel Barriers notes:

"First, the most important travel barriers to the handicapped are concentrated at access and transfer points, rather than in or at the vehicle itself. A specially equipped, dynamically-routed system with door-to-door service has the greatest potential for minimizing this problem and thereby providing travel opportunities for the largest number of handicapped. Secondly, cities of around 200,000 people, which are generally dependent on buses for public transportation do not in fact have much control over the design of their transit system."¹⁹

FIGURE 1: TYPICAL BARRIERS BY MODE

Functional/Mode Disability	Train	Subway	Bus	Airplane
Walk more than one block	Walk from curb through concourse to platform.	Walk from entrance to boarding platform.	Walk from origin to stop or stop to destination.	Walk from curb to gate.
Self-propelled level change	Board train via steps.	Enter or exit station.	Board bus via steps.	Board plane via steps.
Sit down, get up	Sit/rise from waiting room or train seats.	Sit/rise from seat in car.	Sit/rise from seat in car.	Sit/rise from seat in lounge or on plane.
Stoop, kneel, crouch	Pick up baggage.	Pick up packages.	Pick up packages.	Pick up baggage.
Reach-handle	Open terminal door. Enter restroom. Grasp hand-rail. Open compartment door. Lift suitcase to rack. Buy or turn in ticket.	Buy token. Operate turnstile. Hold overhead grip. Use exit turnstile.	Signal bus. Deposit fare. Grasp overhead grip. Pull signal cord.	Buy ticket. Handle baggage. Fasten seatbelt. Reach overhead switches. Hold oxygen mask. Lower tray table.
Carry 10-pound weight	Carry baggage. Use overhead baggage rack.	Carry packages.	Carry packages.	Handle own baggage.
Move in crowds.	Terminals	Platform and vehicle.	Terminal vehicle.	Ticket counter, boarding area.
Identify visual and audio cues	Read direction signs, clocks. Locate gates, restrooms, seats, exits. Hear announcements and warnings.	Read direction signs. See arriving train. Locate platform edge. Hear announcements and warnings.	See approaching bus. Read bus destination. Locate bus stop, curb, stop. Hear announcements, ask directions.	Locate counters, gates. See schedule displays. Hear P.A. system onboard announcements.
Wait standing	Wait on platform.	Wait on platform.	Wait outdoors.	Stand in boarding or ticket line.

Source: Travel Barriers, U.S. Department of Transportation, Office of the Secretary, May, 1970.

FIGURE 2: BUS AND TROLLEY GUIDELINES

PROBLEM	SOLUTIONS
Sudden Movement	<p>Special bus lanes to control traffic. Pad Hard interior surfaces to reduce accidental injuries. Vertical floor-to-ceiling stanchions.</p>
Crowds	<p>Limit bus seating. Smaller buses with more frequent service. Redesign fare turnstile to eliminate pushbar, widen channel. Pressure mats to open fare gates when coin is deposited, automatic doors at exits. Improve coin receiver to eliminate precision movements. Modify bus to lower entrance, mechanize steps, add ramp or lift. Provide raised platforms at bus stops. Major redesign of bus.</p>
In-vehicle barriers	<p>Pad hard interior surfaces. Provide vertical stanchions for all seats. Reserve seats near entrance. Provide open space for wheelchair. Widen aisles to ASA standards.</p>

Source: Travel Barriers, U.S. Department of Transportation, Office of the Secretary, May, 1970.

It is pointed out in this publication that each transportation mode has its own profile of barriers; however, many of these barriers are common to more than one mode. This discussion will be limited to these common barriers. One barrier which causes much delay in traveling and which encourages passengers to rush is fare collection. This is where bottlenecks occur and where the aged and handicapped may feel uncomfortable and embarrassed by their slowness. Fares collected while people are waiting for vehicles, during the trip or even after the trip begins would help to reduce these bottlenecks. Another alternative would be mechanical collection facilities that would be available throughout the trip so the passenger could make the transaction when convenient for him.

Most of the rushing and confusion caused by pedestrian traffic flow is a result of passengers' difficulty in orienting themselves. Visual indicators such as maps along major passages and clearly marked routes and exits would aid passengers in this problem. Another aid would be floor texture pathways in the form of floor materials of different resiliences and textures which could help guide the sightless, as well as control the speed and direction of able-bodied pedestrians. Another aid might be audio signals such as a pulsed, non-verbal sound of a carefully selected pitch. One especially good idea for the handicapped and aged is special travel lanes for slower pedestrians. This would reduce the social pressure to rush.

Travel Barriers state that 45 percent of the chronically handicapped have difficulty changing levels by stairs, steps, ramps or escalators.

- (1) Escalators - The escalator is difficult to board for persons who have poor balance or cannot move quickly. At least 25 percent of the handicapped have difficulty using a typical escalator; therefore, escalators while a solution to the level change problems of some handicapped is a new barrier to others.
- (2) Elevators - Almost no one has trouble using an automatic elevator and careful attention to details such as location of control buttons will assure accessibility for the handicapped.
- (3) Inclined Elevators - This form of elevator is under development by the Rehabilitative Services Administration of the Department of Health, Education and Welfare. It operates in a standard escalator channel and is seven feet by five and one half feet. It carries ten to fifteen people standing or several wheelchairs.
- (4) Ramps - Although ramps are necessary for people in wheelchairs, they are not accessible for people with canes, crutches, or braces.
- (5) Stair-Lifts - "A stairside lift platform could be installed in the stairways of existing stations. The unit could have a flat platform which would hinge down from its normal storage

position against the wall of the stairway. Summoned by a disabled person using a coded pass or key, this lift platform would move in its folded position to the level of the persons requiring it. There it would be opened, so the traveler could walk or wheel onto the platform and start the unit moving either up or down. The fore and aft edges of the platform should be hinged ramp surfaces which spring up at an angle when the platform is in use, protecting anyone who failed to lock his wheelchair from rolling off. They would also serve as pressure-sensitive safety edges to stop the moving platform instantly if it encountered any resistance, including unwary pedestrians. The platform would be equipped with an audible warning signal, and its path would be clearly marked on the stairs. The passenger would be able to stop the lift at any time by means of a large emergency button within easy reach. After the passenger disembarked, the platform would fold against the stairs wall to wait for its next user".²⁰

Difficulties are also created for many elderly and handicapped persons by the waiting situations which so often follow the rush. In Travel Barriers the author provides some good suggestions for waiting areas:

- (1) Shelters at bus stops and taxi stands should protect people from the weather.
- (2) Shelters should be equipped with infra-red heaters.
- (3) Shelters should have route and schedule information systems.
- (4) Shelters should have reserve space for a wheelchair.
- (5) Shelters should have windows to allow passers-by to see inside, reducing the dangers of personal attack and vandalism.
- (6) Shelters should be well-lighted inside and out.

PROPOSED SOLUTIONS

In his paper entitled, "Public Transportation and Transportation Needs of the Elderly and Handicapped" John B. Schnell states the following:

"Existing and proposed services for the elderly and handicapped are of two main types: those directed at alleviating the costs of transportation and those directed at compensating for physical disabilities. In the first group are services such as reduced fares, transit stamps for those with incomes below a designated level, coupons for taxis, volunteer services arranged by social and welfare agencies, and transit

systems buses leased by social and welfare agencies. Services in the second group include modification of the types of vehicles currently in service, taxis, TRANSBUS and Small Bus Program vehicles, and demand-responsive vehicles."²¹

This report will consider now how the second group of services can be used as solutions to the transportation problems of handicapped and elderly.

Modification of Existing Vehicles on Regular Routes

In order to modify a standard transit bus for handicapped use, a hydraulic lift or equivalent device must be added that will raise and lower a wheelchair and occupant to and from the curb. Seats would have to be removed in order to provide space for wheelchairs and anchoring points for the wheelchairs would have to be provided as well as handholds for wheelchair occupants while riding.

However, there are several problems associated with this solution:

- (1) Modifications would need to be added to all buses in the transit system to be truly effective. This would prove to be very costly and in most cases impractical. Therefore, only a few "special buses" would be so equipped which would result in limited mobility.
- (2) Equipping buses with special devices does not solve the problem of how the wheelchair user and other handicapped and elderly would get to the bus stop from their residences or other points of origin.
- (3) Ideally, trained personnel would need to be provided for assistance to the elderly and handicapped passengers.
- (4) This solution would do nothing to help invalids.

It can be seen that modification of existing buses would be only a partial solution and would not truly satisfy the obligation to ensure public transportation to the elderly and handicapped which can be effectively utilized.

Taxis

Presently in many cities the best means of transportation for the elderly and handicapped is a taxicab with a helpful driver. However, this means of transportation is expensive and handicapped persons will not always have a helpful and strong driver. Some taxicab companies will not take the responsibility for the handicapped and instruct their drivers to only accept handicapped passengers who can get into the cab unassisted.

Taxicabs should not be forgotten in this area as there may be opportunity in the future for the taxi industry to combine with the transit

industry to provide satisfactory service with special vehicles. There is also the possibility of cities or agencies contracting with taxicab companies to provide transportation to elderly and handicapped.

TRANSBUS Program

TRANSBUS is the name given to a bus being designed and tested under a program financed by the Urban Mass Transportation Administration. In 1971 three bus manufacturers were subcontracted to develop their own designs and produce three prototype buses by 1973. Evaluation tests will be conducted on all three designs and UMTA will then select the best design which will be made available to all manufacturers bidding to build future fleets for city transit operators.

TRANSBUS is not being designed specifically for the handicapped but they will be benefited by many of its features. Illumination of bus steps will be better than in present buses and the first step will be only seven inches high. Front doors will be 25 percent wider, seats will be wider and spaced further apart, and loudspeakers will be provided for assistance to passengers. In addition one prototype of each manufacturer's design is being fitted with devices to enable passengers with wheelchairs to board and alight the bus.

The TRANSBUS would have the same problems associated with modification of existing bus service and would do nothing for invalids.

Small Bus Program

This program financed by UMTA is similar to TRANSBUS but specialized to reflect small bus requirements. The scope of the project will include study of the kinds of services that small buses now provide and might provide in the future and study of small demand-responsive vehicles with special equipment to provide transportation to the elderly and handicapped.

Door-Through-Door Demand-Responsive Transportation

The transit system providing this service would supply one or more persons to extend help to the handicapped. They would enter the residences, assist the handicapped persons out of their homes and into the vehicle, and then assist them from the vehicle and through the doors at their destinations.

John B. Schnell concludes the following regarding door-through-door demand-responsive transportation:

"(It) accomodates all capability gradations of the non-ambulatory and is the best solution to the problem of ensuring the availability to elderly and handicapped persons of public transportation they can effectively use."²²

An example of a private enterprise door-through-door transit system sighted by Mr. Schnell is HANDICABS, Inc. founded by John Leonard Lovdahl (himself a paraplegic) in Milwaukee, Wisconsin.

As of February 1973 HANDICABS had 120 small buses and vans equipped with special loading doors and ramps. About half of the space in each bus is equipped with regular seating and the other half is space for persons in wheelchairs or persons who must be transported prone. Most of the vans and all of the buses are equipped with first aid kits, a spare wheelchair, and seat belts that are used to secure the wheelchairs. Each van has a "handiramp" that is hooked to the inside of the loading door and stands to one side but pulls down to meet the sidewalk, curb, or street. This handiramp is used for boarding wheelchairs.

Transporting handicapped children in the local schools provides most of the company's business. However, ten of the vans are used entirely to provide demand-responsive service to the handicapped using a dispatching system. Typically between 35 and 40 dispatches are made with the ten vans each hour.

The service is expensive; however, with a typical round trip to a nursing home or hospital running around \$7 minimum in 1973. Therefore, even though this may be the answer for effective transportation for the elderly and handicapped, an important question is can financing be arranged to bring door-through-door demand-responsive service within the means of the handicapped who have to get by on limited resources.

The only way this type of service can be offered to the elderly and handicapped seems to be by coordination and the pooling of resources between all levels of government and certain social and service organizations.

SOLUTIONS IN DENVER AND LINCOLN, NEBRASKA

Regional Transportation District Denver, Colorado

The Regional Transportation District has instigated a special program to ensure elderly and handicapped people effective transportation. This program is called the special need program and involves three aspects:

- (1) Operation of the Handy Ride service for the handicapped.
- (2) Mid-Day Shopping service for the elderly, using regular coaches on a door-to-door basis.
- (3) Retrofit program for about 150 buses that will provide additional equipment to make these coaches more accessible to the handicapped and the elderly.

The Handy Ride service was inaugurated on February 3, 1975, to serve persons with special transit needs. The program was developed by the RTD staff specialists and citizen representatives from handicapped and elderly organizations in the six-county RTD District. The service features both special public transportation equipment and a subscription for service, featuring door-to-door bus transportation with priority given to work, school, and rehabilitation trips made by the handicapped.

The service includes 12 buses designed with special features such as hydraulic lift devices, wider doors and four wheelchair lock-down devices. Extendable, low-level steps at the front door permit easy boarding. Conveniently placed fare boxes, padded handrails, bus stop bells that can be rung with the elbow and improved lighting are other features. The bus itself has a special suspension system offering a smoother ride for the patron, large windows and full air-conditioning for passenger comfort.

All residents within the six-county RTD District who because of physical disabilities cannot use conventional public transportation, are eligible for subscription in this program. District residents with physical disabilities, including senior citizens who cannot use regular service, were asked to sign-up for the service late in 1974. All applications were reviewed and priorities established for the vital work, school and rehabilitation trips. Additional trip requests for medical visits, shopping, recreation and cultural programs are being evaluated as the equipment and the service is developed to its fullest potential. To maximize the use of the available equipment, schedules were established matching the transit origins and destinations and the time requirements of the patrons. The trips were scheduled on a regular basis to bring the equipment to the largest possible number of patrons with special needs. Bus operators selected this special service and were given extra training. Then once the routes were established they became regular bus routes, not unlike existing transit routes. They differ basically in that they originate at the patron's door and terminate

at the closest possible point to the destination. The return trips are operated in the same manner. Additionally, the service is designed to provide the closest possible time schedule to the needs of the patron. The fare on the Handy Ride is 25 cents per trip.

To the special equipment used on the Handy Ride Service, RTD initiated the second aspect of the program, that is the mid-day shopping service for the elderly. This service uses 45-passenger, standard buses for special shopping needs of senior citizens who can use standard equipment. As many as 15 centers where elderly persons are concentrated are served by the service and special attention is given to suburban area requests from Jefferson, Adams and Arapahoe counties.

The third aspect of the program is to make transportation more accessible to handicapped and elderly on regular bus service by equipping 150 buses with special equipment to meet their needs.

Lincoln Transportation System Lincoln, Nebraska

Lincoln Transit operates a Handi-Van Service which has been in existence for the past four years. The Handi-Van Service includes eight vans, seating five to twelve passengers, depending on the disability. Five of the vans are equipped with rear and side lifts. They are operated from 6:30 A.M. to 10:00 P.M. weekdays and 9:00 A.M. until 7:00 P.M. Saturdays. Sundays, one van is used from 9:00 A.M. until 1:00 P.M. Six vans are operated at one time on weekdays with two back up buses to assure constant service.

Any disabled persons who wishes to use the service must register with the local office for the Aged. They in turn issue an identification card and sell tickets with 10 punch holes for \$3.00. The ID card plus the ticket entitles them to ride the Handi-Van.

The operation is on a first come, first service basis with the severely handicapped receiving priority. With the exception of the regular passenger who works or goes to school each day, patrons must call 24 hours in advance for reservations. However, in emergency situations this 24-hour advance is not required.

An average of 150 passengers are carried per weekday and there is no limitation of where passengers can be picked up or left off in the city of Lincoln.

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IDENTIFYING THE ELDERLY & HANDICAPPED IN TEXAS

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IDENTIFYING THE ELDERLY AND HANDICAPPED IN TEXAS

The State of Texas has land and water area of 267,339 square miles and is divided into 254 counties with 24 standard metropolitan statistical areas. It is an important part of this study to find out how many persons there are who are either elderly or handicapped and where these people are located.

This portion of the study, "Identifying the Elderly and Handicapped in Texas" is divided into three sections; Elderly and Handicapped in Texas, Persons 65 and Over in Texas, and Handicapped and Disabled in Texas. In order to more effectively compare the different areas of the State, the data in these sections have been arranged by the 25 State Department of Highways and Public Transportation Districts. Appendix B includes tables with data arranged by County for reference.

In compiling statistics for this portion of the study many obstacles were encountered. The Census provides information on handicapped and disabled persons beginning with the year 1970; therefore, earlier data is not available. Also, the Census only provides information for ages 16-64 and non-institutionalized individuals. Further, the definition of handicapped in the 1970 Census is quite broad. The definition in the Census refers to a serious illness that has lasted (or is likely to last) for a relatively long time, or a serious physical or mental impairment, defect, or handicap. It is hoped that the 1980 Census data will include different categories of handicapped thereby making it possible to count only those individuals with a severity of handicap which would make specialized transit necessary. It is further hoped that the 1980 Census will include all age groups of handicapped individuals as well as those that are institutionalized.

In order to obtain the number of handicapped children in the State, the Texas Education Agency was asked to provide the Department with data on special education students in the age group of 3 years through 15 years. This of course is not a total figure as some handicapped children are not enrolled in public schools but rather are institutionalized or remain in their homes. Even though many obstacles were encountered in identifying the number of handicapped in the State, for the purposes of this preliminary report, the handicapped and disabled figures will give a good base of information to work from for the more extensive study of the problem that will be included in the forthcoming Master Plan for Public and Mass Transportation in Texas.

ELDERLY AND HANDICAPPED IN TEXAS

According to the 1970 Census, the number of people in the State that were either elderly or handicapped totalled 1,623,541 or 14.5 percent of the population. This total is expected to rise 21.4 percent by the year 1980 to 1,971,198 people or 15 percent of the total 1980 population.

If the information received from the Texas Education Agency is added to the Census data, the number of elderly and handicapped for the year 1970 is 1,639,066 or 14.6 percent of the total population. Visually handicapped, orthopedically handicapped and other health impaired and minimal brain injury special education students in the State ages 3-15 were added to this total. This number is expected to rise to 1,993,484 by 1980.

Elderly and Handicapped in Texas by District

This discussion will be restricted to consideration of the Census data, which includes handicapped and disabled individuals that are noninstitutionalized and in the age group of 16 years to 64 years. The discussion of special education students will be separate as this information was only available by county for one school year.

For purposes of discussion the 25 Districts have been divided into three different categories:

Category A - Those Districts with 7.0 percent or above of the State's elderly and handicapped population.

Category B - Those Districts who fall in the middle range between 3.0 and 6.9 percent of the State's elderly and handicapped.

Category C - Those Districts who have 2.9 percent or below of the State's elderly and handicapped.

These three categories include the following Districts:

	<u>1 9 7 0</u>			<u>1 9 8 0</u>		
	<u>Dis-</u> <u>trict</u>	<u>District Head-</u> <u>quarters</u>	<u>Per-</u> <u>cent</u>	<u>Dis-</u> <u>trict</u>	<u>District Head-</u> <u>quarters</u>	<u>Per-</u> <u>cent</u>
<u>Category A</u>	12	Houston	15.7	12	Houston	17.8
	18	Dallas	12.8	18	Dallas	13.4
	15	San Antonio	8.6	15	San Antonio	8.6
	2	Fort Worth	7.7	2	Fort Worth	7.6
Sub-Total			<u>44.8</u>			<u>47.4</u>

<u>Category B</u>	9	Waco	4.3	9	Waco	3.8
	10	Tyler	4.2	10	Tyler	3.7
	20	Beaumont	4.1	20	Beaumont	4.0
	14	Austin	4.0	14	Austin	4.2
	21	Pharr	3.6	21	Pharr	3.8
	1	Paris	3.3	1	Paris	Cat. C
	5	Lubbock	3.1	5	Lubbock	3.2
	16	Corpus Christi	3.1	16	Corpus Christi	3.4
Sub-Total			<u>29.7</u>			<u>26.1</u>
<u>Category C</u>	19	Atlanta	2.7	19	Atlanta	2.3
	24	El Paso	2.5	24	El Paso	2.8
	1	Paris	Cat. B	1	Paris	2.7
	3	Wichita Falls	2.5	3	Wichita Falls	2.2
	4	Amarillo	2.4	4	Amarillo	2.5
	8	Abilene	2.4	8	Abilene	2.2
	13	Yoakum	2.4	13	Yoakum	2.2
	17	Bryan	2.3	17	Bryan	2.0
	11	Lufkin	2.1	11	Lufkin	1.8
	23	Brownwood	1.8	23	Brownwood	1.4
	6	Odessa	1.6	6	Odessa	1.9
	7	San Angelo	1.2	7	San Angelo	1.1
	25	Childress	0.9	25	Childress	0.7
	22	Del Rio	0.7	22	Del Rio	0.7
Sub-Total			<u>25.5</u>			<u>26.5</u>
TOTAL			<u>100.0%</u>			<u>100.0%</u>

Note: 1970 - 100% = 1,623,541 Elderly and Handicapped in the State
1980 - 100% = 1,971,198 Elderly and Handicapped in the State

You will notice that even though Category B includes the range of 3.0 to 6.9 percent, the highest percentage in this category in 1970 was 4.3 and is expected to be 4.2 in 1980.

Category A - Districts 2, 12, 15, and 18

It is not surprising to note that the Districts in this category include the largest Texas cities; District 12 includes Houston, District 18 includes Dallas, District 15 includes San Antonio and District 2 includes Fort Worth.

District 12 which includes Harris County had the highest percentage of elderly and handicapped persons in the State at 15.7 percent of the 1970 total and 17.8 percent of the 1980 total. The District is expected to increase 37.5 percent in elderly and handicapped population to 350,939 persons by 1980. Harris County with 198,506 of the 255,161 elderly and handicapped persons in District 12 had the highest number of elderly and handicapped in the State in 1970. By 1980 Harris County is expected to have 274,189 persons in this category.

In 1970 District 18 which includes Dallas County had 12.8 percent of the elderly and handicapped in the State and is expected to increase to 263,527 or 13.4 percent of the State's 1980 elderly and handicapped population.

District 15 which includes Bexar County had 8.6 percent of the State total elderly and handicapped in 1970 and is expected to stay the same with 8.6 percent of the total in 1980. Bexar County accounted for 109,281 elderly and handicapped persons in the District 15 total of 140,507 in 1970.

District 2 which includes Tarrant County had 7.7 percent of the total elderly and handicapped in 1970 and is expected to have about 7.6 percent in 1980. Tarrant County's elderly and handicapped population of 93,072 in 1970 accounted for most of the District's total of 124,822 in 1970.

The total population of these four Districts was 5,632,192 in 1970 or 50.3 percent of the State population. The elderly and handicapped population in these four Districts in 1970 was 727,608 or 44.8 percent of the 1,623,541 elderly or handicapped persons in the State. By 1980 the elderly and handicapped population is expected to increase 28.3 percent to 933,617 in these four Districts. This would be 47.4 percent of the total expected 1980 elderly and handicapped population for the State while the total population for these Districts would account for 53.3 percent of the total projected 1980 State population. It can be seen then that about half of our population is located in these four districts as well as about half of our elderly and handicapped individuals. Further, in 1970 there were 562,182 elderly or handicapped persons located in Harris, Dallas, Bexar, and Tarrant Counties. These 562,182 individuals accounted for 77 percent of the four-District total for 1970 of 727,608. By 1980 these same four counties will have 737,125 elderly or handicapped persons or 79 percent of the four-District total of 933,617.

Of the total 5,632,192 four-District population in 1970, 12.9 percent were either elderly or handicapped and by 1980 it is expected that 13.4 percent of the four-District population of 6,983,743 will be elderly or handicapped.

Category B-Districts 1 (1970 Only) 5, 9, 10, 14, 16, 20, 21

The total population of the eight Districts in Category B for 1970 was 3,094,838 or 27.6 percent of the 1970 State population, while elderly and handicapped in these eight Districts number 481,989 or 29.7 percent of the 1970 elderly and handicapped population. By 1980 the total population of the eight Districts in Category B is expected to be 3,164,387 or 24.1 percent of the total State population. The elderly and handicapped population is projected to number 515,934 or 26.1 percent of the total elderly and handicapped in the State.

District 9, with 4.3 percent of the State's elderly and handicapped population in 1970, includes McLennan County which had 27,598 or 39.7 percent of the 69,569 elderly and handicapped persons in that District. Bell County's population for 1970 included 15,767 elderly and handicapped persons or 22.7 percent of the District's total. The other six counties in the District accounted

for the remaining 37.6 percent elderly and handicapped in the District. By 1980 McLennan County will have 29,640 of the expected 74,678 elderly and handicapped persons in the District. Bell County will increase its number of elderly and handicapped to 19,279 persons or 25.8 percent of the 1980 District total.

District 10 includes eight counties with Smith and Gregg Counties accounting for about half of the elderly and handicapped population in the District for both 1970 and 1980. Smith County had 16,363 elderly and handicapped persons in 1970 or 24.0 percent and Gregg County numbered 12,238 persons or 17.9 percent of the 68,269 elderly and handicapped in the District in 1970. By the year 1980 Smith County is expected to have 19,403 elderly and handicapped persons or 26.3 percent of the 73,757 persons expected to be in this category in the District. Gregg County is expected to gain 2,179 more elderly and handicapped persons for a total of 14,417 or 19.5 percent of the District's 1980 elderly and handicapped population.

District 14 includes 11 counties however, Travis County accounted for 66.7 percent of the total District population in 1970 and is expected to have a county population of 358,450 by 1980 or 70.6 percent of the total District population. It is no surprise then to see that in 1970 Travis County accounted for 51.4 percent of the total number of elderly and handicapped persons in the District. By 1980 Travis County is expected to have 48,781 elderly and handicapped persons or 58.6 percent of the expected total District elderly and handicapped population of 83,231. It is interesting to note that in 1970 only 11.3 percent of the total Travis County population were elderly or handicapped and this percent is expected to rise to 13.6 by 1980. In Burnet County there were 3,369 elderly and handicapped in 1970 but this number was 29.5 percent of total Burnet County population; this percent is expected to rise to 32.6 percent of the total county population by 1980.

Of the eight counties in District 20, Jefferson County accounted for 51.3 percent of the total District elderly and handicapped population of 65,590 in 1970. The District's elderly and handicapped population is expected to rise about 18.9 percent to 77,982 by 1980 and Jefferson County will have 42,020 of this number or 53.9 percent.

District 21 includes 10 counties with two of them, Cameron and Hidalgo accounting for more than half of the elderly and handicapped population in the District. In 1970 Hidalgo had 37.0 percent of the elderly and handicapped and is expected to have 39.7 percent in 1980. Cameron County had 31.8 percent in 1970 and is expected to have 32.6 percent in 1980. The total District elderly and handicapped number 58,652 in 1970 and is expected to number 74,707 by 1980, an expected 27.4 percent increase.

District 1 accounted for 3.3 percent of the total State elderly and handicapped population in 1970 but is expected to drop to 2.7 percent by 1980. This will be a 1,696 person decrease to 52,165 by 1980. Grayson County which had 16,769 accounted for 31.1 percent of the 1970 elderly and handicapped District total and is expected to have 31.7 percent of the 1980 total.

Of the ten counties in District 16, Nueces County numbered 26,479 elderly and handicapped persons in 1970 or 52.4 percent of the District total.

By 1980 Nueces County is expected to have 37,371 elderly and handicapped which will be 57.7 percent of the expected 67,765 elderly and handicapped for the District. By 1980 the District is expected to gain 17,239 more elderly and handicapped, an expected 34.1 percent increase to 67,765 persons.

Category C - Districts 1 (1980 Only), 3, 4, 6, 7, 8, 11, 13, 17, 19, 22, 23, 24, and 25

The total population of the 13 Districts in Category C for 1970 was 2,469,700 or 22.1 percent of the total State population while elderly and handicapped numbered 413,944 or 25.5 percent of the State total elderly and handicapped. In 1980 the 14-District total population is expected to be 2,961,465 or 22.6 percent of the 1980 population and elderly and handicapped persons are expected to number 521,647 or 26.4 percent of the total in this category.

District 22 had the lowest number of elderly and handicapped persons in the State in 1970 with 11,645 or 0.7 percent of the State total. This however, is 13.0 percent of the total District population. By 1980 District 25 is expected to have the lowest number of elderly and handicapped persons in the State at 13,451 or 0.7 percent of the total expected elderly and handicapped in the State. In 1970 District 25 had 14,856 elderly and handicapped or 0.9 percent of the State total.

In District 24 it is interesting to note that El Paso County accounted for 93.6 percent of the District elderly and handicapped population of 40,201 and by 1980 it is expected that El Paso County will account for 94.0 percent or 52,881 of the 56,202 expected elderly and handicapped persons in that District. District 24 had an elderly and handicapped population that was 2.5 percent of the total for the State in 1970 and it is projected to have 2.8 percent of the 1980 total.

Elderly and Handicapped in Texas by County

Appendix B contains Figures and Tables with elderly and handicapped data arranged by County. By looking at these it can be seen that Harris County accounted for 12.23 percent of the 1970 total of 1,623,541 elderly and handicapped in Texas; Dallas County accounted for 9.94 percent; Bexar County accounted for 6.73 percent; and Tarrant County accounted for 5.73 percent. Twelve other Texas Counties were in the category of one percent to five percent of the total elderly and handicapped in the State. The remaining counties all had under one percent of the total elderly and handicapped in the State for 1970.

The total elderly and handicapped is expected to be 1,971,198 by 1980. It is expected that Harris County will account for 13.91 percent of this total; Dallas County for 10.74; Bexar for 6.83 percent; and Tarrant for 5.91 percent. Ten other counties are expected to be in the one percent to five percent category by 1980.

TABLE 1: ELDERLY AND HANDICAPPED BY DISTRICTS 1970, 1975 & 1980

Districts	1970			1975			1980		
	No. Elderly & Handicapped	% Total District Population	% of State Total Elderly & Handicapped	No. Elderly & Handicapped	% Total District Population	% of State Total Elderly & Handicapped	No. Elderly & Handicapped	% Total District Population	% of State Total Elderly & Handicapped
1	53,861	22.5	3.3	51,219	21.3	2.9	52,165	21.5	2.7
2	124,822	14.2	7.7	135,377	13.9	7.5	149,727	14.0	7.6
3	39,720	18.7	2.5	40,854	18.8	2.3	42,516	19.2	2.2
4	38,250	13.9	2.4	43,247	14.4	2.4	48,368	14.9	2.5
5	50,490	13.3	3.1	57,411	13.9	3.2	63,814	14.4	3.2
6	25,776	10.9	1.6	31,342	11.7	1.7	37,258	12.5	1.9
7	20,209	18.1	1.2	21,112	18.7	1.2	22,116	19.3	1.1
8	39,667	17.7	2.4	41,728	18.3	2.3	44,082	19.1	2.2
9	69,569	18.1	4.3	72,026	18.5	4.0	74,678	18.8	3.8
10	68,269	20.4	4.2	69,925	20.6	3.9	73,757	21.4	3.7
11	34,293	20.5	2.1	34,502	20.3	1.9	35,927	20.7	1.8
12	255,161	11.7	15.7	304,593	12.3	16.9	350,939	12.7	17.8
13	38,474	18.4	2.4	40,207	18.6	2.2	42,611	19.1	2.2
14	65,032	14.7	4.0	77,324	16.3	4.3	83,231	16.4	4.2
15	140,507	14.2	8.6	155,597	14.6	8.6	169,424	14.8	8.6
16	50,526	12.1	3.1	60,774	13.7	3.4	67,765	14.3	3.4
17	37,871	20.1	2.3	38,370	20.1	2.1	39,180	20.2	2.0
18	207,118	13.1	12.8	234,151	13.0	13.0	263,527	13.1	13.4
19	44,376	20.2	2.7	44,103	19.8	2.5	46,179	20.5	2.3
20	65,590	14.9	4.1	70,839	15.2	3.9	77,982	15.9	4.0
21	58,652	12.8	3.6	69,164	14.9	3.9	74,707	15.8	3.8
22	11,645	13.0	0.7	13,641	14.3	0.8	14,681	14.5	0.7
23	28,606	28.0	1.8	27,213	27.7	1.5	26,911	28.4	1.4
24	40,201	10.6	2.5	50,346	11.9	2.8	56,202	12.0	2.8
25	14,856	27.1	0.9	13,531	26.2	0.8	13,451	27.7	0.7
TOTALS	1,623,541	14.5	100.0	1,798,596	14.8	100.0	1,971,198	15.0	100.0

Sources: U.S. Bureau of the Census, Texas Rehabilitation Commission, Governor's Office - Division of Planning, State Department of Highways and Public Transportation

FIGURE 3
PERCENT OF STATE TOTAL ELDERLY
AND HANDICAPPED BY DISTRICT--1970
 1,623,541 = 100%

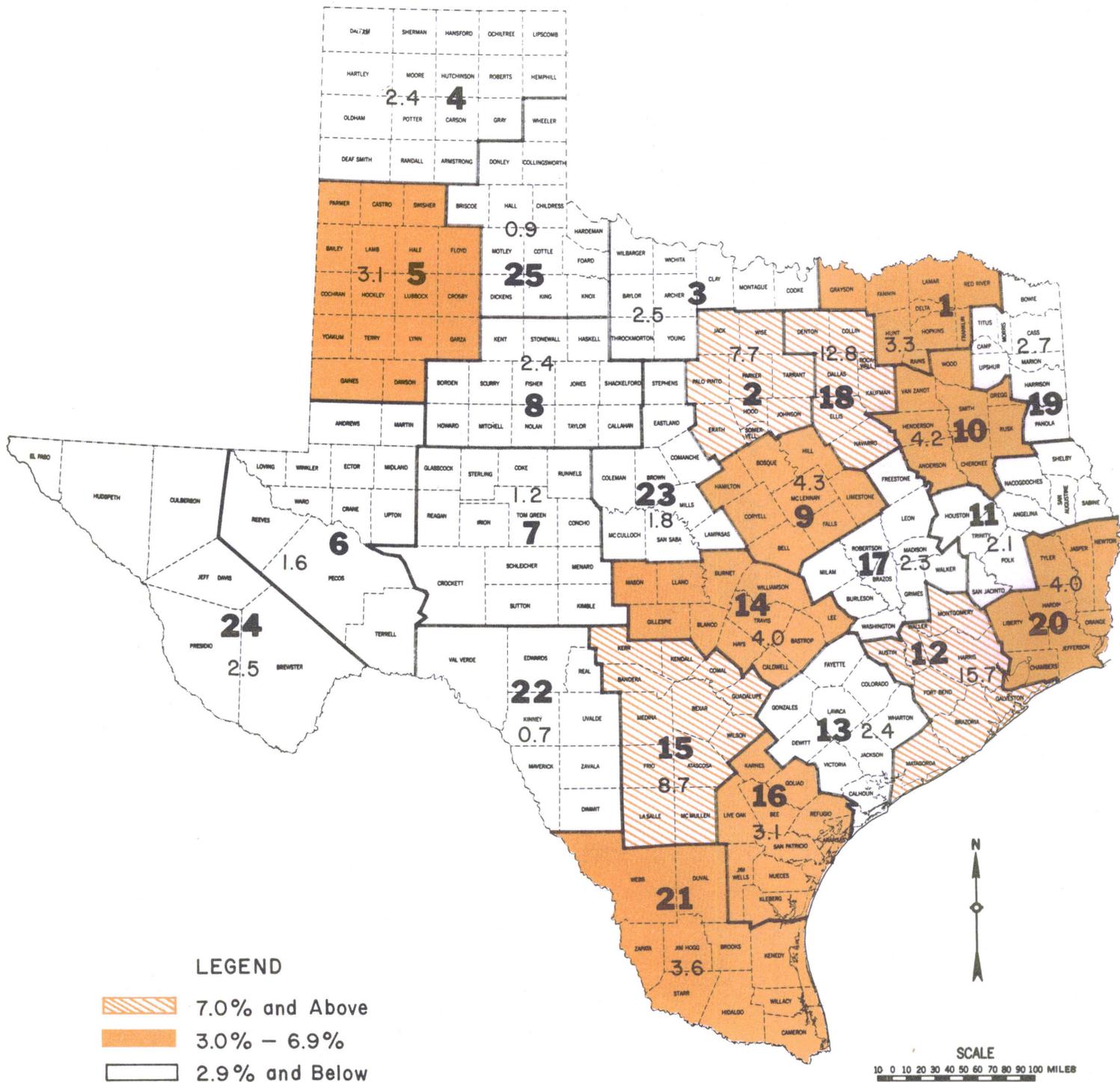
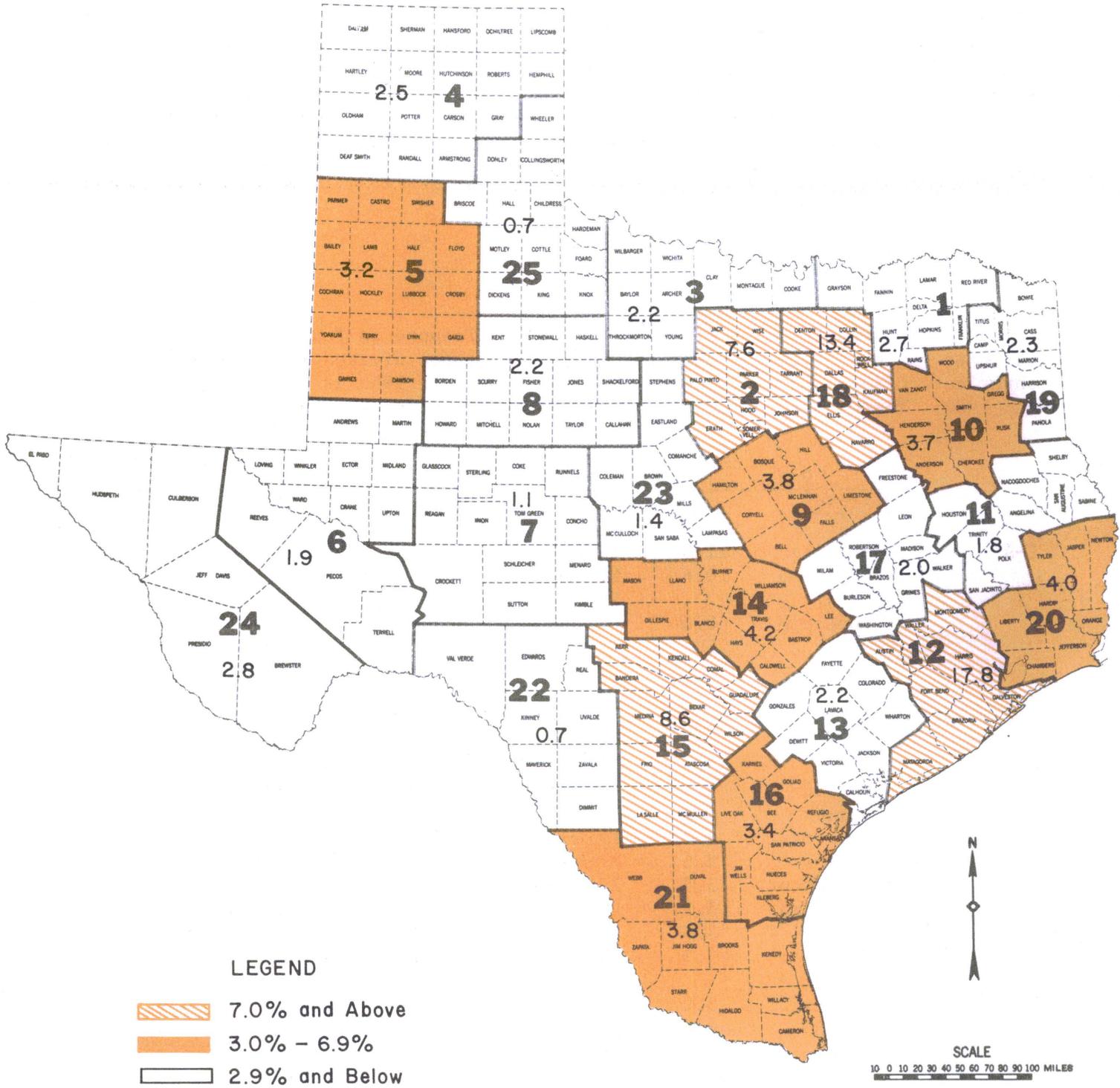


FIGURE 4
PERCENT OF STATE TOTAL ELDERLY
AND HANDICAPPED BY DISTRICT--1980
 1,971,198 - 100%



PERSONS 65 AND OVER IN TEXAS

In 1970 approximately nine percent of the people in Texas were age 65 and over. This means that in the 20 year period from 1950 to 1970 the number of people in this age group has almost doubled from 513,420 persons to 992,059. This increase is expected to be 140 percent from the year 1950 to 1980 for a total 1,229,852 persons age 65 and over in the State. The total Texas population has increased approximately 45 percent in the same 20 year period from 1950 to 1970. The expected increase from 1950 to 1980 is 70 percent for a 1980 total State population of 13,109,595. The total population then is expected to increase about 17 percent from 1970 to the year 1980 while elderly population is expected to increase 24 percent in the same time period. The number of persons age 65 and over was 6.7 percent of the total population in 1950 and is expected to be 9.4 percent of the total population by 1980.

Persons 65 and Over in Texas by District

As in the case of "Elderly and Handicapped in Texas by District", the data on persons 65 and over by District has been divided into the same three categories. However, we will analyze the year 1950 as well as 1970 and 1980. These three categories include the following Districts:

	<u>1 9 5 0</u>		<u>1 9 7 0</u>		<u>1 9 8 0</u>	
	<u>District</u>	<u>%</u>	<u>District</u>	<u>%</u>	<u>District</u>	<u>%</u>
C-A	18-Dallas	11.0	18-Dallas	11.9	18-Dallas	12.5
	12-Houston	10.6	12-Houston	13.7	12-Houston	16.0
	15-San Antonio	8.0	15-San Antonio	8.5	15-San Antonio	8.4
	2-Fort Worth	7.2	2-Fort Worth	7.5	2-Fort Worth	7.5
	Sub-Total	<u>36.8</u>		<u>41.6</u>		<u>44.4</u>
	C-B	9-Waco	5.6	9-Waco	4.6	9-Waco
1-Paris		5.1	1-Paris	3.7	1-Paris	3.1
10-Tyler		4.8	10-Tyler	4.6	10-Tyler	4.3
14-Austin		4.8	14-Austin	4.4	14-Austin	4.2
21-Pharr		3.6	21-Pharr	3.8	21-Pharr	3.7
20-Beaumont		3.5	20-Beaumont	4.0	20-Beaumont	4.1
19-Atlanta		3.5	19-Atlanta	3.0	19-Atlanta	Cat. C
17-Bryan		3.5	17-Bryan	Cat. C	17-Bryan	Cat. C
13-Yoakum		3.3	13-Yoakum	Cat. C	13-Yoakum	Cat. C
3-Wichita Falls		3.0	3-Wichita Falls	Cat.C	3-Wichita Falls	Cat. C
5-Lubbock		Cat. C	5-Lubbock	3.0	5-Lubbock	3.2
16-Corpus Christi		Cat. C	16-Corpus Christi	3.0	16-Corpus Christi	3.3
Sub-Total		<u>40.7</u>		<u>34.1</u>		<u>30.0</u>

C-C	8-Abilene	2.9	8-Abilene	2.7	8-Abilene	2.5
	11-Lufkin	2.8	11-Lufkin	2.3	11-Lufkin	2.1
	23-Brownwood	2.8	23-Brownwood	2.2	23-Brownwood	1.7
	16-Corpus		16-Corpus		16-Corpus	
	Christi	2.7	Christi	Cat. B	Christi	Cat. B
	5-Lubbock	2.7	5-Lubbock	Cat. B	5-Lubbock	Cat. B
	24-El Paso	2.0	24-El Paso	2.3	24-El Paso	2.4
	4-Amarillo	1.9	4-Amarillo	2.3	4-Amarillo	2.4
	25-Childress	1.5	25-Childress	1.1	25-Childress	0.9
	7-San Angelo	1.5	7-San Angelo	1.4	7-San Angelo	1.3
	22-Del Rio	0.9	22-Del Rio	0.7	22-Del Rio	0.7
	6-Odessa	0.8	6-Odessa	1.3	6-Odessa	1.8
	3-Wichita		3-Wichita		3-Wichita	
	Falls	Cat. B	Falls	2.7	Falls	2.4
	13-Yoakum	Cat. B	13-Yoakum	2.7	13-Yoakum	2.5
	17-Bryan	Cat. B	17-Bryan	2.6	17-Bryan	2.2
	19-Atlanta	Cat. B	19-Atlanta	Cat. B	19-Atlanta	2.7
Sub-Total		<u>22.5</u>		<u>24.3</u>		<u>25.6</u>
TOTAL		<u>100.0%</u>		<u>100.0%</u>		<u>100.0%</u>

Note: 1950 - 100% = 513,420 Elderly in the State
1970 - 100% = 992,059 Elderly in the State
1980 - 100% = 1,229,852 Elderly in the State

Category B includes the range of 3.0 to 6.9 percent; in 1950 the highest percentage in this category was 5.6, in 1970 it was 4.6 and by 1980 it is expected to be 4.1 percent.

Category A - Districts 2, 12, 15, and 18

The population of the four Districts in Category A included 189,052 persons age 65 and over in 1950 or 36.8 percent of the total. Total population in these four Districts in 1950 accounted for 39 percent of the four-District total. The total population in these Districts is expected to increase 189 percent to 6,983,743 by the year 1980. The elderly population is expected to more than double in the same time period. Approximately 50 percent of the State's total population were located in these four Districts in 1970 and 41.6 percent of the persons age 65 and over in the State were also found in these four Districts. By 1980 it is expected that 53.3 percent of the State's population will be in these Districts while persons age 65 and over will number 546,144 or 44.4 percent of the 1980 expected total.

District 18 which includes Dallas County had the largest number of elderly at 56,547 of all the Districts in 1950. However, in 1950 and 1970 District 12 which includes Harris County had the largest number and this District is expected to have the largest number in 1980 also. In the 20 year period from 1950 to 1970, District 18 doubled its elderly population for a 1970 total of 118,371. The District is expected to increase its number of elderly by 30 percent by 1980

for a total elderly population of 154,259. Dallas County accounted for 63.9 percent of the District's elderly population in 1950 and is expected to account for 78.3 percent by the year 1980.

District 12 is expected to increase in total population 158 percent from the year 1950 to 1980. The number of persons 65 and over is expected to increase 262 percent from 54,161 persons in 1950 to 196,424 by the year 1980. Approximately 14 percent of the 1970 total State elderly population were found in District 12 and by 1980 it is expected that 16 percent will be in this District. This is an expected 44 percent increase in elderly population in that 10 year period. Harris County accounted for 70 percent of the District's elderly in 1950 and is expected to account for about 77 percent of the expected 1980 total.

Bexar County is one of 12 counties in District 15 and accounted for 73.2 percent of the District's elderly in 1950. It is expected to account for 76 percent of the District's elderly by the year 1980. The total District elderly population is expected to increase 150 percent from 41,207 persons age 65 and over in 1950 to 102,836 persons by 1980. The total population of the District is expected to increase 79 percent in this same time period. The District elderly population is expected to increase 22 percent from a total elderly of 84,503 in 1970 to the 1980 total. The District accounted for eight percent of the State's total elderly in 1950 and is expected to account for 8.4 percent of the total in 1980.

District 2 which includes Tarrant County doubled its elderly population between 1950 and 1970 and is expected to increase this number approximately 25 percent more for a total of 92,625 persons age 65 and over by the year 1980. Out of the nine counties in the District, Tarrant County accounted for about 72 percent of the elderly in the District in 1950 and is expected to account for about 75 percent with 69,229 persons by 1980.

Category B - Districts 1, 3 (1950 Only), 5 (1970 and 1980), 9, 10,
13 (1950 Only), 14, 16 (1970 and 1980), 17 (1950 Only),
19 (1950 and 1970), 20 and 21

The Category B Districts in 1950 numbered 209,039 elderly or 40.7 percent of the total elderly in Texas while total population in the Districts was 2,748,544 or 25.7 percent of the State total. The Category B Districts total population was 29.6 percent of the total State in 1970 while the Districts total elderly was 34.1 percent of the State total. It is expected that in 1980 26 percent of the State's population will be found in these Category B Districts and 30 percent of the elderly.

District 9 which accounted for 5.6 percent of the State's elderly population in 1950 is expected to increase its total population 21.5 percent to 396,284 by the year 1980. Elderly population is expected to increase 76 percent in that same time period for a 1980 total of 50,136. In 1950 two counties in the District accounted for 51.7 percent of the total elderly. These two counties were: Bell County with 16.8 percent of the total District's elderly and McLennan with 34.9 percent of the total. By the year 1980 it is expected

that Bell will account for 20.8 percent of the District's elderly and McLennan County for 41.3 percent. The eight counties in the District are expected to gain 4,485 more persons age 65 and over between the years 1970 and 1980.

District 1 accounted for 5.6 percent of the State's elderly in 1950 but is expected to only account for 4.1 percent of the elderly in 1980. The total population of the District decreased about five percent between 1950 and 1970 and it is expected that the District will decrease by 4,185 more people by 1980. However, the District is expected to gain 1,704 more persons age 65 and over. The expected gain from the year 1950 to 1980 in elderly population for the District is 12,315 people; an expected 46.8 percent increase. Grayson County accounted for 27.2 percent of the total elderly in the District in 1950 and is expected to account for 30.9 percent of the District elderly by the year 1980.

Total population in District 10 is expected to increase about nine percent from 316,182 persons in 1950 to 345,025 by 1980. However, the elderly population is expected to double in number for that same time period; from 24,700 persons age 65 and over in 1950 to 52,899 by 1980. It is expected that between the year 1970 and 1980 the District will gain 7,043 more persons in this age group. Smith County had the highest percentage of the elderly in the District at 23.6 percent in 1950; it is expected that Smith County will account for 24.8 percent of the 1980 elderly total.

District 14 is expected to increase about 63 percent in total population from 301,767 persons in 1950 to 507,894 in 1980. The elderly population in the District is expected to double in the same time period from 24,581 persons in 1950 to 51,675 in 1980. Travis County accounted for 53.3 percent of the total population in the District in 1950 and is expected to account for approximately 70 percent of the total by 1980. In 1950 the elderly in Travis County numbered 10,531 persons or 42.8 percent of the District total. By 1980 it is expected that Travis County will account for about 52 percent of the total elderly in the District. There is an expected 17.9 percent increase in elderly population in the District between the year 1970 and 1980 for an expected total of 51,675 or a gain of 7,839 persons.

In 1950 the total population in District 21 was 411,889 and by 1980 the population is expected to increase 23.9 percent to 510,274 persons. The number of persons age 65 and over was 18,459 in 1950 and is expected to increase 145 percent to 45,245 by the year 1980. Between 1970 and 1980 it is expected that the District will gain 7,629 more persons in this age group; an expected 20.3 percent increase. Out of the ten counties in the District two accounted for 67.5 percent of the elderly population in 1950. Cameron County had 30.4 percent and Hidalgo had 37.1 percent. By 1980 it is expected that Cameron County will account for 32.2 percent of the elderly in the District and Hidalgo County for 37.3 percent.

The number of persons age 65 and over in District 20 is expected to almost triple from the year 1950 to 1980. Total population in the District is expected to increase about 48 percent in this same time period. Between the years 1970 and 1980 elderly people are expected to increase in the District by 11,532 persons for a 29.4 percent increase. Approximately half of the elderly in the District was found in Jefferson County in 1950 and it is expected that 54.3 percent of the elderly will be in Jefferson County by 1980.

District 19 is expected to gain 3,127 more persons in total population from the year 1950 for a 1980 total population of 225,289. However, the elderly population is expected to increase by 15,191 persons for a 1980 total of 33,290 in the same time period, an expected 83.9 percent gain. A little less than half of the elderly population in District 19 was found either in Bowie or Harrison County in 1950. By 1980 approximately 46 percent will be found in these two counties. The other seven counties in the District account for the other half of the elderly total. Although District 19 is found in Category B in 1950 and 1970 it is expected to account for only 2.7 percent of the elderly total in the State in 1980 and therefore, changes to Category C for that year.

District 17 accounted for 3.5 percent of the State's elderly total in 1950 however, by 1970 the District had dropped to Category C at 2.6 percent of the State total. By 1980 it is expected that the District will account for 2.2 percent of the State elderly total. The elderly population in the District is expected to rise 51 percent from 18,161 persons age 65 and over in 1950 to 27,457 by 1980. Of the ten counties in the District, Brazos County had the highest percentage of the District's elderly in 1970 at 18.2 percent. This percent is expected to be 19.3 by 1980, the highest percentage of any county in that year.

District 13 was included in Category B only in the year 1950. In that year the District accounted for 3.0 percent of the total State elderly. The elderly population in the District is expected to increase from 17,058 in 1950 to 30,189 persons by 1980; an expected 77 percent increase. Total population in the District will increase by 25,366 people in the same time period. The elderly population is dispersed throughout the District without any county accounting for more than 15.3 percent of the elderly in the District in 1970 and not more than 17.2 percent projected for 1980.

In District 3 the number of persons age 65 and over is expected to almost double from the year 1950 to 1980. In 1950 the number of elderly accounted for 3.0 percent of the total State elderly. By 1970 the percent of elderly accounted for 2.7 percent of the State total elderly and is expected to be 2.5 percent by 1980. The total population in the District is expected to increase about nine percent from 202,276 persons in 1950 to 221,259 by 1980. Between 1970 and 1980 it is expected that the District will gain 2,869 more persons age 65 and over. Wichita County accounted for 37.2 percent of the elderly in the District in 1950 and by 1970 it accounted for 43.5 percent. In 1980 it is expected that Wichita County will account for 44.5 percent of all the persons in the District age 65 and over.

The number of persons age 65 and over is expected to almost triple in number in District 5 from 13,796 in 1950 to 39,008 by 1980. Total population in the District is expected to increase by 55 percent in the same time period. Out of the 17 counties in the District, Lubbock County accounted for 29.8 percent of the District's elderly in 1950 and by 1970 it accounted for 38.2 percent. By 1980 it is expected that Lubbock County will account for 40.3 percent of the number of persons age 65 and over in the District.

District 16 is expected to increase by approximately 49 percent in total population from 316,246 persons in 1950 to 472,480 by 1980. The number of persons age 65 and over are expected to almost triple in number in that same

time period. A 36.0 percent increase in the number of elderly persons in the District is expected between the years 1970 and 1980 with a gain of 30,066 more people in this age group. Out of the ten counties in the District, Nueces County accounted for approximately 42 percent of the District's elderly in 1950. In 1970 Nueces County accounted for 49.8 percent of the elderly in the District and is expected to account for 52.9 percent by 1980.

Category C - Districts 3 (1970 and 1980), 4, 5 (1950 Only), 6, 7, 8, 11, 13 (1970 and 1980), 16 (1950 Only), 17 (1970 and 1980), 19 (1980 Only), 22, 23, 24, and 25

The number of persons age 65 and over in District 8 is expected to more than double from 14,918 persons in 1950 to 30,682 by 1980. Total population in the District is expected to increase by 16,325 more persons for a total in 1980 of 231,389.

District 11 is expected to increase its elderly population 74.2 percent from 14,567 persons in 1950 to 25,371 in 1980. Total population in the District is expected to increase 16.2 percent in the same time period.

Total population in District 23 is expected to decrease 27.5 percent from 130,460 persons in 1950 to 94,605 in 1980. Elderly population in the District however, is expected to increase approximately 46 percent to 21,201 persons age 65 and over in the same time period. However, between the years 1970 and 1980 the number of persons age 65 and over are expected to decrease by 145 persons.

El Paso County is one of six counties in District 24 however, the County accounted for 89.5 percent of the District's elderly population in 1950 and for 91.8 percent of the District's total in 1970. By 1980 it is expected that El Paso County will account for 92.8 percent of the District's elderly population. The elderly in the District is expected to increase 184 percent from 10,191 persons in 1950 to 28,966 by 1980. The total District population is expected to increase 116 percent in the same time period.

District 4 which includes 17 counties is expected to increase its number of elderly 211 percent from 9,868 persons in 1950 to 30,733 in 1980. Total population in the District is expected to increase only 11.8 percent in the same time period.

The total population in District 25 is expected to decrease 49 percent from 94,872 persons in 1950 to 48,632 in 1980. However, the elderly population is expected to increase 40 percent in the same time period. The expected number of persons 65 and over in the District for 1980 is 10,711 which means District 25 is expected to account for only 0.9 percent of the total elderly in the State for that year.

The number of persons age 65 and over in District 7 are expected to double from the year 1950 to 1980. Total population in the District is expected to increase only about three percent in that same time period.

District 22 had the lowest percentage of the State's elderly population in both 1970 and 1980 at 0.7 percent for both years. In 1970 there were 8,084 persons in the District age 65 and over and by 1980 it is expected that there will be 8,773 persons in that age group. The total District population in 1970 was 95,424 and is expected to be 101,397 in 1980. The total District population is expected to increase approximately 35 percent from 1950 to 1980.

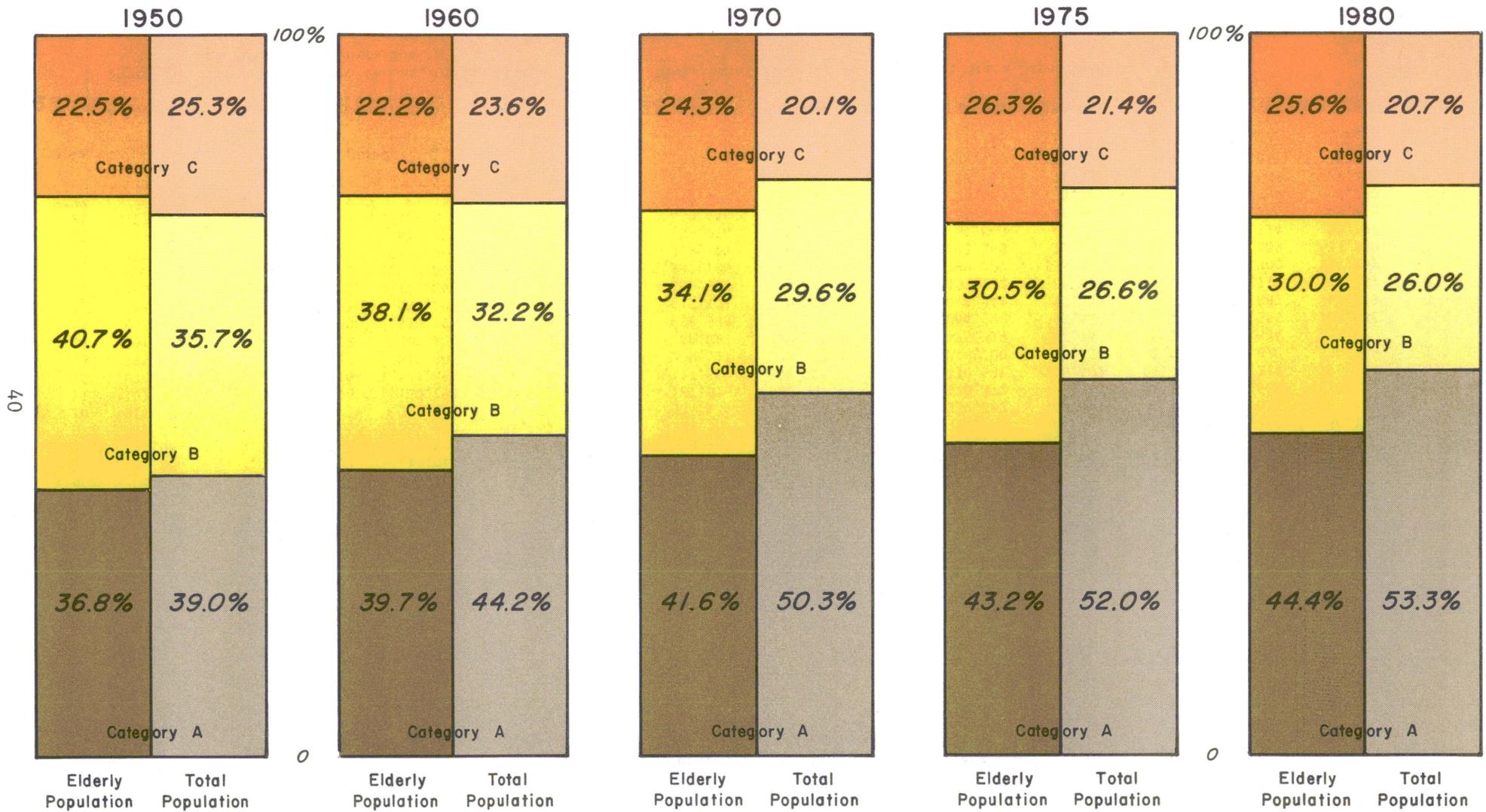
In 1950 District 6 had the lowest percentage of the State's elderly at 0.8 percent. However, the District is expected to increase 463 percent in its elderly population from 3,822 in 1950 to 21,516 by 1980. Total population in the District is expected to increase 118 percent in the same time period.

TABLE 2: TOTAL DISTRICT POPULATION AND PROJECTIONS
NUMBER AGE 65 & OVER--1950 - 1980

Dis- tricts	1 9 5 0			1 9 6 0			1 9 7 0			1 9 7 5			1 9 8 0		
	District Population	# 65 & Over	% of State Total Elderly	District Population	# 65 & Over	% of State Total Elderly	District Population	# 65 & Over	% of State Total Elderly	District Population	# 65 & Over	% of State Total Elderly	District Population	# 65 & Over	% of State Total Elderly
1	252,312	26,296	5.1	218,786	32,000	4.3	238,918	36,907	3.7	241,012	37,762	3.4	243,103	38,611	3.1
2	481,484	37,137	7.2	665,297	55,216	7.4	878,636	73,984	7.5	973,256	83,306	7.5	1,067,874	92,625	7.5
3	202,276	15,289	3.0	219,104	21,721	2.9	212,678	27,128	2.7	216,970	28,564	2.6	221,259	29,997	2.4
4	207,681	9,868	1.9	289,414	15,998	2.1	275,401	23,080	2.3	299,542	26,910	2.4	323,679	30,733	2.4
5	285,550	13,796	2.7	377,936	22,086	3.0	380,871	29,653	3.0	411,765	34,335	3.1	442,649	39,008	3.2
6	136,212	3,822	0.8	249,164	7,614	1.0	236,290	12,909	1.3	266,943	17,215	1.6	297,593	21,516	1.8
7	111,284	7,715	1.5	111,812	10,917	1.5	111,586	13,717	1.4	113,119	14,643	1.3	114,650	15,562	1.3
8	215,064	14,918	2.9	247,881	20,572	2.7	223,911	26,400	2.7	227,653	28,544	2.6	231,389	30,682	2.5
9	326,055	28,489	5.6	352,772	38,442	5.2	383,507	45,651	4.6	390,077	47,895	4.3	396,284	50,136	4.1
10	316,182	24,700	4.8	312,019	34,305	4.6	334,134	45,856	4.6	339,582	49,379	4.5	345,025	52,899	4.3
11	163,473	14,567	2.8	150,292	18,457	2.5	167,070	22,924	2.3	170,372	24,149	2.2	173,669	25,371	2.1
12	1,070,059	54,161	10.6	1,578,684	90,729	12.2	2,177,858	136,376	13.7	2,470,538	166,402	15.0	2,763,214	196,424	16.0
13	197,504	17,058	3.3	212,808	22,357	3.0	209,527	26,877	2.7	216,200	28,136	2.5	222,870	30,189	2.5
14	301,767	24,581	4.8	342,200	34,048	4.6	442,861	43,836	4.4	475,379	47,760	4.3	507,894	51,675	4.2
15	636,826	41,207	8.0	830,792	62,952	8.4	988,598	84,053	8.5	1,064,981	93,448	8.4	1,141,355	102,836	8.4
16	316,246	13,798	2.7	401,200	21,354	2.9	417,191	30,066	3.0	444,841	35,478	3.2	472,487	40,889	3.3
17	186,439	18,161	3.5	177,046	22,528	3.0	188,318	26,178	2.6	191,022	26,821	2.4	193,719	27,457	2.2
18	820,743	56,547	11.0	1,153,833	86,799	11.7	1,587,100	118,371	11.9	1,799,202	136,318	12.3	2,011,300	154,259	12.5
19	222,162	18,099	3.5	210,983	23,431	3.1	219,191	29,480	3.0	222,243	31,386	2.8	225,289	33,290	2.7
20	331,958	17,907	3.5	415,757	28,102	3.8	439,906	39,265	4.0	464,843	45,034	4.1	489,774	50,797	4.1
21	411,889	18,459	3.6	466,320	26,473	3.5	457,450	37,616	3.8	465,447	40,064	3.6	510,274	45,245	3.7
22	74,852	4,467	0.9	85,422	5,602	0.7	89,447	7,391	0.7	95,424	8,084	0.7	101,397	8,773	0.7
23	130,460	14,534	2.8	106,543	18,668	2.5	102,215	21,346	2.2	98,411	21,277	1.9	94,605	21,201	1.7
24	217,844	10,191	2.0	333,683	15,650	2.1	379,261	22,487	2.3	424,437	25,728	2.3	469,611	28,966	2.4
25	94,872	7,653	1.5	69,929	9,370	1.3	54,805	10,508	1.1	51,722	10,613	1.0	48,632	10,711	0.9
	7,711,194	513,420	100.0	9,579,677	745,391	100.0	11,196,730	992,059	100.0	12,134,981	1,109,251	100.0	13,109,595	1,229,852	100.0

Sources: U.S. Bureau of the Census, Office of the Governor - Division of Planning Coordination, State Department of Highways and Public Transportation

**FIGURE 5
AGE 65 & OVER IN TEXAS
COMPARISON TO CATEGORY TOTAL POPULATION**



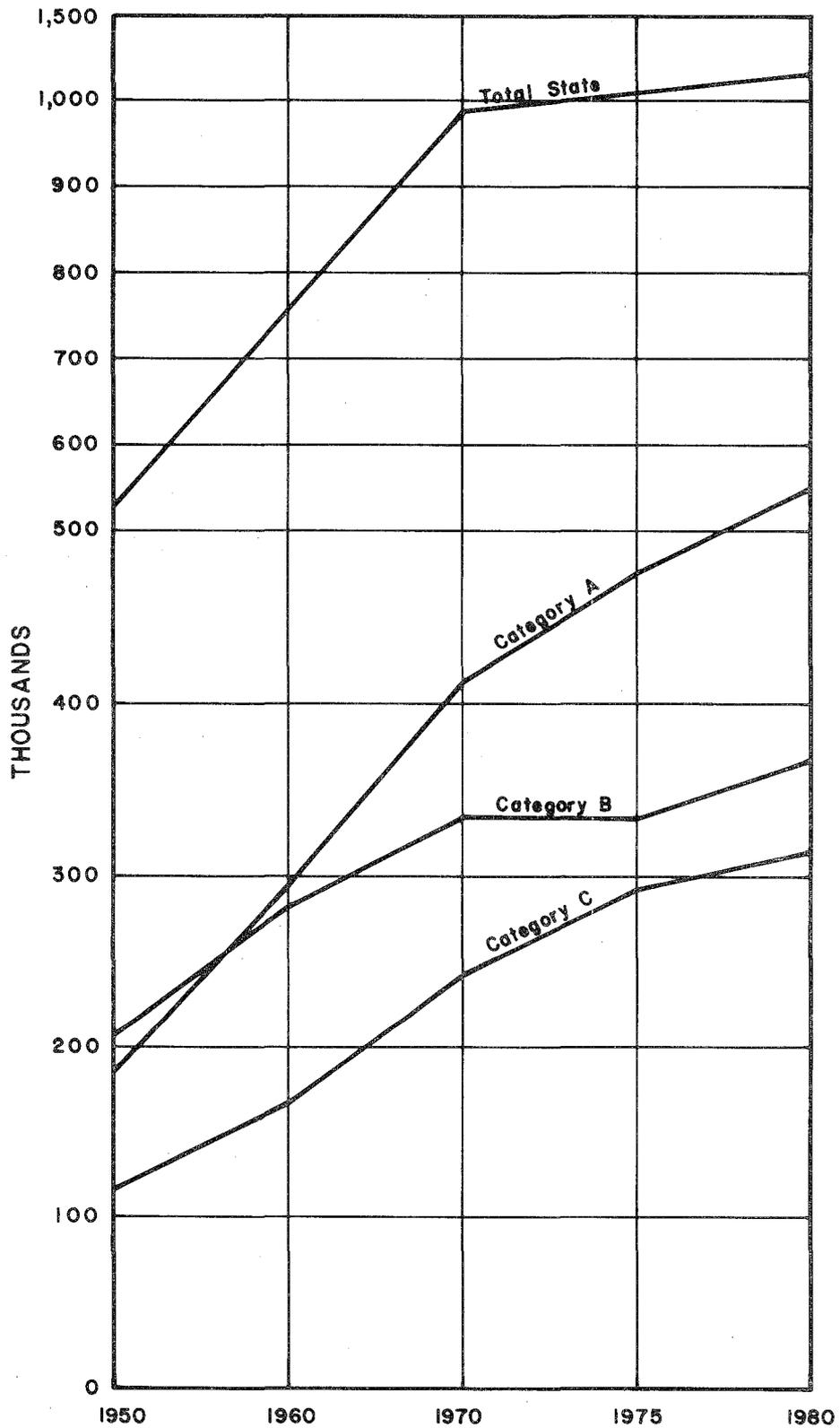
Category A - Those Districts with 7.0% or above of the State's Elderly

Category B - Those Districts that fall in the middle range between 3.0 and 6.9% of the State's Elderly

Category C - Those Districts with 2.9% or below of the State's Elderly

Note: Category A includes Districts 2, 12, 15, and 18.

**FIGURE 6
NUMBER PERSONS 65 AND OVER
BY DISTRICT CATEGORY
1950 - 1980**

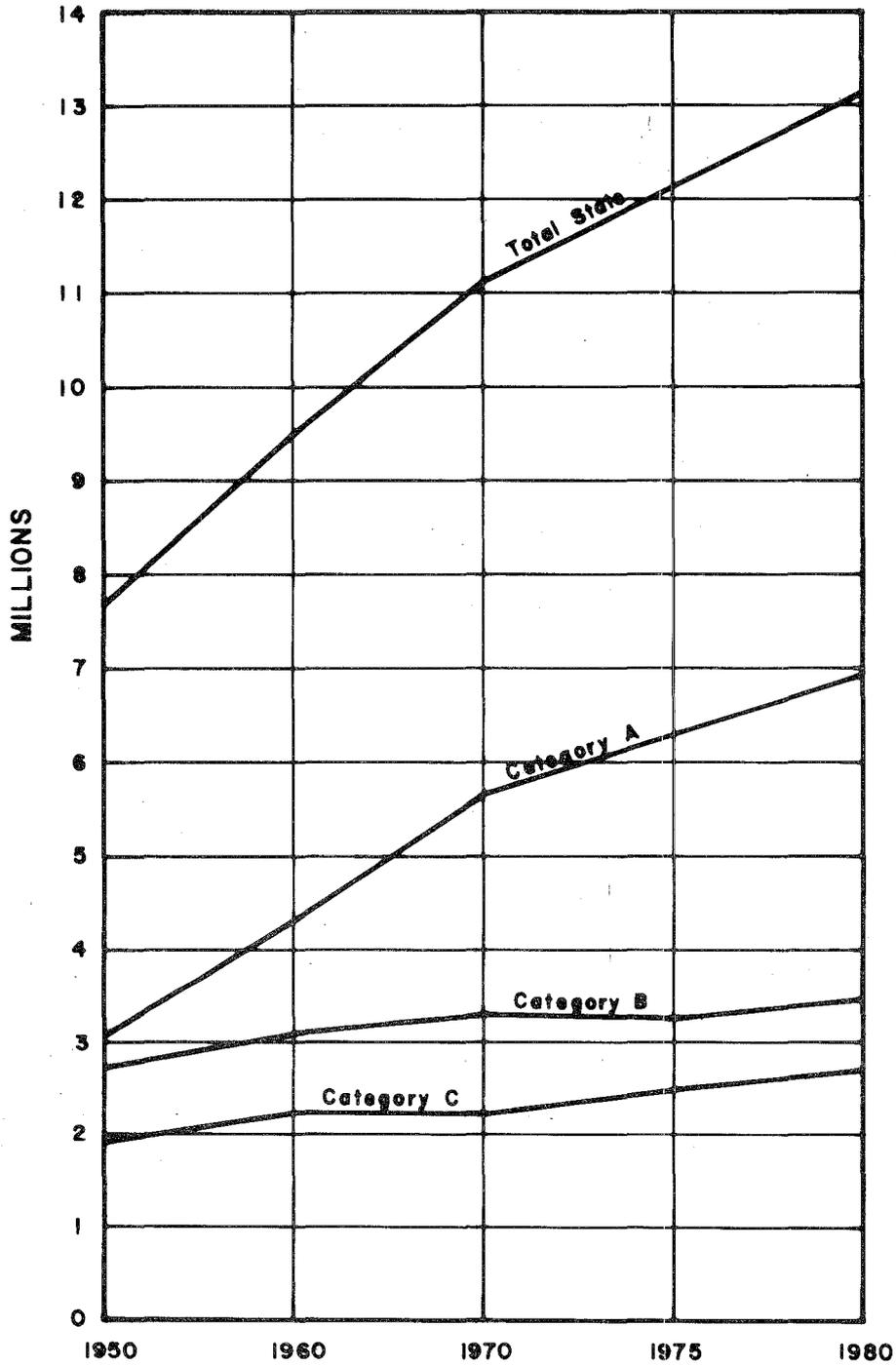


Category A - Those Districts with 7.0% or above of the State's Elderly

Category B - Those Districts that fall in the middle range between 3.0 and 6.9% of the State's Elderly

Category C - Those Districts with 2.9% or below of the State's Elderly

**FIGURE 7
TOTAL POPULATION
BY DISTRICT CATEGORY
1950 - 1980**



Category A - Those Districts with 7.0% or above of the State's Elderly

Category B - Those Districts that fall in the middle range between 3.0 and 6.9% of the State's Elderly

Category C - Those Districts with 2.9% or below of the State's Elderly

Family Characteristics of Population Age 65 and Over - Urban & Rural, 1970

Of the 992,059 persons who were age 65 and over in 1970, 712,387 or 72 percent lived in urban places while 279,672 lived in rural places. Of the 712,387 urban residents, 485,779 or 49 percent lived in urbanized areas. Central city dwellers accounted for 86 percent of the 485,779 living in urbanized areas while 14 percent lived in the urban fringe.

Ten percent of the 992,059 persons age 65 and over lived in other urban places of 10,000 or more and 12 percent lived in other urban places of 2,500 to 10,000.

The number of persons age 65 and over who lived in rural areas in 1970 were 279,672 or 28 percent of the total number of people in this age group. Approximately six percent of all people age 65 and over lived in places of 1,000 to 2,500 while 22 percent lived in other rural areas.

Inmates of institutions numbered only 49,890 in this age group or about five percent while males 65 and over who were heads of a family numbered 313,730 or 32 percent. Females who were heads of a family numbered 53,253 or about five percent and wives of heads accounted for approximately 19 percent.

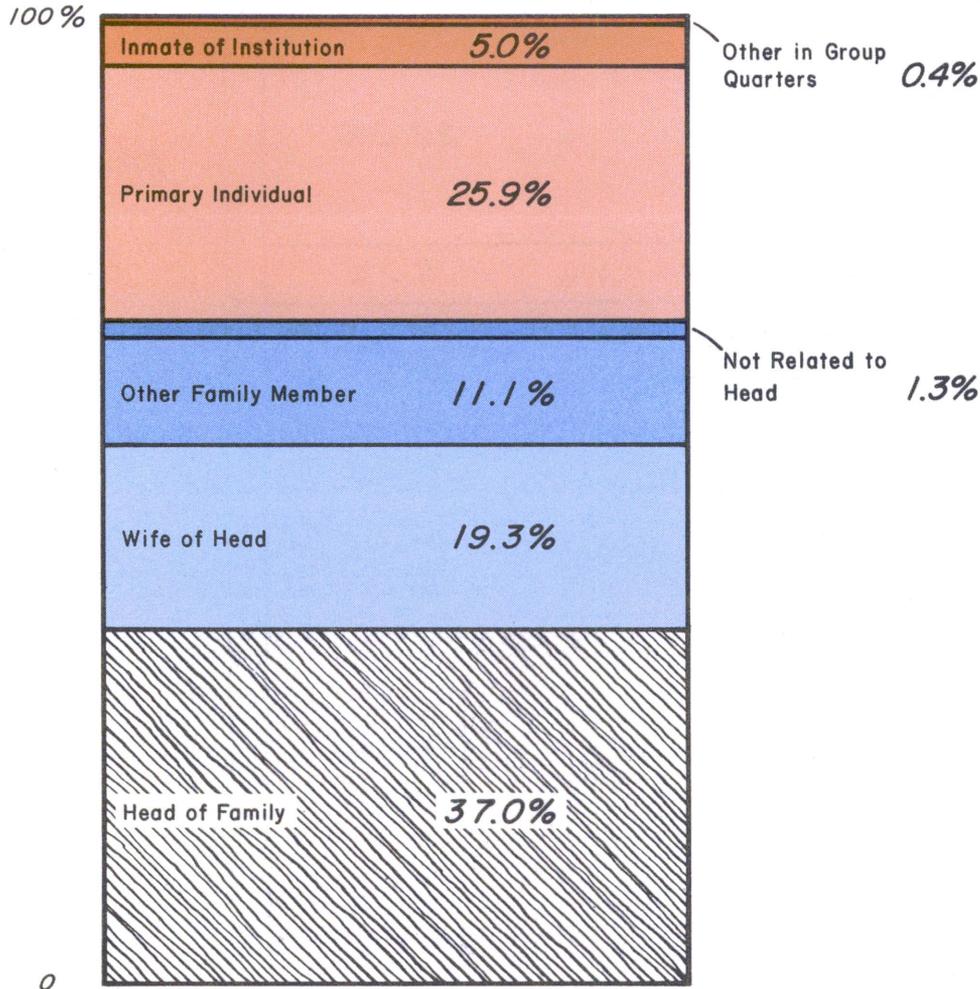
The majority of the people in this age group then, lived in urban areas where they tended to reside in the central city. Also, the portion who were institutionalized was very small while the majority lived with families.

TABLE 3: FAMILY CHARACTERISTICS OF POPULATION AGE 65 & OVER - URBAN & RURAL, 1970

	Total Over 65	Head of Family		Wife of Head	Other Family Member	Not Related To Head	Primary Individual		Inmate of Institution	Other In Group Quarters
		Male	Female				Male	Female		
Urbanized Areas	485,779	143,191	27,642	86,794	65,882	8,229	26,162	101,500	23,857	2,522
(Central Cities)	(417,832)	(121,899)	(24,648)	(73,873)	(55,212)	(7,163)	(23,417)	(89,098)	(20,201)	(2,321)
(Urban Fringe)	(67,947)	(21,292)	(2,994)	(12,921)	(10,670)	(1,066)	(2,745)	(12,402)	(3,656)	(201)
Other Urban Places of 10,000 or More	103,105	30,421	5,794	18,749	9,730	1,190	5,425	23,469	7,831	496
Other Urban Places of 2,500 to 10,000	<u>123,503</u>	<u>36,741</u>	<u>6,719</u>	<u>22,849</u>	<u>9,597</u>	<u>1,211</u>	<u>6,852</u>	<u>28,973</u>	<u>9,949</u>	<u>612</u>
TOTAL URBAN	712,387	210,353	40,155	128,392	85,209	10,630	38,439	153,942	41,637	3,630
Places of 1,000 to 2,500	59,173	18,211	2,958	11,527	4,150	522	3,306	13,975	4,281	243
Other Rural	<u>220,499</u>	<u>85,166</u>	<u>10,140</u>	<u>51,902</u>	<u>20,270</u>	<u>1,799</u>	<u>15,059</u>	<u>32,018</u>	<u>3,972</u>	<u>173</u>
TOTAL RURAL	279,672	103,377	13,098	63,429	24,420	2,321	18,365	45,993	8,253	416
TOTAL STATE	<u>992,059</u>	<u>313,730</u>	<u>53,253</u>	<u>191,821</u>	<u>109,629</u>	<u>12,951</u>	<u>56,804</u>	<u>199,935</u>	<u>49,890</u>	<u>4,046</u>
% Urban - Over 65	71.81									
% Rural - Over 65	28.19									

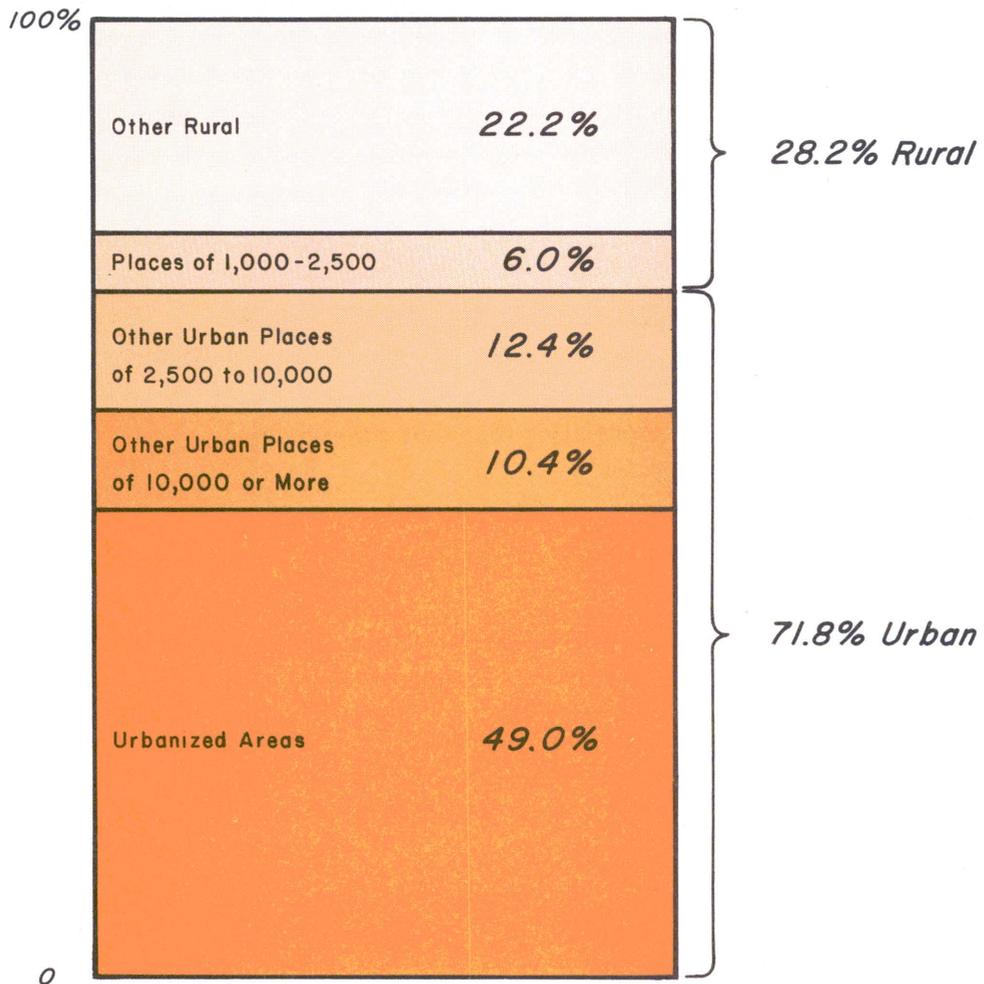
SOURCE: U.S. Bureau of Census

**FIGURE 8
FAMILY CHARACTERISTICS OF POPULATION
AGE 65 AND OVER
1970**



100%=992,059 persons age 65 and over in 1970

**FIGURE 9
CHARACTERISTICS OF POPULATION
AGE 65 AND OVER
URBAN AND RURAL - 1970**



100 % = 992,059 persons age 65 and over in 1970.

Persons 65 and Over Below Poverty Level - 1970

There were 2,046,593 people in Texas with income below poverty level in 1970. Of these people, 328,245 or about 16 percent were age 65 and over. This means that 33 percent of the 992,059 persons age 65 and over in 1970 had incomes below poverty level. The mean family income in Texas for 1970 was \$9,955 however, for those below poverty level the mean family income was \$2,086.

Persons 65 and Over Below Poverty Level by District - 1970

The data on persons 65 and over with income below poverty level for the year 1970 has been divided into the same three categories as before in this report. These three categories include the following Districts:

	1 9 7 0		
	<u>District</u>	<u>District Headquarters</u>	<u>Percent</u>
<u>Category A</u>	12	Houston	11.0
	18	Dallas	9.5
	15	San Antonio	7.5
Sub-Total			<u>28.0</u>
<u>Category B</u>	2	Fort Worth	6.4
	10	Tyler	5.4
	9	Waco	5.3
	21	Pharr	5.2
	1	Paris	4.5
	14	Austin	4.2
	20	Beaumont	4.1
	19	Atlanta	4.0
	17	Bryan	3.7
	13	Yoakum	3.6
	16	Corpus Christi	3.3
	11	Lufkin	3.2
Sub-Total			<u>52.9</u>
<u>Category C</u>	3	Wichita Falls	2.7
	4	Amarillo	2.7
	8	Abilene	2.5
	23	Brownwood	2.4
	24	El Paso	2.3
	4	Amarillo	1.9
	7	San Angelo	1.4

	6	Odessa	1.1
	25	Childress	1.1
	22	Del Rio	1.0
Sub-Total			<u>19.1</u>
TOTAL			<u>100.0%</u>

Note: 100% = 328,245 persons in the State age 65 and over with incomes below poverty level in 1970.

The three Districts in Category A accounted for 42.4 percent of the State's total population in 1970 and for 34.2 percent of the elderly population in the State. Persons 65 and over with incomes below poverty level numbered 91,878 in this Category or 28.0 percent of the total State. Of the 659,278 people in this Category with incomes below poverty level then, 13.9 percent were age 65 and over.

The 12 Districts in Category B had a total population of 4,376,709 or 39.1 percent of the total in the State while elderly population in the Category B Districts numbered 458,640 or 46.2 percent of the total in the State. The number of persons age 65 and over with incomes below poverty level in these Districts totalled 173,555 or 52.9 percent of the State total. Therefore, 17.8 percent of the 976,882 persons with incomes below poverty level in this Category were age 65 and over in 1970.

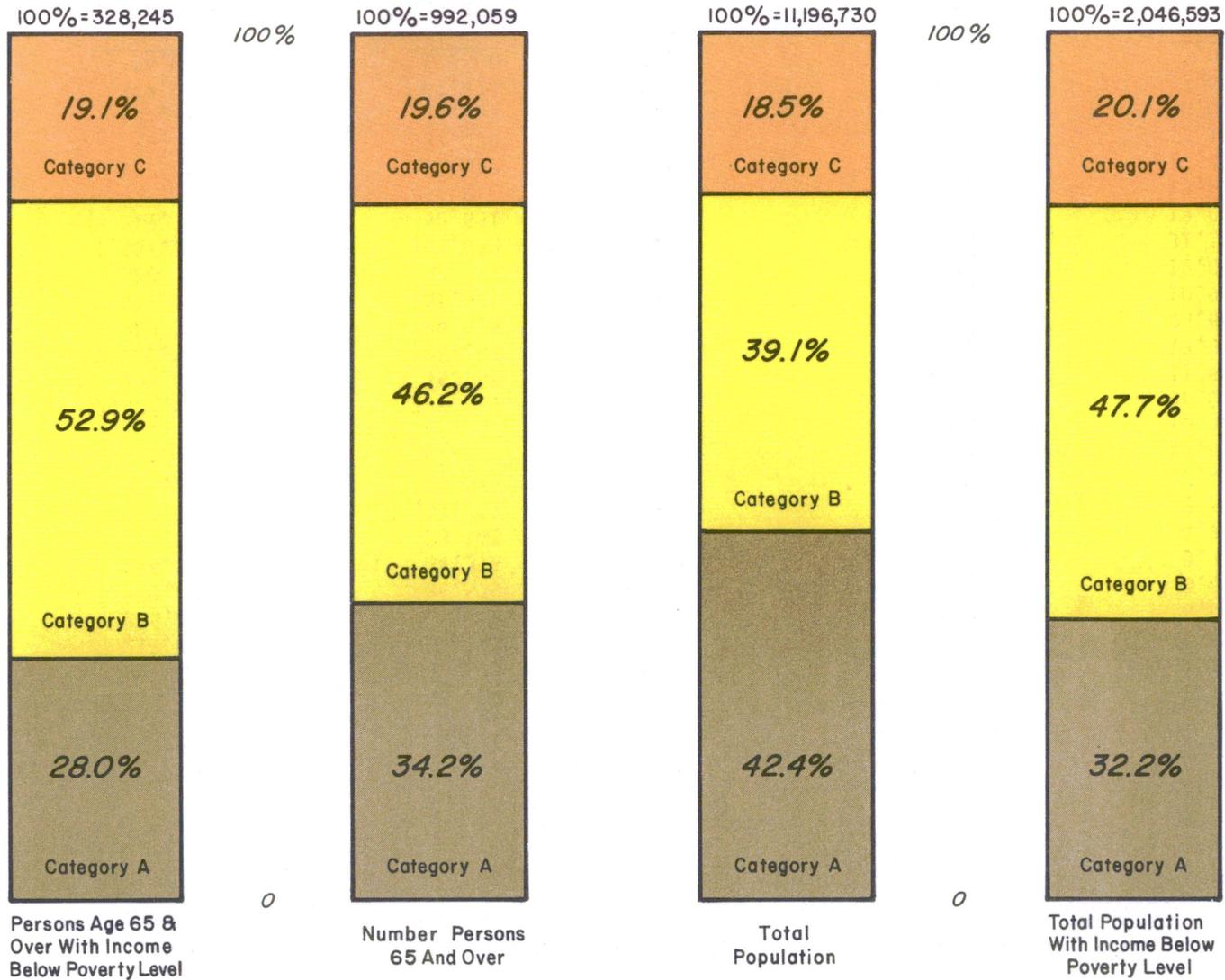
The ten Districts in Category C accounted for 18.5 percent of the total population in the State in 1970 and for 19.6 percent of the elderly population. Of the 410,433 persons in this Category with incomes below poverty level 15.3 percent were age 65 and over. Category C Districts accounted for 19.1 percent of the total number of persons age 65 and over in the State with incomes below poverty level in 1970.

TABLE 4: PERSONS 65 & OVER BELOW POVERTY LEVEL BY DISTRICT IN TEXAS - 1970

<u>Districts</u>	<u>District Population</u>	<u>Total Population With Income Below Poverty Level</u>		<u>No. Persons 65 & Over</u>	<u>Population 65 & Over With Income Below Poverty Level</u>	
		<u>Number</u>	<u>Percent</u>		<u>Number</u>	<u>Percent</u>
1	238,918	48,058	20.1	36,907	14,621	30.4
2	878,636	96,675	11.0	73,984	20,863	21.6
3	212,678	32,043	15.1	27,128	8,810	27.5
4	275,401	33,716	12.2	23,080	6,089	18.1
5	380,871	86,579	22.7	29,653	8,679	10.0
6	236,290	34,371	14.5	12,909	3,752	10.9
7	111,586	23,545	21.1	13,717	4,708	20.0
8	223,911	41,727	18.6	26,400	8,293	19.9
9	383,507	74,674	19.5	45,651	17,441	23.4
10	334,134	67,903	20.3	45,856	17,680	26.0
11	167,070	44,967	26.9	22,924	10,582	23.5
12	2,177,858	278,019	12.8	136,376	36,039	13.0
13	209,527	56,955	27.2	26,877	11,823	20.8
14	442,861	86,495	19.5	43,836	13,924	16.1
15	988,598	199,626	20.2	84,053	24,669	12.4
16	417,191	104,649	25.1	30,066	10,932	10.4
17	188,318	52,797	28.0	26,178	12,023	22.8
18	1,587,100	181,633	11.4	118,371	31,170	17.2
19	219,191	50,651	23.1	29,480	13,059	25.8
20	439,906	74,046	16.8	39,265	13,418	18.1
21	457,450	219,012	47.9	37,616	17,189	7.8
22	89,447	37,279	41.7	7,391	3,159	8.5
23	102,215	24,799	24.3	21,346	8,016	32.3
24	379,261	81,874	21.6	22,487	7,624	9.3
25	54,805	14,500	26.5	10,508	3,682	25.4
TOTALS	11,196,730	2,046,593	18.3	992,059	328,245	16.0

Source: U.S. Bureau of the Census

**FIGURE 10
PERSONS 65 AND OVER WITH INCOMES BELOW POVERTY LEVEL BY
DISTRICT IN TEXAS - 1970**



Category A - Those Districts with 7.0% or above of the State's population age 65 and over with incomes below poverty level.

Category B - Those Districts that fall in the middle range between 3.0 and 6.9% of the State's population age 65 and over with incomes below poverty level.

Category C - Those Districts with 2.9% or below of the State's population age 65 and over below poverty level.

Note: Category A includes Districts 8, 12 and 15.

Population 65 and Over - Standard Metropolitan Statistical Areas

Population in the 24 standard metropolitan statistical areas in the State totalled 8,234,458 in 1970, a 24 percent increase from 1960. Persons age 65 and over in the 24 SMSA's totalled 601,857 up 40 percent from 429,204 in 1960.

Fifty-eight percent of the 745,391 persons age 65 and over in the State lived in SMSA's in the year 1960 compared to 61 percent of 992,059 persons age 65 and over in 1970.

The Sherman-Denison SMSA had the largest percentage of persons age 65 and over at 13.2 percent of its population in 1970 compared to the Odessa SMSA where 4.7 percent of the population was in this age group; the lowest in the State. In 1960 the percent of people age 65 and over ranged from 2.4 percent in Odessa to 12.4 percent in Sherman-Denison.

TABLE 5: POPULATION 65 & OVER
STANDARD METROPOLITAN STATISTICAL AREAS
1960 & 1970

	1 9 7 0			1 9 6 0		
	S M S A POPULATION	% 65 & OVER	NO. 65 & OVER	S M S A POPULATION	% 65 & OVER	NO. 65 & OVER
Abilene	113,959	10.6	12,027	120,377	7.5	9,012
Amarillo	144,396	8.0	11,520	149,493	5.4	8,092
Austin	295,516	7.0	20,662	212,136	7.6	16,073
Beaumont-Port Arthur-Orange	315,943	8.0	25,263	306,016	5.8	17,667
Brownsville-Harlingen-San Benito	140,368	8.5	11,983	151,098	5.4	8,093
Bryan-College Station	57,978	7.7	4,452	44,895	7.1	3,202
Corpus Christi	284,832	6.4	18,327	266,594	4.8	12,686
Dallas	1,555,950	7.2	112,542	1,119,410	7.3	81,656
El Paso	359,291	5.7	20,636	314,070	4.5	14,232
Fort Worth	762,086	7.6	57,978	573,215	7.3	41,656
Galveston-Texas City	169,812	7.6	12,962	140,364	6.4	9,034
Houston	1,985,031	6.0	119,933	1,418,323	5.6	78,792
Laredo	72,859	8.0	5,799	64,791	6.5	4,188
Lubbock	179,295	6.3	11,322	156,271	5.0	7,837
McAllen-Pharr-Edinburg	181,535	7.8	14,193	180,904	5.5	10,038
Midland	65,433	5.2	3,404	67,717	2.8	1,897
Odessa	91,805	4.7	4,349	90,995	2.4	2,202
San Angelo	71,047	10.7	7,601	64,630	8.9	5,749
San Antonio	864,014	7.7	66,447	716,168	6.9	49,740
Sherman-Denison	83,225	13.2	10,997	73,043	12.4	9,093
Texarkana (Texas Portion)	67,813	11.5	7,781	59,971	10.3	6,187
Texarkana (Total SMSA)*	101,198	11.7	11,811	91,657	10.5	9,589
Tyler	97,096	11.1	10,801	86,350	8.9	7,707
Waco	147,553	12.4	18,237	150,091	9.8	14,755
Wichita Falls	127,621	9.9	12,641	129,638	7.4	9,616
TOTALS	8,234,458	7.3	601,857	6,656,560	6.4	429,204

* Not Included in Total

Source: U.S. Bureau of the Census

HANDICAPPED AND DISABLED IN TEXAS

As noted earlier the latest available census data on the number of handicapped and disabled is 1970 and the data includes only ages 16-64 and noninstitutionalized individuals. The 1973 figures of handicapped and disabled were provided to the State Department of Highways and Public Transportation by the Texas Rehabilitation Commission. From this data projections of the number of handicapped were made for 1975 and 1980.

The number of handicapped and disabled in Texas in 1970 was 631,482 and is projected to increase 17 percent to 741,346 by 1980. It is interesting to note that the total population in Texas is expected to increase 17 percent also in the same time period. In 1970 handicapped people accounted for 5.6 percent of the total State population and it is expected that this percentage will remain about the same until 1980 when it is expected to be 5.7 percent of the total population.

If the information received from the Texas Education Agency on the number of special education students in the State is added, the 1970 total handicapped is 647,007, or 5.8 percent of the population. By 1980 it is expected that the number of special education students will increase to 22,286 to make the total number of handicapped 763,632 or 5.8 percent of the total population.

Handicapped and Disabled by District

The number of handicapped and disabled by District have been divided into the same three categories as before and include the following:

	1 9 7 0			1 9 8 0		
	Dis- trict	District Head- quarters	Per- cent	Dis- trict	District Head- quarters	Per- cent
<u>Category A</u>	12	Houston	18.8	12	Houston	20.8
	18	Dallas	14.1	18	Dallas	14.7
	15	San Antonio	8.9	15	San Antonio	9.0
	2	Fort Worth	8.1	2	Fort Worth	7.7
Sub-Total			<u>49.9</u>			<u>52.2</u>
<u>Category B</u>	20	Beaumont	4.2	20	Beaumont	3.7
	9	Waco	3.8	9	Waco	3.3
	10	Tyler	3.5	10	Tyler	Cat. C
	14	Austin	3.4	14	Austin	4.3
	5	Lubbock	3.3	5	Lubbock	3.3
	21	Pharr	3.3	21	Pharr	4.0
	16	Corpus Christi	3.2	16	Corpus Christi	3.6
	24	El Paso	Cat. C	24	El Paso	3.7
Sub-Total			<u>24.7</u>			<u>25.9</u>

<u>Category C</u>	24	El Paso	2.8	24	El Paso	Cat. B
	1	Paris	2.7	1	Paris	1.8
	4	Amarillo	2.4	4	Amarillo	2.4
	19	Atlanta	2.3	19	Atlanta	1.7
	8	Abilene	2.1	8	Abilene	1.8
	3	Wichita Falls	2.0	3	Wichita Falls	1.7
	6	Odessa	2.0	6	Odessa	2.1
	17	Bryan	1.9	17	Bryan	1.6
	13	Yoakum	1.8	13	Yoakum	1.7
	11	Lufkin	1.8	11	Lufkin	1.4
	23	Brownwood	1.2	23	Brownwood	0.8
	7	San Angelo	1.0	7	San Angelo	0.9
	22	Del Rio	0.7	22	Del Rio	0.8
	25	Childress	0.7	25	Childress	0.4
	10	Tyler	Cat. B	10	Tyler	2.8
Sub-Total			<u>25.4</u>			<u>21.9</u>
TOTAL			<u>100.0%</u>			<u>100.0%</u>

Note: 1970 - 100% = 631,482 Handicapped and Disabled in the State.
1980 - 100% = 741,346 Handicapped and Disabled in the State.

Again Category B includes the range of 3.0 to 6.9 percent however, the highest percentage in this category in 1970 was 4.2 and is expected to be 4.3 in 1980.

Category A - District 2, 12, 15, and 18

The four Districts in Category A included approximately half of the total State population in 1970 with 5,632,192 people. The number of handicapped in these four Districts numbered 314,824 in 1970 or 49.9 percent of the total State handicapped. By 1980 the four-District total population is expected to be 6,983,743 or 53.3 percent of the State total while handicapped in the Districts will number 387,473 or 52.2 percent of the expected 1980 total. This is not surprising as these are the same Districts with the largest number of both elderly and handicapped.

District 12 had 118,785 of the State's handicapped in 1970 and is expected to increase 30.1 percent to 154,515 by 1980. Harris County with 96,165 handicapped individuals accounted for 81 percent of the handicapped in District 12 for 1970. By 1980 Harris County's population will include 123,335 handicapped persons or 79.9 percent of the District's total.

Of the seven counties in District 18, Dallas County accounted for 73,086 or 82.4 percent of the total handicapped in the District and is expected to have 83.2 percent of the total in 1980. The District is expected to gain 20,521 more handicapped by the year 1980 for a total of 109,268.

Bexar County which is one of the 12 counties in District 15 had 83.0 percent of the District's total handicapped in 1970. By the year 1980 Bexar County is expected to account for 84.6 percent of the projected 66,588 handicapped in the District.

District 2 accounted for 8.1 percent of the total handicapped in the State in 1970. Tarrant County numbered 40,924 or 80.5 percent of the District's total handicapped in 1970 and is expected to have about 82.9 percent of the 1980 total.

Category B - Districts 5, 9, 10 (1970 Only), 14, 16, 20, 21, and
24 (1980 Only).

The seven Districts in Category B totalled 2,855,920 or 25.5 percent of the 1970 Texas population. Handicapped in these seven Districts numbered 156,185 or 24.7 percent of the State's handicapped population. The 1980 total population of the seven Districts found in Category B is expected to be 3,288,973 or approximately 25 percent of the 1980 State population. Handicapped in these seven Districts are expected to number 191,663 or 25.9 percent of the projected 1980 handicapped population.

District 20 accounted for 4.2 of the 1970 total handicapped in the State. Of the eight counties in this District, Jefferson accounted for 47.8 percent of the District's total handicapped population of 26,325. By 1980 Jefferson is expected to have 14,412 handicapped persons or 53.0 percent of the expected number in the District.

District 9 accounted for 3.8 percent of the 1970 total handicapped in the State and is expected to account for about 3.3 percent of the total by 1980. Of the eight counties in District 9, Bell and McLennan accounted for 68.5 percent of the handicapped in 1970. McLennan's population included 9,361 handicapped persons or approximately 39 percent of the District total while Bell accounted for 29.4 percent. McLennan is expected to decrease by 452 handicapped individuals to 8,909 by the year 1980 or 36.3 percent of the District handicapped. However, Bell County is expected to gain 1,828 more handicapped for a total of 8,860 or about 36 percent of the 1980 expected total. This would mean that these two counties are expected to account for 72.4 percent of the handicapped in the District by 1980.

District 10 accounted for 3.5 percent of the State's handicapped in 1970 but is expected to decrease its number of handicapped by 1,555 by 1980. Of the 22,413 handicapped in the District in 1970, Gregg and Smith Counties accounted for 44.5 percent of that total. By the year 1980 it is expected that these two counties will account for 52.4 percent of the expected 20,858 handicapped in the District. Thirty percent of the 1980 total will be found in Smith County.

There were 21,196 handicapped individuals in District 14 in 1970. It is expected that the District will gain 10,360 more handicapped by 1980 to total 31,556, this is an expected 48.9 percent increase from 1970. Travis County with 12,790 handicapped persons in 1970 accounted for 60.3 percent of the District total. The county is expected to increase its handicapped population 71 percent by 1980 for a total of 21,685 or 69.3 percent of the District total. Travis County total population is expected to increase 21.3 percent by 1980 to 358,450 persons.

Of the 17 counties in District 5, Lubbock County accounted for 40.8 percent of the total District handicapped in 1970. By the year 1980 it is expected that Lubbock County will account for 50.3 percent of the total. The District is expected to gain 3,969 more handicapped individuals by 1980 for a 19 percent

increase. Lubbock County is expected to increase 46.6 percent in handicapped population to 12,478 by the same year. Lubbock County is projected to increase 22.1 percent to 218,921 total population by 1980.

District 21 which accounted for 3.3 percent of the State's total handicapped in 1970 is expected to increase its handicapped population 40.1 percent by 1980. Therefore, in 1980 District 21 is expected to account for 4.0 percent of the State's handicapped. Out of the ten counties in the District two counties; Cameron and Hidalgo accounted for 67.5 percent of the District's handicapped in 1970 and they are expected to account for 76.6 percent by 1980. Hidalgo County is projected to increase 69.7 percent by 1980 in its handicapped population for a 1980 total of 12,766 while Cameron County is expected to increase 47.2 percent for a 1980 total of 9,810. The total District is expected to have 29,462 handicapped persons by the year 1980.

Nueces County accounted for 56.3 percent of District 16's total handicapped in 1970 and is expected to account for 58.6 percent of the total by 1980. Nueces County is one of ten counties in the District. The total District handicapped population is expected to increase 31.4 percent to 26,876 individuals by 1980.

In 1970 District 24 accounted for only 2.8 percent of the State total handicapped but it is expected to increase its handicapped population 53.8 percent to 27,236 persons by 1980. It is expected to account for approximately 3.7 percent of the 1980 State handicapped population. El Paso County included 16,979 handicapped persons in 1970 or 95.9 percent of the District total. By 1980 El Paso County is projected to increase its number of handicapped by 53 percent for a total of 25,997 or 95.5 percent of the 1980 District total. El Paso County is one of six counties in District 24.

Category C - Districts 1, 3, 4, 6, 7, 10 (1980 Only), 11, 13, 17, 19, 22, 23, 24 (1970 Only), and 25.

The total population in the 14 Districts in Category C in 1970 was 2,708,618 or 24.2 percent of the State population. Handicapped and disabled in these 14 Districts accounted for 25.4 percent of the 631,482 handicapped in Texas in 1970. In 1980 total population in the Category C Districts is expected to be 2,836,879 or 21.6 percent of the total. It is expected that 21.9 percent of the 741,346 handicapped and disabled in 1980 will be found in the Category C Districts.

In 1970 District 25 accounted for 0.7 percent of the total handicapped in the State and by 1980 it is expected to account for about 0.4 percent of the total handicapped; the lowest in the State. The District is expected to reduce its number of handicapped by 1,608 for a 1980 total of 2,740 handicapped persons.

District 22 is expected to increase its total number of handicapped 38.9 percent to 5,557 persons by 1980. Maverick County which had 586 handicapped individuals in 1970 is expected to gain 776 more by 1980 for a total of 1,362; an expected 132 percent increase. However, Real County which had 315 handicapped in 1970 is expected to reduce that number by 185 for a 1980 total of 130 persons.

Val Verde County is expected to increase its handicapped population 79.8 percent to 1,827 persons by 1980.

District 23 is expected to reduce its number of handicapped persons by 1,550 for a total of 5,710 by the year 1980. District 1 is expected to decrease its number of handicapped by 3,400 persons by 1980 for an expected total of 13,554.

Randall County which is one of 17 counties in District 4 is expected to increase 140 percent in handicapped population to 4,404 persons by 1980. The total District 4 handicapped is expected to increase 16 percent to 17,635 by 1980.

Handicapped and Disabled - Standard Metropolitan Statistical Areas - 1970

Seventy-one percent of the 631,482 handicapped and disabled in the State lived in standard metropolitan statistical areas in 1970. Of these 446,765 handicapped and disabled living in SMSA's; 232,640 or 52 percent were in the labor force in 1970. Of the 214,125 handicapped and disabled not in the labor force, 148,924 could not work or approximately 33 percent of all handicapped and disabled living in the SMSA's.

The population of all 24 standard metropolitan statistical areas totalled 8,234,458 in 1970. The handicapped and disabled accounted for 5.4 percent of this total. The Texarkana SMSA had the largest percentage of handicapped and disabled of all SMSA's in 1970. Handicapped and Disabled accounted for 7.3 percent of the total Texarkana SMSA population in 1970 while the Texas portion of the SMSA had 7.1 percent. Sherman-Denison was a little lower than this with 6.9 percent of its population handicapped and disabled and Waco had 6.3 percent. Bryan-College Station and McAllen-Pharr-Edinburg SMSA's had the lowest percentage handicapped and disabled at four percent each.

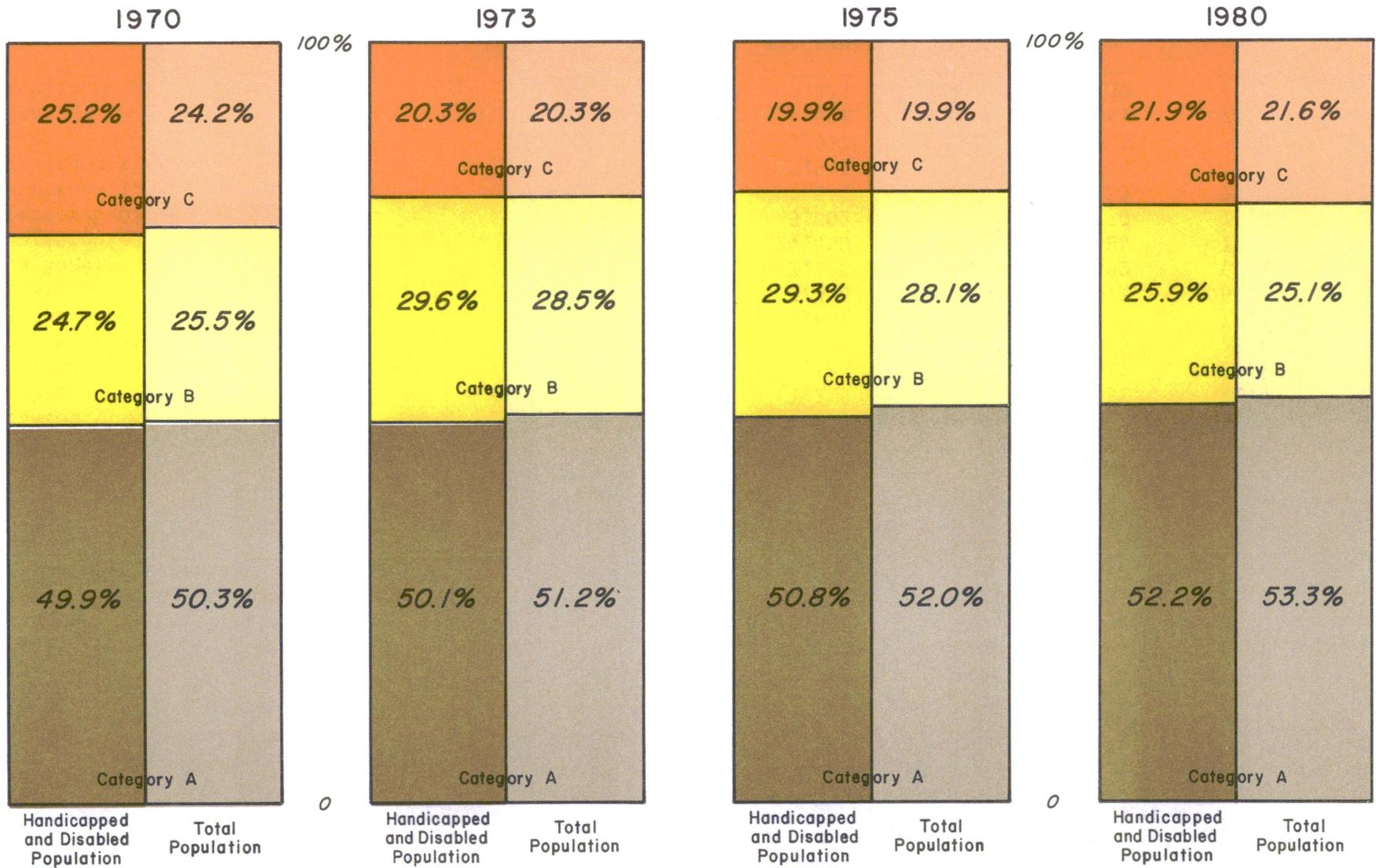
TABLE 6: HANDICAPPED AND DISABLED POPULATION BY DISTRICT*--1970-1980

Districts	1 9 7 0			1 9 7 3			1 9 7 5			1 9 8 0		
	District Population	Number Handicapped & Disabled	% of State Total H&D	District Population	Number Handicapped & Disabled	% of State Total H&D	District Population	Number Handicapped & Disabled	% of State Total H&D	District Population	Number Handicapped & Disabled	% of State Total H&D
1	238,918	16,954	2.7	239,967	13,378	2.0	241,012	13,457	2.0	243,103	13,554	1.8
2	878,636	50,838	8.0	926,038	49,545	7.4	973,256	52,071	7.5	1,067,874	57,102	7.7
3	212,678	12,592	2.0	214,825	12,120	1.8	216,970	12,290	1.8	221,259	12,519	1.7
4	275,401	15,170	2.4	287,476	15,747	2.4	299,542	16,337	2.4	323,679	17,635	2.4
5	380,871	20,837	3.3	396,323	22,216	3.3	411,765	23,076	3.3	442,649	24,806	3.3
6	236,290	12,867	2.0	251,620	13,366	2.0	266,943	14,127	2.0	297,593	15,742	2.1
7	111,586	6,492	1.0	112,356	6,423	1.0	113,119	6,469	0.9	114,650	6,554	0.9
8	223,911	13,267	2.1	225,784	13,037	2.0	227,653	13,184	1.9	231,389	13,400	1.8
9	383,507	23,918	3.8	386,794	23,873	3.6	390,077	24,131	3.5	396,284	24,542	3.3
10	334,134	22,413	3.5	335,859	20,269	3.0	339,582	20,546	3.0	345,025	20,858	2.8
11	167,070	11,369	1.8	168,724	10,236	1.5	170,372	10,353	1.5	173,669	10,556	1.4
12	2,177,858	118,785	18.8	2,323,975	130,949	19.7	2,470,538	138,191	20.1	2,763,214	154,515	20.8
13	209,527	11,597	1.8	212,866	11,873	1.8	216,200	12,071	1.8	222,870	12,422	1.7
14	442,861	21,196	3.4	459,122	28,689	4.3	475,379	29,564	4.3	507,894	31,556	4.3
15	988,598	56,454	8.9	1,026,792	60,009	9.0	1,064,981	62,149	9.0	1,141,355	66,588	9.0
16	417,191	20,460	3.2	431,019	24,550	3.7	444,841	25,296	3.7	472,487	26,876	3.6
17	188,318	11,693	1.9	189,674	11,504	1.7	191,022	11,549	1.7	193,719	11,723	1.6
18	1,587,100	88,747	14.1	1,693,151	92,806	14.0	1,799,202	97,833	14.2	2,011,300	109,268	14.7
19	219,191	14,896	2.4	220,719	12,671	1.9	222,243	12,717	1.8	225,289	12,889	1.7
20	439,906	26,325	4.2	452,377	25,239	3.8	464,843	25,805	3.7	489,774	27,185	3.7
21	457,450	21,036	3.3	461,451	28,987	4.4	465,447	29,100	4.2	510,274	29,462	4.0
22	89,447	4,254	0.7	92,438	5,380	0.8	95,424	5,557	0.8	101,397	5,908	0.8
23	102,215	7,260	1.2	100,314	6,052	0.9	98,411	5,936	0.9	94,605	5,710	0.8
24	379,261	17,714	2.8	401,850	23,259	3.5	424,437	24,618	3.6	469,611	27,236	3.7
25	54,805	4,348	0.7	53,266	3,005	0.5	51,722	2,918	0.4	48,632	2,740	0.4
TOTALS	11,196,730	631,482	100.0	11,664,780	665,183	100.0	12,134,981	689,345	100.0	13,109,595	741,346	100.0

* Non-Institutionalized — Ages 16-64

Sources: U.S. Bureau of the Census, Texas Rehabilitation Commission, Office of the Gover - Division of Planning Coordination

**FIGURE 11
HANDICAPPED AND DISABLED IN TEXAS
COMPARISON TO CATEGORY TOTAL POPULATION**



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Category A includes: Districts with 7.0% or above handicapped and disabled population to State total handicapped and disabled.

Category B includes: Districts with a range of 3.0% to 6.9% handicapped and disabled population to State total handicapped and disabled.

Category C includes: Districts with 2.9% or below handicapped and disabled to State total handicapped and disabled.

Note: Category A includes Districts 2, 12, 15, and 18

TABLE 7: DISABILITY OF PERSONS 16 TO 64 YEARS*, 1970

STANDARD METROPOLITAN STATISTICAL AREAS

<u>Standard SMSA</u>	<u>Disabled* Or Handicapped</u>	<u>% In Labor Force</u>	<u>In Labor Force</u>	<u>% Not In Labor Force</u>	<u>Not In Labor Force</u>	<u>% Not In Labor Force Who Cannot Work</u>	<u>Cannot Work</u>
Abilene	6,172	49.5	3,054	50.5	3,118	69.5	2,167
Amarillo	8,145	48.7	3,969	51.3	4,176	73.8	3,081
Austin	12,790	57.6	7,372	42.4	5,418	67.1	3,637
Beaumont-Port Arthur-Orange	17,214	45.6	7,857	54.4	9,357	66.9	6,260
Brownsville-Harlingen-San Benito	6,663	44.3	2,955	55.7	3,708	70.2	2,604
Bryan-College Station	2,356	53.8	1,268	46.2	1,088	66.3	721
Corpus Christi	14,164	49.7	7,039	50.3	7,125	70.9	5,050
Dallas	86,715	57.3	49,661	42.7	37,054	70.2	26,006
El Paso	16,979	48.0	8,142	52.0	8,837	67.0	5,923
Fort Worth	43,589	54.7	23,847	45.3	19,742	67.7	13,375
Galveston-Texas City	9,449	46.0	4,349	54.0	5,100	66.9	3,412
Houston	109,599	53.1	58,200	46.9	51,399	67.5	34,709
Laredo	3,266	37.2	1,215	62.8	2,051	72.9	1,496
Lubbock	8,510	49.2	4,191	50.8	4,319	63.2	2,730
McAllen-Pharr-Edinburg	7,524	38.5	2,899	61.5	4,625	78.4	3,624
Midland	3,267	51.6	1,687	48.4	1,580	78.2	1,236
Odessa	5,281	43.7	2,310	56.3	2,971	68.9	2,046
San Angelo	4,068	53.5	2,176	46.5	1,892	64.2	1,215
San Antonio	48,984	49.8	24,400	50.2	24,584	72.5	17,823
Sherman-Denison	5,772	52.0	3,002	48.0	2,770	73.0	2,022
Texarkana (Texas Portion)	4,830	54.8	2,645	45.2	2,185	78.2	1,709
**Texarkana (Total)	7,456		3,941		3,515		2,784
Tyler	5,662	46.4	2,627	53.6	3,035	71.4	2,166
Waco	9,362	48.1	4,501	51.9	4,861	73.4	3,566
Wichita Falls	6,404	51.1	3,274	48.9	3,130	75.3	2,356
Totals	446,765	52.1	232,640	47.9	214,125	69.6	148,934

* Excludes Inmates of Insitutions

**Not Included in Total

SOURCE: U.S. Bureau of the Census

HANDICAPPED CHILDREN — AGES 3-15

In the State of Texas children with different handicapping conditions are provided special education services by the Texas Education Agency. All of these children are also provided transportation to and from their schools. This transportation may be in school buses, vans or through funding provided to the parent to transport the children themselves.

The Texas Education Agency has the following ten handicapping conditions to enable the children to be placed in classes according to the severity of their handicap.

- VH - Visually Handicapped
- OH/OHI - Orthopedically Handicapped and Other Health Impaired
- MBI - Minimal Brain Injury
- AH - Auditorally Handicapped
- EMR - Emotionally Mentally Retarded
- TMR - Trainably Mentally Retarded
- SH - Speech Handicapped
- LLD - Language and/or Learning Disability
- PS - Pregnant Student
- ED - Emotionally Disturbed

As noted, all of these children receiving special education services are provided transportation. However, for the purposes of this study only the first three categories (VH, OH/OHI, MBI) are considered as handicaps severe enough to warrant specialized transit. The reason for this decision is that when these children reach adult ages, it will be possible for example, for the auditorally handicapped or speech handicapped to ride regular public transportation or to operate their own private automobile.

There were 133,768 students in the State receiving special education services during the school year 1970-71. Of these 133,768 students 15,525 were included in the first three handicapping conditions (VH, OH/OHI & MBI) or 11.6 percent of the total. By the school year 1973-74 there were 235,318 students in the State receiving special education services, a 75.9 percent rise from 1970. The VH, OH/OHI, and MBI students increased by 32.9 percent from 15,525 in 1970-71 to 20,627 in 1973-74.

The data on number of students for school year 1973-74 were divided into Districts. District 12 had the highest number of students in these three categories at 6,779 or 32.8 percent of the total; District 18 accounted for 12.7 percent of the total; District 2 accounted for 11.8 percent; and District 15 accounted for 10.0 percent of the total 20,627 students in 1973-74. District 25 had the lowest number of students at 77 or 0.3 percent of the State total.

It is expected that by 1980 the number of students in the VH, OH/OHI and MBI categories will be 22,286 for a total handicapped and disabled in the State of 763,632 or 5.8 percent of the total population. This would be a 43.5 percent increase in the total number of students in these three categories from 1970.

TABLE 8: STUDENTS RECEIVING SPECIAL EDUCATION

SERVICES IN TEXAS BY DISTRICT

VH,OH/OHI & MBI Handicapping Conditions
Ages 3-15 -- School Year 1973-74

<u>District</u>	<u>Number of Students</u>	<u>% of State Total</u>
1	210	1.0
2	2,441	11.8
3	196	0.9
4	432	2.1
5	267	1.3
6	262	1.2
7	80	0.4
8	470	2.2
9	345	1.6
10	247	1.9
11	113	0.5
12	6,779	32.8
13	301	1.4
14	940	4.5
15	2,070	10.0
16	487	2.3
17	119	0.6
18	2,618	12.7
19	163	0.8
20	1,288	6.2
21	258	1.2
22	17	0.1
23	59	0.3
24	388	1.9
25	77	0.3
TOTAL	20,627	100.0

Source: Texas Education Agency

TABLE 9: STUDENTS RECEIVING SPECIAL EDUCATION
SERVICES IN TEXAS - - AGES 3-15

	<u>Sch. Year</u> <u>1970-1971</u>	<u>Sch. Year</u> <u>1971-1972</u>	<u>Sch. Year</u> <u>1972-1973</u>	<u>Sch. Year</u> <u>1973-1974</u>
VH, OH/OHI & MBI Students	15,525	19,171	21,845	20,627
All Other Handicapping Conditions	118,243	152,869	180,259	214,707
Total Handicapping Conditions	133,768	172,040	202,104	235,318
% Considered Transporta- tion Handicapped	11.6	11.1	10.8	8.8

Source: Texas Education Agency

TABLE 10: HANDICAPPED AND DISABLED POPULATION IN TEXAS

	<u>Total Texas Population</u>	<u># H & D Ages 16-64</u>	<u>#VH, OH/OHI & MBI Students Ages 3-15</u>	<u>Total H&D</u>	<u>% H & D of Total Population</u>
1970	11,196,730	631,482	15,525*	647,007	5.8
1973	11,664,780	665,183	20,627*	685,794	5.9
1975+	12,134,981	689,345	20,629	709,974	5.9
1980+	13,109,595	741,346	22,286	763,632	5.8

Sources: U. S. Bureau of the Census
 Texas Education Agency
 Texas Rehabilitation Commission
 State Department of Highways and Public Transportation

* School Years 1970-1971 & 1973-1974 were used

+ Estimates

REVIEW OF FEDERAL AND STATE FUNDING SOURCES

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REVIEW OF FEDERAL AND STATE FUNDING SOURCES

FEDERAL:

Urban Mass Transportation Administration (UMTA) Programs:

SECTION 16: Planning and Design of Mass Transportation Facilities to Meet Special Needs of the Elderly and Handicapped

This section of the Urban Mass Transportation Act of 1964, as amended, declares as national policy that elderly and handicapped persons have the same right as other persons to utilize mass transportation facilities and services. This must be transportation that they can effectively utilize and all Federal programs offering assistance in the field of mass transportation should contain provisions implementing this national policy.

Section 16b authorizes the Secretary to set aside two percent of the \$10.9 billion of the 1974 funding of \$11.8 billion for the UMTA programs to finance the programs and activities authorized by Section 16.

Section 16b(1)

This Section of the law authorizes the Secretary to make grants and loans to States and local public bodies and agencies to assist them in providing mass transportation services which are planned, designed, and carried out so as to meet the special needs of elderly and handicapped persons. These grants would be subject to all of the terms, conditions, requirements, and provisions as grants and loans made under Section 3 (a). Section 3 and Section 5 of the Act provides grants to assist cities in financing capital improvements on an 80 percent federal 20 percent local matching ratio.

Section 3 monies are not allocated or apportioned to States or cities but are available on a discretionary basis whereas Section 5 monies are allocated. Texas Public Transportation Fund (PTF) monies may be used to match local and federal funds for a project under Section 3. The PTF will match up to 65 percent of the local 20 percent share (up to 13 percent of the total project cost of capital assistance grants). The State Department of Highways and Public Transportation will review all applications requesting State funding participation.

Section 16b(2)

This section of the Act provides grants exclusively to provide for the transportation needs of the elderly and handicapped. Only private non-profit organizations are eligible to apply for these funds for capital expenditures only. Project funds in the amount of 80 percent are provided with the other

20 percent to be furnished by the applicant from non-federal sources. Private non-profit organizations applying for capital assistance must provide service within a recognized "urban area" (a municipality having a population of not less than 5,000 persons according to the 1970 Census). This does not preclude operation in a rural area as long as the origin and/or destination of the service is in an urban area.

A total of \$932,000 was allocated to Texas for this program in FY75 and the Texas PTF monies are not available for participation in Section 16b(2) projects.

The State Department of Highways and Public Transportation has been designated by the Governor as the managing and contracting agency for this program with technical assistance provided by the Governor's Committee on Aging.

Section 16c

Section 16c authorizes the Secretary to set aside one and a half (1-1/2) percent of the Section 6 funding to be used for increasing the information and technology which is available to provide improved transportation facilities and services planned and designed to meet the special needs of elderly and handicapped.

Section 6 of the Act provides for research, development, and demonstration projects in all phases of urban mass transportation including the development, testing, and demonstration of new facilities, equipment, techniques, and methods to improve public transportation. The Secretary approves grants under this section on a project by project basis. Anticipated nationwide funding for Section 6 for FY76 is \$67.3 million.

Section 147 of the Federal-Aid Highway Act

Section 147 is a demonstration grant program which provides funds to encourage the development, improvement, and use of public transportation systems within rural areas, in order to enhance access of rural population to employment, health care, retail centers, education and public services. Projects are funded 100 percent by the Federal Highway Administration. No more than 30 percent of project funding may be used for operating expenses.

The original appropriation was \$30 million for FY75 and FY76. However, Federal Aid Highway 1974 Amendments increased this amount to \$75 million for FY75 and FY76. Authorized amounts are \$15 million for FY75 and \$60 million for FY76. Congress had already made an appropriation of \$9.65 million for FY75 and did not increase this amount.

Guidelines and criteria for selection of projects were issued by the Federal Highway Administration and the Urban Mass Transportation Administration. Developed systems are to serve passengers within rural and small urban areas from below 5,000 to 50,000 population and between larger areas of 50,000 and above population. The State Department of Highways and Public Transportation reviews and comments on all applications and then the regional office of the FHWA reviews and comments on all applications. The final selection of projects to be funded from available appropriations are made at the Washington Office of the Department of Transportation.

One criterion by which applications will be evaluated is that consideration be given to the transportation needs of the elderly and handicapped in the planning and implementation of demonstration programs under this legislation. Of the vehicles purchased under this program, at least one must be equipped with wheelchair capabilities.

STATE:

State Department of Highways and Public Transportation (SDHPT) Programs:

Texas Public Transportation Fund (PTF)

The Texas PTF was established by Senate Bill No. 762 which was signed into law June 20, 1975, by the Governor. This Bill appropriates \$1,000,000 for the remainder of FY75 and \$15,000,000 for FY76 and another \$15,000,000 for FY77.

The PTF may be used to match local governmental and federal funds for projects under federally-assisted programs. The PTF will match up to 65 percent of the local 20 percent share (up to 13 percent of the total project cost of capital assistance projects).

The PTF is divided into two programs: a formula program (60 percent of the total funds) and a discretionary program (40 percent of the total funds). S.B. No. 762 also authorizes the use of the discretionary fund for a proposed public transportation project where no federal funds are available if the Commission finds that the project is vitally important to the development of public transportation in this State. Funding would be on a 50-50 State and local match.

Governor's Committee On Aging (GCA) Programs:

The Governor's Committee On Aging administers federal funds authorized under the Older Americans Act. Federal legislation mandates that services be comprehensive, taking all the needs of individuals into consideration, and that at least 55 percent of the older population be served through sub-state or area levels.

Programs of the Governor's Committee On Aging are administered through 14 Area Agencies on Aging (AAA), the primary agencies encompassing 75 percent of the State's elderly population, and 12 Regional Offices on Aging.

The overall objective of Title III of the Older Americans Act is to develop or expand a system of comprehensive and coordinated services for older persons - services which meet major needs such as nutrition, transportation, and social and recreational activities which enable them to continue to live in their own homes as long as possible. The AAA's develop a plan for comprehensive and coordinated service delivery systems. In order to accomplish this plan, each AAA first surveys the community to assess the needs of older persons in terms of existing resources. Then each AAA develops, processes and administers grants for supportive and linkage services in keeping with the priority of needs in the area. Highest priority is given to information and referral services. Other high priority linkage services include outreach, escort and transportation to enable older persons to take advantage of available resources. The Regional Offices on Aging also assess needs and coordinate services. Funds are limited, therefore, only those services which have a high priority in the region are likely to be implemented. Services they may fund include transportation, home-health, activity centers, outreach and escort services.

One example of a GCA program with a transportation element is the Title VII Nutrition Program. This program represented a new concept from the Meals-On-Wheels program, in which all meals are delivered. In this program, the meal was not an end in itself, but rather a means to get older people involved more in life. In June of 1973, Texas received \$4.7 million in federal funds for the development of these nutrition programs for the elderly. Nutrition programs in the different areas and regions located centers such as churches, schools, community centers, senior citizen centers, and other public or private facilities to service as congregate meal sites, and as the site where other social and rehabilitation services could be provided. Then outreach services were used to locate those persons most in need and transportation and escort services were provided to assist them in getting to these meal sites.

A transportation program which is a joint effort between the GCA and the Texas Farmers Union is a Rural Transportation Program designed to provide a regularly scheduled, coordinated system of transportation for older retired persons in 18 rural Texas Counties. In this program, vans and drivers are provided to transport older persons who lack access to service centers in their counties. The 18 counties participating in the program are: Briscoe, Terry, Dickens, Fayette, Falls, Hale, Floyd, Leon, Navarro, Mills, Lamb, Hockley, Bell, Milam, Crosby, Garza, Williamson, and Lampasas. All these counties have the following characteristics:

- (1) They have a county seat with at least a minimum of social services available.
- (2) There are many small towns in the county some distance from service centers.
- (3) None have an operating transportation program.
- (4) All have a high percentage of retired persons.

Texas Department of Community Affairs

Human Services Delivery Division (HSDS) Programs

The Human Services Delivery Division of the Texas Department of Community Affairs was funded \$1.5 million for FY75 and \$750,000 for FY76 by the State. This money is distributed on a formula basis to the Governor's 24 Planning Regions. The money is transmitted to a Contractor within each Region usually a Community Action Program Agency but could be a Council of Government or a City.

The Contractor of each Region then confers with people in their Region such as local elected officials and Councils of Governments to determine needs of the area and where this funding could be most effectively utilized.

The following list of Contractors and Subcontractors provide transportation services directly out of Human Services Delivery Division funds:

Community Action Corporation of Wichita
Falls and North Texas

Northeast Texas Opportunities, Inc.

Laredo-Webb County Community Action Agency

Travis County

Big Bend Community Action Committee, Inc.

The following HSDS Contractors and Subcontractors used HSDS funds as the 20 percent match for 16b(2) Urban Mass Transportation Funds:

Brazos Valley Community Action Program

South Plains Community Action Agency

West Texas Opportunities, Inc.

Capital Area Human Services, Inc.

Community Action of Nacogdoches, Inc.

Tri-County Community Action Center

City of Victoria Department of Community Affairs

Community Council of Southwest Texas

Lamar County Human Resources Council, Inc.

Community Action Corporation of South Texas

Community Council of South Central Texas, Inc.

Texas Rehabilitation Commission (TRC) Programs:

The TRC may provide transportation, including the subsidy of a transportation system, for groups of handicapped clients to assist them in their rehabilitation programs. It must be determined, however, that this transportation service will contribute substantially and continuously to their rehabilitation needs and that it would service a group rather than just one client. Also, the service would need to have the approval of the appropriate Regional Director who must secure budgetary approval from the Budget Office prior to initiating this group service.

Transportation is provided to individual clients from their places of residence to the places where services are rendered, provided transportation is not otherwise available. Payment for the transportation by public carrier is on an actual cost basis. If the client is transported by private carrier, the negotiated fee is not to exceed 16¢ a mile. Counselors may transport clients but as a general policy, it is not advised. Counselors may transport them if the trip coincides with the Counselor's travel in the regular performance of his duties. However, travel must not be undertaken for the sole purpose of transporting a client except in an emergency situation. TRC employees are not to accept reimbursement for transportation from a client if he uses his own vehicle.

Department of Public Welfare (DPW) Programs:

Texas Title XIX Medical Assistance Plan

The United States District Court decided March 6, 1975, that the State Department of Welfare should have in operation a State plan for providing medical transportation to all Medicaid recipients no later than September 1, 1975. Medicaid recipients include the S.S.I. (Supplemental Security Income) clients who account for a little over half of the D.P.W.'s total clients and the A.F.D.C. (Aid to Families with Dependent Children) clients. The S.S.I. clients are people who are 65 or older or blind or disabled, and who have little or no income and limited resources. This order was the result of the class action suit: Benjamin Edward Smith, et al vs. Raymond W. Vowell, et al. The specific regulation which formed the focal point of the suit is codified at 45 C.F.R. 249.10(a)(5) which provides:

"A state plan for medical assistance under Title XIX of the Social Security Act must:

(5) . . . Effective July 1, 1970 specify that there will be provision for assuring necessary transportation of recipients to and from providers of services and describe the methods that will be used."

As a result, beginning in September, 1975, DPW will provide transportation limited to medical services to Medicaid recipients statewide.

For purposes of serving their clients, DPW works with ten regional offices. These ten regions were given the primary responsibility for planning this medical transportation program. However, a guideline given the regions was that DPW would prefer to contract the transportation out to others and try to tie into as many existing systems as they could.

An example of how the regions are planning this program is the Austin DPW Region which is composed of the following four regional planning areas:

Heart of Texas Council of Governments

Central Texas Council of Governments

Brazos Valley Development Council

Capital Area Planning Council

The cities of Austin and Waco are planning to contract with the bus companies to provide this service but in the outer area of the region, DPW's prime contracts will be the COG's who will in turn subcontract with various

other organizations. CAPCO for example, will subcontract with the Capital Area Human Services, Inc., in San Marcos.

Other guidelines DPW have given the regions in planning their programs are the following:

- (1) They must serve clients going to hospitals, doctors offices, and labs for service.
- (2) They may elect not to serve clients for other medical purposes such as visits to dentists or pharmacies.
- (3) They may limit their service. For instance in rural areas, service may be provided only one or two days a week.

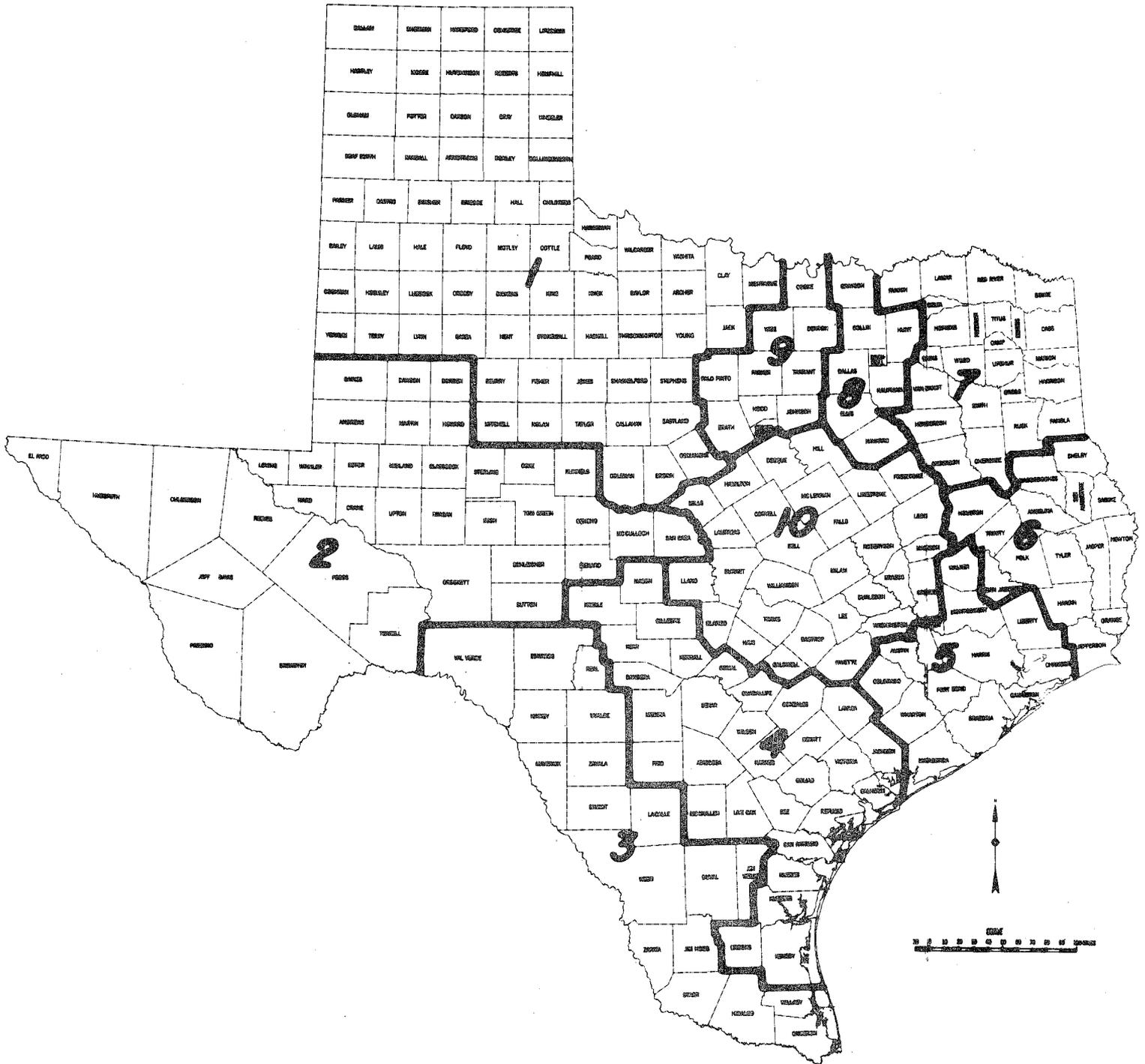
Total funding for this program is \$3.8 million (State and Federal) for FY76 and another \$3.8 million for FY77. DPW is authorized to spend a little over \$1 million of FY75 funds for administrative and "start-up" costs for the program. The money is split in the ten regions by client population. Below is FY76 funding and it is assumed there will not be any drastic changes for FY77 funding.

<u>Region</u>	<u>FY76 Allocation</u>
01	\$231,515
02	163,436
03	349,362
04	572,849
05	564,992
06	186,638
07	284,954
08	397,168
09	189,841
10	314,178

Source:

Department of Public
Welfare

FIGURE 12
DEPARTMENT OF PUBLIC WELFARE REGIONS



DISCUSSION OF THE PROBLEM IN TEXAS

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DISCUSSION OF THE PROBLEM IN TEXAS

The three previous sections of this report have attempted to answer the following questions:

- (1) What are the transportation problems facing the elderly and handicapped?
- (2) Who and where are the elderly and handicapped in Texas?
- (3) What funding is available to meet the transportation needs of the elderly and handicapped?

The next step is planning to effectively and efficiently meet these needs. This will require the cooperation of federal, state, and local entities concerned with this effort. It is hoped that the information contained in this report will be of aid in this endeavor.

For purposes of this report, elderly were defined as those persons age 65 and over. However, not all of these persons are in need of specialized public transportation. They may either be able to use regular public transportation or may have regular access to a private automobile. The elderly can be divided into two categories: those who effectively use public transportation and those who cannot use it so effectively as the first group without special facilities or special planning or design. This definition is the most appropriate for use in designing a transportation system to fit their needs; however, survey work in the State will be needed to identify the elderly who require specialized transportation. Until this is done, the entire elderly population will have to be considered.

Census figures were used in the handicapped and disabled portion of this report. Therefore, the totals are based on the Census definition of handicapped; "refers to a serious illness that has lasted (or is likely to last) for a relatively long time, or a serious physical or mental impairment, defect, or handicap". However, the UMTA definition of handicapped is more appropriate: "The term 'handicapped person' means any individual who, by reason of illness, injury, age, congenital malfunction or other permanent or temporary incapacity or disability, is unable without special facilities or special planning or design to utilize mass transportation facilities as effectively as persons who are not so affected".²³ Also, the gradations within the handicapped group (invalids, nonambulatory, semiambulatory, ambulatory, and able-bodied)²⁴ would be helpful in designing a transportation system for these people. Survey work would also be necessary for this approach to develop realistic data. Both in the case of elderly and the case of handicapped, local survey work could be done for a particular area rather than a massive, statewide effort. For the present; however, the entire group must be considered.

The total figures of elderly and handicapped for the State of Texas is shown below:

	<u>1970</u>	<u>1975</u>	<u>1980</u>
Elderly (Ages 65 & Over)	992,059	1,109,251	1,229,852
Handicapped & Disabled (Ages 16-64 & Noninstitutionalized)	<u>631,482</u>	<u>689,345</u>	<u>741,346</u>
Sub-Totals	1,623,541	1,798,596	1,971,198
VH, OH/OHI, & MBI Special Education Students (Ages 3-15)*	<u>15,525</u>	<u>20,629</u>	<u>22,286</u>
TOTALS	1,639,066	1,819,225	1,993,484

From studying the information gathered, it was found that 34.6 percent of the elderly and handicapped (ages 16-64 and noninstitutionalized) were in the following counties in 1970: Harris, Dallas, Bexar, and Tarrant. The total figures of elderly and handicapped for these four counties are shown below:

	<u>Elderly (Ages 65 & Over)</u>			<u>H&D (Ages 16-64 & Noninstitutionalized)</u>		
	<u>1970</u>	<u>1975</u>	<u>1980</u>	<u>1970</u>	<u>1975</u>	<u>1980</u>
Harris	102,341	126,653	150,964	96,165	109,515	123,225
Dallas	88,237	104,545	120,852	73,086	80,627	90,906
Bexar	62,416	70,339	78,261	46,865	52,261	56,355
Tarrant	<u>52,148</u>	<u>60,689</u>	<u>69,229</u>	<u>40,924</u>	<u>42,649</u>	<u>47,333</u>
Totals	305,142	362,226	419,306	257,040	285,052	317,819
TOTAL STATE	992,059	1,109,251	1,229,852	631,482	689,345	741,346
% 4-County Total of State Total	30.8	32.7	34.1	40.7	41.4	42.9

	<u>Total Elderly & Handicapped</u>			<u>Total Population</u>		
	<u>1970</u>	<u>1975</u>	<u>1980</u>	<u>1970</u>	<u>1975</u>	<u>1980</u>
Harris	198,506	236,168	274,189	1,741,912	1,991,187	2,240,461
Dallas	161,323	185,172	211,758	1,327,321	1,521,264	1,715,206
Bexar	109,281	122,600	134,616	830,460	901,050	971,639
Tarrant	<u>93,072</u>	<u>103,338</u>	<u>116,562</u>	<u>716,317</u>	<u>804,698</u>	<u>893,078</u>
Totals	562,182	647,278	737,125	4,616,010	5,218,199	5,820,384
TOTAL STATE	1,623,541	1,798,596	1,971,198	11,196,730	12,134,981	13,109,251
% 4-County Total of State Total	34.6	36.0	37.4	41.2	43.0	44.4

*Visually handicapped, orthopedically handicapped and other health impaired, and minimal brain injury special education students.

It can be seen from the above information that almost half of the State's total population is found in these four counties. As expected, a large proportion of elderly and handicapped are also found there. The needs of the elderly and handicapped in these areas are apparent and much has been accomplished to serve their needs. However, in the other 250 counties of the State, home of nearly two-thirds of the elderly and handicapped population, much is needed to provide them with effective transportation they can utilize.

The elderly and handicapped all over the State are being served by many organizations focusing on varied areas of their lives. The Governor's Committee on Aging, the Texas Rehabilitation Commission, the Department of Public Welfare, and the Texas Department of Community Affairs are only a few of the state agencies that have perceived transportation needs and developed programs to meet them. Many local agencies such as Community Councils, County Councils, Community Action Agencies and Area Planning Councils have also invested time and money in transportation related projects.

The greatest need at this time is for coordination among these many agencies to avoid duplication of effort. Federal programs such as the Section 16b(2) Program (Capital Assistance Grants to Private Non-Profit Organizations for Improved Mobility of Elderly and Handicapped) and the Section 147 Program (Demonstration Grant Program to Encourage the Development, Improvement, and Use of Public Transportation in Rural Areas) have begun to bring this coordination of effort about. The one Section 147 grant made to Texas in 1975 for a total of \$300,000 was to the Capital Area Planning Council for an integrated rural transportation system covering six counties. The funding will allow the purchase of 17 vehicles, some of which will be specially equipped for elderly and handicapped. This Council organized and coordinated transportation programs of several different human services agencies to plan this system for the Austin area.

Several of the Section 16b(2) grant applications involved several agencies in the same area or provided opportunity for coordination among agencies. At the least, this new equipment will enhance the possibility for such coordination. Forty Section 16b(2) applications from Texas were reviewed and approved by UMTA this year. The total amount of funding for Texas under this Program is \$932,000 and will allow the purchase of 94 vehicles which will be used by the grantees in their areas of the State.

The Department of Public Welfare's Title XIX Program has also brought coordination of effort about. The Department is implementing a transportation system covering the State to serve Medicaid recipients. In most cases they contracted with systems already in service such as city bus systems in different areas to provide such transportation. In other cases, they plan to contract with operators of systems that are in the planning process such as Section 16b(2) applicants.

Increased attention should be given to assuring that multiple transportation programs do not encourage fragmentation of service among multiple providers; an inefficient use of public funds. In some areas, it may be possible to contract with existing transit service (either taxi service or bus service) to provide needed transportation to the elderly and handicapped. This would avoid duplication of service and would be a more efficient use of

public funds. In the case of a small taxi service, for instance, subsidizing would make it possible for them to lower their fares for handicapped and elderly patrons and increase their business rather than lose these passengers to a new lower priced but subsidized service in the community.

One suggestion to help bring about this coordination effort is the creation of a committee of representatives from each state agency dealing with transportation for the elderly and handicapped. This committee would need information on all existing systems in the State in order to discover where the need exists at this time. The State Department of Highways and Public Transportation in coordination with the Texas Department of Community Affairs is now in the process of conducting a transportation provider survey covering all types of surface transportation (other than rail) for the entire State. Data being collected in this survey include equipment available, ridership levels, services provided, vehicle miles operated and financial information. This survey could be utilized by the committee. The committee would need to be made aware of all plans for such services, and having such knowledge, could then make recommendations for effective coordination. This would not necessarily have to be done at the State level if regional committees could be organized. It could perhaps be accomplished through the Area Planning Councils for instance.

Progress has been made in Texas to this point, but an adequate transportation system for the elderly and handicapped in a state as large as Texas will be an expensive undertaking.

West Virginia began a "TRIP Program" (Transportation Remuneration Incentive Program) 16 months ago in an effort to meet the needs of elderly, handicapped and poor people. Tom Tinder, West Virginia's welfare commissioner, explained the system to reporters in this way, "We provide special TRIP buses that are available to anyone with the fare, and we provide TRIP tickets that can be used on these buses or on existing transportation systems, including cabs, city buses or even Greyhound". The price of the TRIP ticket is based on income in the same way food stamps are. Although they can cost as little as \$1 or as much as \$5, the average price is \$1.80 a month for \$8 worth of tickets. The program is operating 17 buses and some 5,500 people are participating, either by riding TRIP buses or by using TRIP tickets on existing transportation systems.²⁵

As already noted, specialized transportation is not necessary for all the elderly and handicapped. Denver's solution to the problem considers the different gradations of the handicapped as well as different capabilities of the elderly in the design of their transportation system. In Denver, there are specialized vehicles available on a subscription basis for the severely handicapped. Regular transit buses, equipped with some special facilities, meet the needs of less severely handicapped who are able to ride regular transit service. Another part of their program includes organized shopping trips in regular transit buses for the elderly serving as many as 15 centers where elderly persons are concentrated. This Denver system certainly involves some additional expense but with their extra planning and foresight, they are serving more people in need than would be served by a strictly specialized system.

Different areas of Texas will find different solutions depending on their local needs and resources. In some areas, a specially equipped van may serve the need either on a subscription basis or a dial-a-ride concept. In smaller cities, contracting with existing taxi service may fill the need. In other areas,

coordination among several different cities and agencies may be necessary. In larger cities, we might find a total program such as exists in Denver. Active participation by government agencies and private social service organizations is essential if such a program is to be successful.

The State Department of Highways and Public Transportation will publish its "Master Plan for Public and Mass Transportation in Texas" prior to the next regular session of the Legislature as required. Each of the 25 State Department of Highways and Public Transportation Districts in coordination with other state agencies, local organizations and local governments will participate by developing plans for their areas. Elderly and handicapped transportation will of course be a consideration in this plan. Recommendations will be included on how to approach the problem of transportation for the elderly and handicapped in the different areas; however, the final solution will come from the people of each area in Texas.

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FOOTNOTES

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FOOTNOTES

1. Public Law 91-453, approved October 15, 1970.
2. George Cronin, "Transportation for Older Americans," Statement presented at the Governor's Committee on Aging - Research Utilization Workshop, San Antonio, Texas, February 25, 1975, p.3.
3. Public Law 93-87, approved August 13, 1973.
4. National Mass Transportation Assistance Act of 1974 (August 22, 1974).
5. Public Law 93-643, approved January 4, 1975.
6. Public Law 93-391, approved August 28, 1974.
7. Memorandum of Understanding, 30th day of October, 1974. Plaintiffs, Disabled in Action of Baltimore and Maryland Advocates for the Aging. Defendants, Maryland Department of Transportation, United States Department of Transportation and General Services Administration, United States District Court for the District of Maryland.
8. Newsline - Current Research in Public Transportation Development, Vol. 1, No. 3, March, 1975, page 1, "Crisis in Transportation for Handicapped".
9. Federal Register, Vol. 40, No. 39, February 26, 1975, np., "Elderly and Handicapped Transportation Services - Codification of Requirements," Department of Transportation, Urban Mass Transportation Administration.
10. Ibid., p. 8314.
11. Section 16 was added by Section 8 of Public Law 91-453.
12. John B. Schnell, "Public Transportation and Transportation Needs of the Elderly and Handicapped," Transportation for the Poor, the Elderly, and the Disadvantaged, (Transportation Research Record; 516, National Research Council, Washington, D.C.: 1974), p. 2.
13. Ibid.
14. John B. Schnell and Philip H. Braum, "Public Policy and Transit Services for Handicapped Persons," Paper Presented to the Transportation Research Board, January 13, 1975, (Unpublished to Date).
15. Schnell, loc. cit., p. 10 [Refers to a different page of the Schnell article from that of n. 12].
16. U.S. Department of Transportation, Office of the Secretary, Travel Barriers, (Washington D.C.: May, 1970), pp. 3 and 4, [This source is used extensively throughout the two subsections, "Travel Barriers" and "Removing Travel Barriers" of this report. With this understanding, only direct quotes from this source will be footnoted].

17. Ibid., p. 5.
18. Ibid., p. 9.
19. Ibid., p. 39.
20. Ibid., p. 27
21. Schnell, loc. cit., p. 3, [This source is used extensively in the subsection, "Proposed Solutions". With this understanding, only direct quotes from this source will be footnoted].
22. Schnell, loc. cit., p. 8.
23. Public Law 91-453.
24. Schnell, loc. cit., p. 2.
25. Associated Press dispatch, Austin [Texas] American-Statesman, November 13, 1975, "Trip Program Solving Rural Transportation Problems," p. B2.

APPENDIX A

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APPENDIX B

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TABLE 11: ELDERLY & HANDICAPPED IN TEXAS BY COUNTY

1970, 1975 & 1980

County	1 9 7 0		1 9 7 5		1 9 8 0	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Anderson	6,616	23.8	6,565	24.0	6,656	24.7
Andrews	1,344	13.0	1,455	12.3	1,750	13.1
Angelina	8,015	16.3	8,969	17.0	9,789	17.5
Aransas	1,919	21.6	2,034	20.9	2,311	21.9
Archer	1,126	19.6	1,196	21.0	1,224	21.7
Armstrong	455	24.0	452	24.5	462	25.8
Atascosa	3,203	17.1	3,470	18.1	3,647	18.5
Austin	3,526	25.5	3,543	26.0	3,549	26.4
Bailey	1,225	14.4	1,349	15.1	1,491	16.0
Bandera	1,254	26.4	1,248	26.6	1,310	28.2
Bastrop	4,122	23.8	4,190	24.3	4,247	24.8
Baylor	1,333	25.5	1,347	27.0	1,355	28.5
Bee	2,835	12.5	3,446	14.8	3,695	15.6
Bell	15,767	12.7	18,115	14.0	19,279	14.4
Bexar	109,281	13.2	122,600	13.6	134,616	13.9
Blanco	974	27.3	948	27.2	971	28.6
Borden	89	10.0	115	13.0	128	14.5
Bosque	3,482	31.8	3,372	32.0	3,439	33.9
Bowie	12,611	18.6	12,364	17.7	13,149	18.2
Brazoria	11,305	10.4	14,276	11.5	16,848	12.0
Brazos	6,870	11.9	8,629	13.8	9,326	13.9
Brewster	927	11.9	1,200	15.0	1,258	15.3
Briscoe	532	19.0	487	17.5	522	18.9
Brooks	1,167	14.6	1,219	14.7	1,350	15.8
Brown	6,385	24.7	6,463	25.4	6,523	26.1
Burleson	2,657	26.6	2,449	25.1	2,444	25.7
Burnet	3,369	29.5	3,456	30.5	3,655	32.6
Caldwell	3,865	18.3	3,983	18.6	3,981	18.4
Calhoun	1,614	9.1	2,269	11.2	2,599	11.4
Callahan	2,348	28.6	2,224	28.0	2,220	28.9

County	1970		1975		1980	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Cameron	18,646	13.3	22,533	15.1	24,380	15.4
Camp	1,744	21.8	1,768	22.1	1,799	22.5
Carson	1,133	17.8	1,158	18.2	1,218	19.2
Cass	4,859	20.1	5,159	21.3	5,371	22.0
Castro	1,169	11.2	1,234	10.3	1,444	10.7
Chambers	1,805	14.8	1,848	14.1	2,101	15.0
Cherokee	7,774	24.3	7,466	23.9	7,686	25.3
Childress	1,957	29.6	1,734	28.2	1,725	30.4
Clay	1,864	23.1	1,897	24.1	1,906	24.9
Cochran	897	16.8	820	14.9	893	15.7
Coke	615	19.9	707	23.8	739	25.8
Coleman	3,098	30.1	2,946	30.6	2,880	32.1
Collin	10,732	16.0	11,525	15.2	12,439	14.7
Collingsworth	1,351	28.4	1,196	27.0	1,164	28.3
Colorado	3,751	21.3	3,712	21.1	3,853	21.9
Comal	3,935	16.3	4,989	19.6	5,419	20.4
Comanche	3,566	30.0	3,242	28.3	3,235	29.3
Concho	770	26.2	778	28.2	764	29.6
Cooke	4,777	20.4	4,652	19.5	4,906	20.3
Coryell	4,464	12.6	5,086	13.6	5,313	13.4
Cottle	935	29.2	706	23.3	695	24.3
Crane	613	14.7	582	13.5	676	15.2
Crockett	525	13.5	609	15.2	672	16.2
Crosby	1,642	18.1	1,629	17.3	1,732	17.7
Culberson	261	7.6	427	10.7	499	11.0
Dallam	1,309	21.8	1,094	18.1	1,147	18.8
Dallas	161,323	12.2	185,172	12.2	211,758	12.3
Dawson	3,024	18.2	2,857	16.8	3,050	17.6
Deaf Smith	1,922	10.1	2,579	11.7	2,984	11.9
Delta	1,758	35.7	1,408	30.6	1,401	32.8

County	1970		1975		1980	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Denton	9,595	12.7	12,115	14.5	13,345	14.5
DeWitt	5,530	29.6	4,562	25.2	4,517	25.6
Dickens	1,115	29.8	965	27.4	988	29.9
Dimmitt	1,339	14.8	1,425	15.2	1,494	15.3
Donley	972	26.7	984	29.3	947	30.8
Duval	1,662	14.2	2,016	17.1	2,165	18.2
Eastland	5,457	30.2	5,168	30.4	4,963	31.1
Ector	9,630	10.5	11,741	11.1	14,267	12.0
Edwards	422	20.0	373	17.4	389	17.9
Ellis	9,322	20.0	9,242	19.3	9,590	19.5
El Paso	37,615	10.5	47,178	11.7	52,881	11.8
Erath	5,479	30.2	4,701	26.5	4,716	27.2
Falls	4,617	26.7	4,455	27.1	4,364	28.0
Fannin	6,164	27.1	5,941	27.2	5,891	28.1
Fayette	5,274	29.9	4,980	30.1	4,945	32.0
Fisher	1,524	24.0	1,475	24.4	1,511	26.3
Floyd	1,885	17.1	1,945	16.9	2,046	17.1
Foard	789	35.7	594	29.1	597	31.8
Fort Bend	6,172	11.8	8,172	14.0	9,054	14.0
Franklin	1,604	30.3	1,417	27.6	1,422	28.5
Freestone	3,260	29.3	3,077	30.0	3,049	30.2
Frio	1,710	15.3	1,837	15.4	1,912	15.1
Gaines	1,484	12.8	1,608	12.9	1,841	13.8
Galveston	22,411	13.2	25,728	14.1	28,813	14.7
Garza	910	17.2	977	18.4	1,042	19.6
Gillespie	2,617	24.8	2,699	25.8	2,665	25.8
Glasscock	228	19.7	173	14.1	194	14.9
Goliad	1,036	21.3	1,050	22.0	1,043	22.4
Gonzales	3,798	23.2	3,713	23.1	3,699	23.4
Gray	4,690	17.4	4,812	17.5	5,271	18.9

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<u>County</u>	<u>1 9 7 0</u>		<u>1 9 7 5</u>		<u>1 9 8 0</u>	
	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>
Grayson	16,769	20.1	15,954	18.5	16,582	18.6
Gregg	12,238	16.1	13,286	16.8	14,417	17.6
Grimes	3,269	27.6	2,870	24.8	2,820	25.0
Guadalupe	6,704	20.0	6,456	18.3	6,834	18.5
Hale	5,207	15.3	5,725	15.8	6,245	16.3
Hall	1,497	24.9	1,502	26.4	1,481	27.6
Hamilton	2,527	35.1	2,319	35.0	2,255	37.2
Hansford	723	11.4	870	12.6	962	12.9
Hardeman	1,753	25.8	1,702	26.4	1,697	27.7
Hardin	4,631	15.4	5,199	16.1	5,743	16.6
Harris	198,506	11.4	236,168	11.9	274,189	12.2
Harrison	9,159	20.4	8,624	19.0	8,839	19.3
Hartley	555	20.0	540	18.4	599	19.4
Haskell	2,295	27.0	2,006	24.9	2,016	26.4
Hays	3,169	11.5	4,378	15.0	4,676	15.2
Hemphill	463	15.0	591	19.3	601	19.7
Henderson	6,140	23.2	6,123	22.6	6,541	23.7
Hidalgo	21,716	12.0	27,556	14.2	29,662	14.4
Hill	6,408	27.9	5,794	26.5	5,790	27.9
Hockley	2,687	13.2	3,147	14.9	3,506	16.1
Hood	1,518	23.8	1,665	25.8	1,714	26.2
Hopkins	5,322	25.7	4,811	23.3	4,910	23.9
Houston	4,488	25.1	4,042	23.1	4,055	23.6
Howard	5,249	13.9	5,894	15.0	6,512	16.0
Hudspeth	340	14.2	356	14.9	368	15.5
Hunt	8,761	18.3	9,106	18.5	9,341	18.5
Hutchinson	3,250	13.3	4,043	16.9	4,522	19.4
Irion	249	23.3	262	25.2	266	26.3
Jack	1,683	25.1	1,600	24.5	1,605	25.2
Jackson	2,188	16.9	2,270	17.1	2,483	18.3

County	1 9 7 0		1 9 7 5		1 9 8 0	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Jasper	5,090	20.6	4,778	18.5	5,111	19.0
Jeff Davis	305	20.0	289	19.1	300	20.0
Jefferson	33,678	13.8	38,172	14.9	42,020	15.7
Jim Hogg	683	14.7	814	17.0	882	18.0
Jim Wells	4,151	12.6	4,956	14.1	5,560	15.0
Johnson	8,495	18.6	9,161	18.8	9,609	18.5
Jones	4,192	26.0	3,851	24.8	3,898	26.0
Karnes	2,370	17.6	2,499	18.5	2,568	19.0
Kaufman	6,727	20.8	7,107	21.6	7,359	22.1
Kendall	1,753	25.2	1,668	23.3	1,724	23.5
Kenedy	66	9.7	95	13.1	104	13.4
Kent	280	19.5	297	21.7	304	23.3
Kerr	6,125	31.5	6,140	31.2	6,475	32.4
Kimble	1,121	28.7	868	22.3	863	22.2
King	74	15.9	61	13.6	74	17.2
Kinney	368	18.3	361	18.1	372	18.7
Kleberg	3,268	9.9	4,206	12.2	4,559	12.8
Knox	1,468	24.6	1,446	25.5	1,414	26.3
Lamar	8,315	23.1	7,929	22.0	8,022	22.3
Lamb	3,444	19.4	3,379	18.8	3,607	19.9
Lampasses	2,389	25.6	2,256	24.5	2,258	24.8
LaSalle	796	15.9	865	17.0	912	17.7
Lavaca	4,402	24.6	4,768	27.7	4,787	28.9
Lee	1,930	24.0	2,093	27.1	2,108	28.5
Leon	2,438	27.9	2,259	27.0	2,285	28.6
Liberty	6,539	19.8	6,182	18.0	6,624	18.6
Limestone	4,706	26.0	4,668	27.2	4,598	28.4
Lipscomb	588	16.9	688	19.6	734	20.8
Live Oak	1,044	15.6	1,272	19.1	1,332	20.1
Llano	2,491	35.7	2,416	35.2	2,653	39.3

County	1 9 7 0		1 9 7 5		1 9 8 0	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Loving	14	8.5	28	17.2	36	22.2
Lubbock	19,832	11.1	24,865	12.5	28,187	12.9
Lynn	1,583	17.4	1,578	16.9	1,651	17.4
McCulloch	2,316	27.0	2,210	26.6	2,213	27.5
McLennan	27,598	18.7	28,217	18.7	29,640	19.3
McMullen	273	24.9	211	19.1	221	19.8
Madison	1,990	25.9	1,761	23.0	1,802	23.6
Marion	2,268	26.6	1,906	22.6	1,971	23.6
Martin	831	17.4	785	16.0	850	16.9
Mason	878	26.2	893	28.1	878	29.3
Matagorda	4,239	15.2	4,856	16.5	5,244	17.0
Maverick	1,786	9.9	2,607	12.9	2,910	13.0
Medina	3,334	16.5	3,605	17.1	3,762	17.1
Menard	627	23.7	677	26.7	667	27.5
Midland	6,771	10.3	8,735	11.4	10,664	12.1
Milam	5,157	25.7	4,791	24.4	4,762	24.6
Mills	1,206	28.6	1,310	33.2	1,287	35.0
Mitchell	1,900	20.9	1,937	22.0	1,984	23.3
Montague	4,281	27.9	3,953	26.3	4,011	27.2
Montgomery	7,000	14.1	9,336	16.7	10,614	17.0
Moore	1,450	10.3	1,740	11.9	2,020	13.3
Morris	2,211	18.0	2,449	19.2	2,636	19.9
Motley	567	26.0	565	27.8	541	28.7
Nacogdoches	6,319	17.4	6,850	18.5	7,085	18.8
Navarro	7,861	25.2	7,609	25.2	7,581	25.9
Newton	2,253	19.3	2,189	18.0	2,311	18.3
Nolan	3,475	21.4	3,400	21.2	3,497	22.1
Nueces	26,479	11.1	32,938	12.8	37,371	13.5
Ochiltree	1,051	10.8	1,295	12.1	1,466	12.5
Oldham	368	16.3	366	15.4	407	16.3

<u>County</u>	<u>1 9 7 0</u>		<u>1 9 7 5</u>		<u>1 9 8 0</u>	
	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>
Orange	8,799	12.4	9,544	12.1	11,015	12.8
Palo Pinto	4,121	14.2	4,320	14.1	4,537	14.0
Panola	3,453	21.7	3,559	22.8	3,705	24.2
Parker	5,555	16.4	5,760	16.5	6,049	16.8
Parmer	1,092	10.4	1,475	12.4	1,707	12.8
Pecos	1,376	10.0	1,735	11.5	1,945	11.9
Polk	3,478	24.1	3,277	22.7	3,384	23.5
Potter	15,324	16.9	15,396	16.1	16,795	16.6
Presidio	753	15.6	896	18.7	896	18.8
Rains	974	26.0	968	26.1	1,002	27.3
Randall	4,341	8.1	6,949	10.4	8,431	10.5
Reagan	323	10.0	430	12.9	490	14.3
Real	611	30.4	449	22.2	472	23.2
Red River	4,194	29.3	3,685	27.0	3,594	27.6
Reeves	1,686	10.2	2,132	11.6	2,416	12.0
Refugio	1,412	14.9	1,477	15.3	1,638	16.6
Roberts	127	13.1	182	18.5	198	19.8
Robertson	3,987	27.7	3,468	24.7	3,439	25.1
Rockwall	1,558	22.1	1,381	18.6	1,455	18.7
Runnels	2,921	24.1	2,910	25.1	2,891	26.0
Rusk	8,102	23.8	8,026	24.2	8,215	25.5
Sabine	1,581	22.0	1,525	21.3	1,582	22.1
San Augustine	1,765	22.5	1,779	22.6	1,833	23.3
San Jacinto	1,705	25.4	1,602	23.6	1,668	24.3
San Patricio	6,012	12.7	6,896	13.5	7,688	14.1
San Saba	1,782	32.2	1,529	29.2	1,485	30.1
Schleicher	510	22.4	474	21.1	493	22.2
Scurry	2,899	18.4	2,998	19.4	3,181	21.0
Shackelford	774	23.3	889	28.6	877	30.4
Shelby	4,686	23.8	4,553	23.4	4,635	24.0

1 9 7 0

1 9 7 5

1 9 8 0

<u>County</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>	<u>No. Elderly & Handicapped</u>	<u>% Total Co. Population</u>
Sherman	501	13.7	492	12.2	551	12.6
Smith	16,363	16.9	17,966	17.7	19,403	18.3
Somervell	816	29.2	750	26.8	749	26.7
Starr	2,548	14.4	2,774	14.4	3,069	14.8
Stephens	2,407	28.6	2,089	25.7	2,067	26.3
Sterling	196	18.6	198	18.6	207	19.4
Stonewall	635	26.5	535	23.6	559	26.1
Sutton	455	14.3	543	17.0	556	17.4
Swisher	1,439	13.9	1,762	16.0	1,910	16.4
Tarrant	93,072	13.0	103,338	12.8	116,562	13.1
Taylor	14,007	14.3	16,107	15.7	17,395	16.1
Terrell	260	13.4	340	17.9	364	19.5
Terry	2,172	15.4	2,119	14.2	2,352	15.0
Throckmorton	616	27.9	661	32.5	644	34.7
Titus	3,686	22.1	3,733	22.3	3,975	23.6
Tom Green	11,669	16.4	12,483	17.0	13,314	17.7
Travis	33,452	11.3	43,736	13.4	48,781	13.6
Trinity	2,256	29.6	1,905	25.7	1,896	26.3
Tyler	2,795	22.5	2,927	23.2	3,057	24.0
Upshur	4,385	20.9	4,541	21.5	4,734	22.3
Upton	618	13.2	666	13.9	721	14.8
Uvalde	2,932	16.9	3,158	17.5	3,308	17.6
Val Verde	2,758	10.0	3,640	12.3	3,944	12.5
Van Zandt	5,966	26.9	5,628	25.5	5,820	26.4
Victoria	6,143	11.4	7,384	12.4	8,763	13.5
Walker	3,732	13.5	4,539	16.0	4,758	16.4
Waller	2,002	14.0	2,514	17.1	2,628	17.4
Ward	1,436	11.0	1,809	13.4	2,036	14.6
Washington	4,511	23.9	4,527	24.5	4,495	24.7
Webb	9,065	12.4	8,932	15.6	9,701	23.4

County	1 9 7 0		1 9 7 5		1 9 8 0	
	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population	No. Elderly & Handicapped	% Total Co. Population
Wharton	5,774	15.7	6,549	17.4	6,965	18.1
Wheeler	1,846	28.7	1,589	26.0	1,606	27.8
Wichita	17,919	14.7	19,598	15.3	20,687	15.5
Wilbarger	3,583	23.3	3,695	24.9	3,853	26.9
Willacy	2,415	15.5	2,362	14.8	2,497	15.2
Williamson	8,165	21.9	8,532	22.7	8,616	22.8
Wilson	2,139	16.4	2,508	18.9	2,592	19.1
Winkler	1,197	12.4	1,334	13.5	1,533	15.1
Wise	4,083	20.7	4,082	20.0	4,186	19.7
Wood	5,070	27.3	4,865	26.9	5,019	28.6
Yoakum	798	10.9	942	11.5	1,110	12.3
Young	4,221	27.4	3,855	25.7	3,930	27.0
Zapata	684	15.7	863	19.3	897	19.5
Zavala	1,429	12.6	1,628	13.5	1,792	14.0
TOTALS-Ages 16-64	1,623,541	14.5	1,798,596	14.8	1,971,198	15.0
VH, OH/OHI & MBI Students-Ages 3-15	15,525		20,629		22,286	
TOTALS-Ages 3-64	1,639,066	14.6	1,819,225	15.0	1,993,484	15.2

Sources: U.S. Bureau of the Census
Texas Rehabilitation Commission
Governor's Office, Division of Planning
State Department of Highways and Public Transportation
Texas Education Agency

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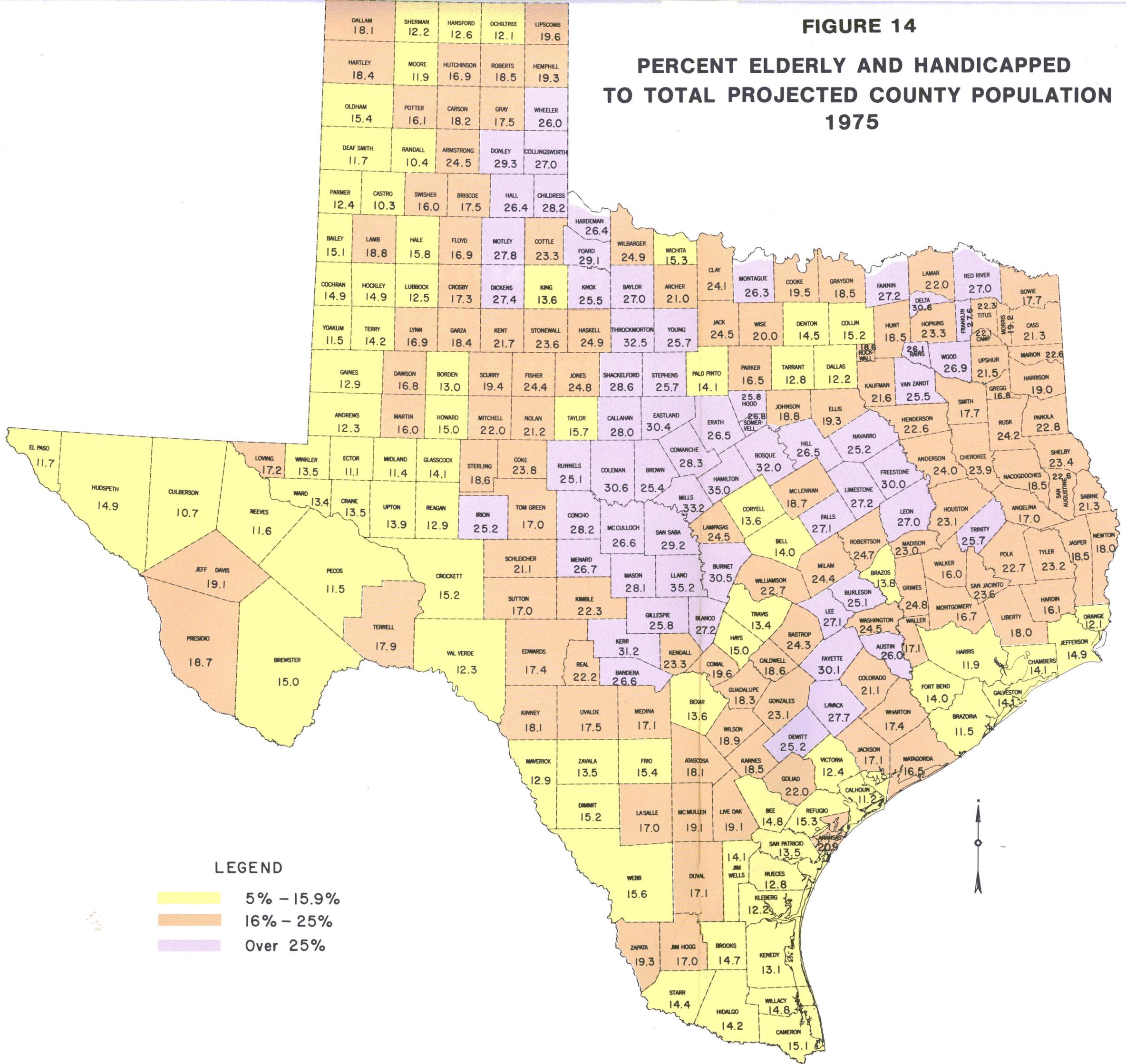
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FIGURE 14

PERCENT ELDERLY AND HANDICAPPED TO TOTAL PROJECTED COUNTY POPULATION 1975



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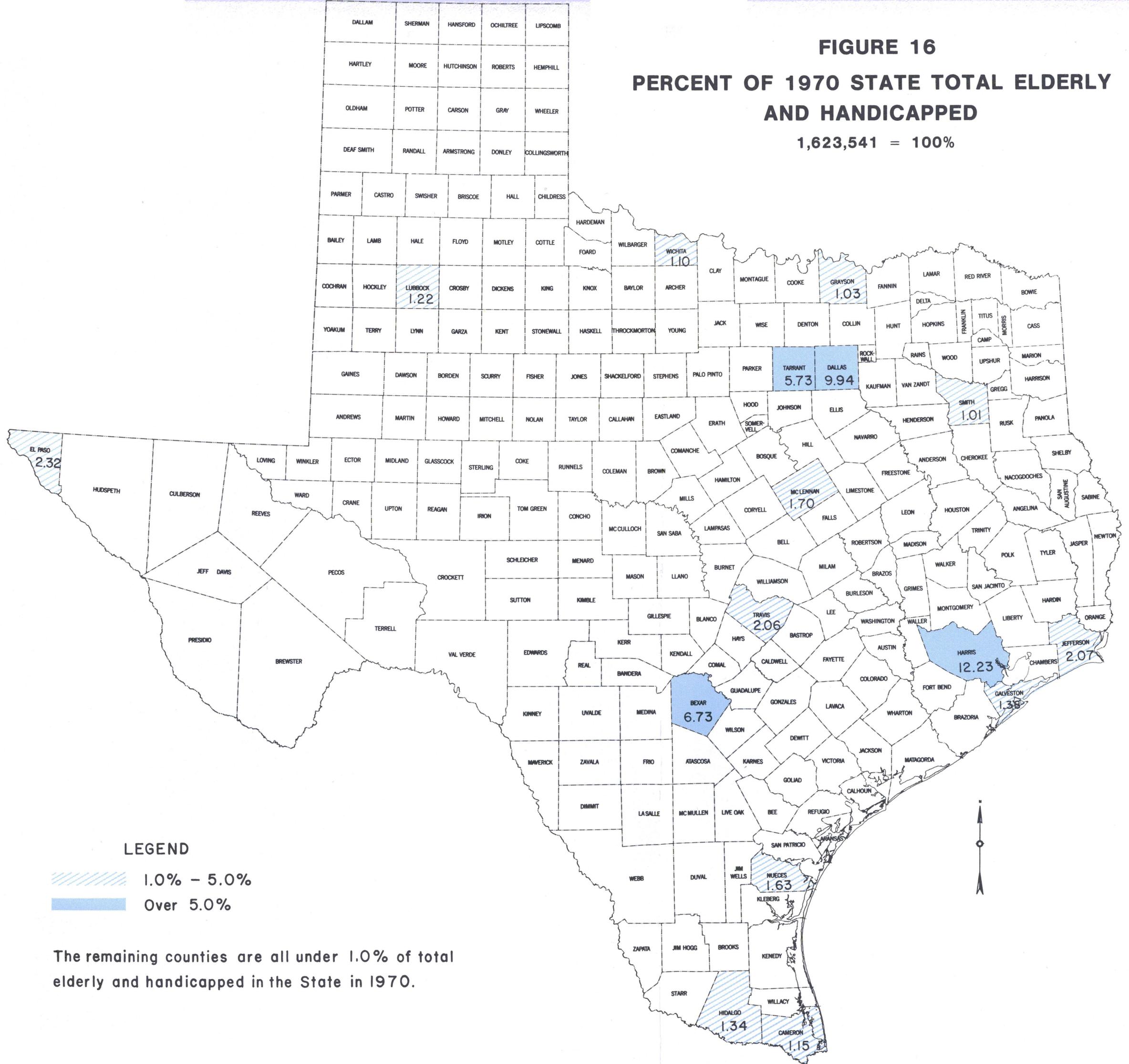
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FIGURE 16
PERCENT OF 1970 STATE TOTAL ELDERLY
AND HANDICAPPED

1,623,541 = 100%



LEGEND

- 1.0% - 5.0%
- Over 5.0%

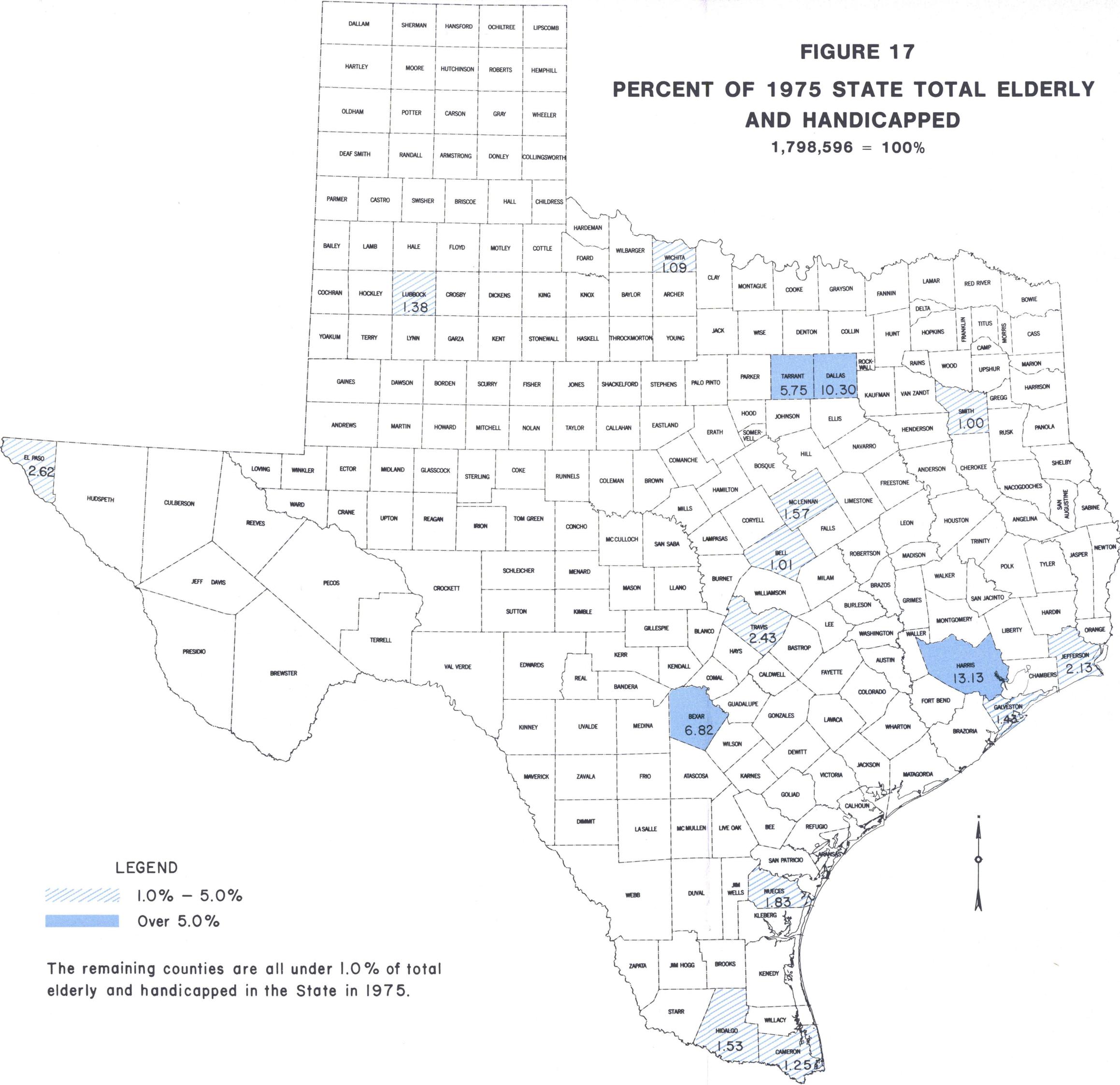
The remaining counties are all under 1.0% of total elderly and handicapped in the State in 1970.



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FIGURE 17
PERCENT OF 1975 STATE TOTAL ELDERLY
AND HANDICAPPED
 1,798,596 = 100%



LEGEND

- 1.0% – 5.0%
- Over 5.0%

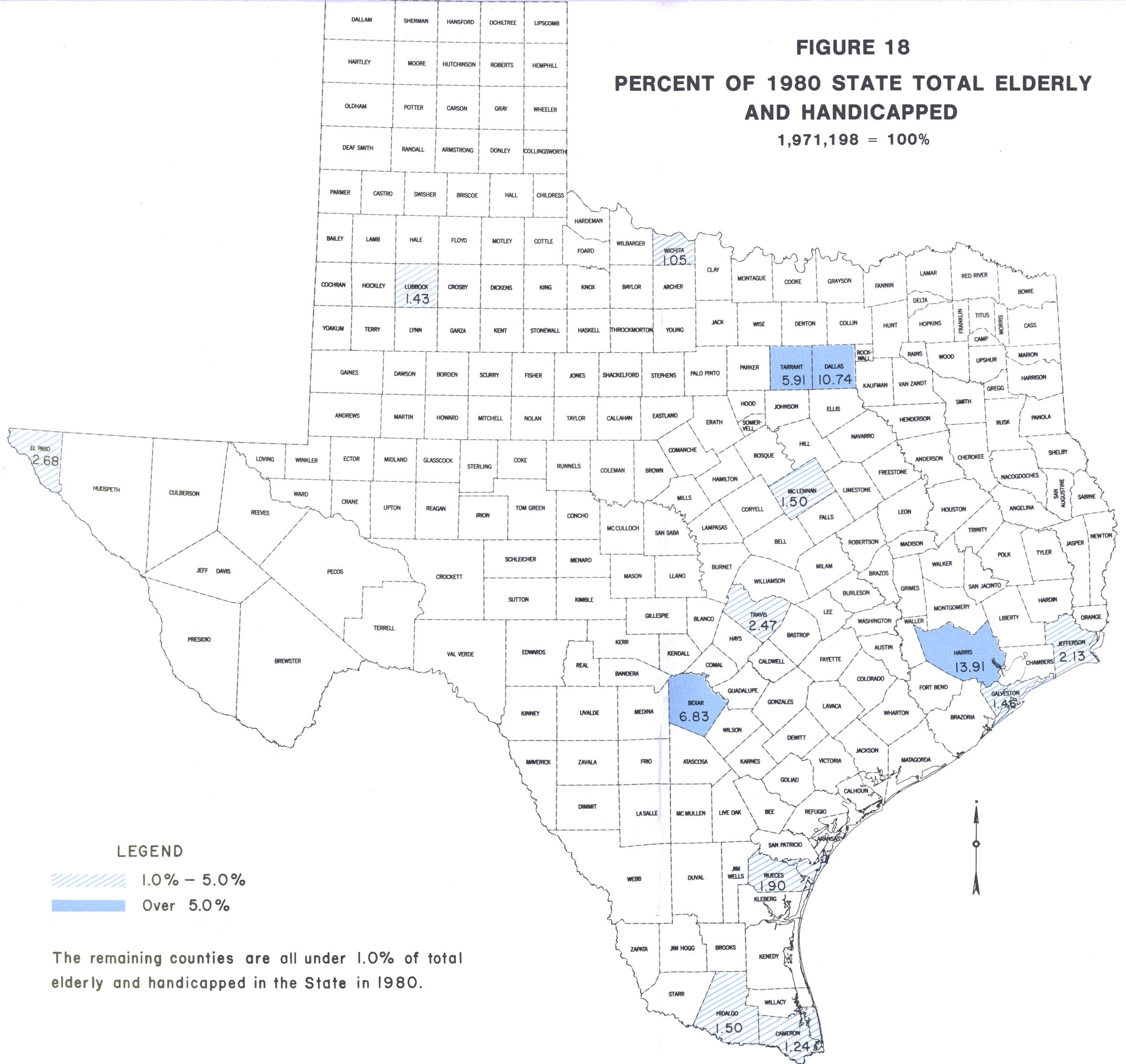
The remaining counties are all under 1.0% of total elderly and handicapped in the State in 1975.



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FIGURE 18
PERCENT OF 1980 STATE TOTAL ELDERLY
AND HANDICAPPED
 1,971,198 = 100%



LEGEND

- 1.0% – 5.0%
- Over 5.0%

The remaining counties are all under 1.0% of total elderly and handicapped in the State in 1980.

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	COUNTY POPULATION	NUMBER 65 & OVER	COUNTY POPULATION	NUMBER 65 & OVER	COUNTY POPULATION	NUMBER 65 & OVER	COUNTY POPULATION	NUMBER 65 & OVER	COUNTY POPULATION	NUMBER 65 & OVER
Zapata	4,405	243	4,393	342	4,352	572	4,477	599	4,601	626
Zavala	11,201	541	12,696	713	11,370	838	12,091	963	12,812	1,087
TOTALS	7,711,194	513,420	9,579,677	745,391	11,196,730	992,059	12,134,981	1,109,251	13,109,595	1,229,852

SOURCES:

1950 through 1970 Population Figures - - U.S. Bureau of the Census

1975 Projections developed by the State Department of Highways and Public Transportation

1980 Population Estimates are unpublished projections developed by the Office of the Governor, Division of Planning Coordination

TABLE 15: STUDENTS RECEIVING SPECIAL EDUCATION SERVICES IN TEXAS BY COUNTY
 VH, OH/OHI & MBI Handicapping Conditions
 Ages 3-15--School Year 1973-74

<u>County</u>	<u>Number of Students</u>
Anderson	27
Andrews	0
Angelina	55
Aransas	0
Archer	*
Armstrong	0
Atascosa	*
Austin	0
Bailey	0
Bandera	16
Bastrop	19
Baylor	*
Bee	10
Bell	118
Bexar	1,826
Blanco	*
Borden	0
Bosque	0
Bowie	55
Brazoria	332
Brazos	79
Brewster	0
Briscoe	0
Brooks	0
Brown	10
Burleson	6
Burnet	14
Caldwell	2
Calhoun	32
Callahan	*
Cameron	42
Camp	8
Carson	0
Cass	0
Castro	20
Chambers	6
Cherokee	56
Childress	4
Clay	2
Cochran	*
Coke	*
Coleman	0
Collin	74
Collingsworth	*
Colorado	7
Comal	41

<u>County</u>	<u>Number of Students</u>
Comanche	14
Concho	*
Cooke	4
Coryell	57
Cottle	*
Crane	0
Crockett	0
Crosby	0
Culberson	*
Dallam	0
Dallas	2,245
Dawson	0
Deaf Smith	25
Delta	0
Denton	212
DeWitt	17
Dickens	*
Dimmit	*
Donley	*
Duval	0
Eastland	3
Ector	191
Edwards	0
Ellis	50
El Paso	388
Erath	46
Falls	0
Fannin	5
Fayette	1
Fisher	*
Floyd	27
Foard	0
Fort Bend	186
Franklin	0
Freestone	1
Frio	0
Gaines	0
Galveston	884
Garza	0
Gillespie	12
Glasscock	0
Goliad	27
Gonzales	50
Gray	9
Grayson	54
Gregg	27
Grimes	0
Guadalupe	85
Hale	33
Hall	32

<u>County</u>	<u>Number of Students</u>
Hamilton	0
Hansford	7
Hardeman	2
Hardin	119
Harris	5,221
Harrison	47
Hartley	0
Haskell	*
Hays	112
Hemphill	*
Henderson	16
Hidalgo	183
Hill	0
Hockley	13
Hood	*
Hopkins	45
Houston	6
Howard	50
Hudspeth	*
Hunt	65
Hutchinson	8
Irion	0
Jack	*
Jackson	0
Jasper	5
Jeff Davis	*
Jefferson	753
Jim Hogg	0
Jim Wells	30
Johnson	150
Jones	14
Karnes	*
Kaufman	25
Kendall	6
Kenedy	0
Kent	0
Kerr	44
Kimble	0
Kinney	*
King	*
Kleberg	17
Knox	23
Lamar	36
Lamb	0
Lampasses	*
LaSalle	0
Lavaca	3
Lee	7
Leon	0

<u>County</u>	<u>Number of Students</u>
Liberty	95
Limestone	0
Lipscomb	2
Live Oak	0
Llano	14
Loving	0
Lubbock	162
Lynn	*
Madison	12
Marion	0
Martin	*
Mason	25
Matagorda	16
Maverick	*
McCulloch	*
McLennan	170
McMullen	0
Medina	52
Menard	7
Midland	66
Milam	3
Mills	0
Mitchell	*
Montague	9
Montgomery	138
Moore	7
Morris	3
Motley	6
Nacogdoches	13
Navarro	12
Newton	10
Nolan	15
Nueces	396
Ochiltree	4
Oldham	0
Orange	284
Palo Pinto	37
Panola	22
Parker	53
Parmer	1
Pecos	0
Polk	7
Potter	338
Presidio	*
Raines	0
Randall	32
Reagan	0
Real	*
Red River	5

<u>County</u>	<u>Number of Students</u>
Reeves	1
Refugio	0
Roberts	*
Robertson	2
Rockwall	*
Runnels	*
Rusk	8
Sabine	0
San Augustine	0
San Jacinto	3
San Patricio	7
San Saba	28
Schleicher	0
Scurry	0
Shackelford	*
Shelby	29
Sherman	0
Smith	111
Somervell	0
Starr	0
Stephens	4
Sterling	*
Stonewall	*
Sutton	0
Swisher	0
Tarrant	2,145
Taylor	391
Terrell	*
Terry	11
Throckmorton	*
Titus	14
Tom Green	73
Travis	689
Trinity	0
Tyler	16
Upshur	14
Upton	0
Uvalde	0
Val Verde	17
Van Zandt	0
Victoria	95
Walker	7
Waller	2
Ward	4
Washington	9
Webb	27
Wharton	96
Wheeler	10
Wichita	151
Wilbarger	11
Willacy	1

<u>County</u>	<u>Number of Students</u>
Williamson	46
Wilson	*
Winkler	0
Wise	10
Wood	2
Yoakum	0
Young	19
Zapata	5
Zavala	*
	<hr/>
TOTAL	20,627

*These counties are members of a Plan A Co-Op. In instances where schools were co-op members, the fiscal agent of the co-op compiled and submitted the report. Therefore, they are included in the total but not broken down by County in these instances.

Source: Texas Education Agency