

# Community Engagement Technical Report

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Submitted to  
Spokane Regional Transportation Council  
for their long-range transportation plan

*Horizon 2045*

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## BACKGROUND

This project took place in Spokane County, Washington during the Summer and Fall of 2021. Spokane Regional Transportation Council (SRTC) engaged service providers and members of historically excluded communities—including Community Health Workers; LatinX, Asian and Pacific Islander, immigrant, and rural communities; low-income, unhoused, and housing insecure families and individuals; and people with disabilities— in focus groups and key informant interviews facilitated by an external to understand their transportation experiences and priorities. The community engagement efforts helped to inform SRTC in developing their long-range transportation plan, *Horizon 2045*.

## METHODS

SRTC held a public meeting June 30, 2021 to introduce the agency, present context around metropolitan transportation planning, and offer an initial opportunity for community input. At the virtual meeting, participants viewed a brief video produced by Hamilton Studio and engaged in discussion. The Consultant emailed community members who attended the public meeting, asking whether they would be willing to provide additional information or arrange a group discussion. Based on their suggestions, additional community contacts were added to an outreach list and included in messaging about focus groups and interviews, following a “snowball” technique. The Consultant identified additional potential contacts to fill gaps, with a focus on populations that have historically been excluded from decision-making processes and who may be most likely to experience barriers to transportation (e.g., disabled individuals).<sup>1</sup>

The final outreach list included 30 community organizations. Three organizations did not have clear contact information, so the Consultant contacted 27 unique community organizations via email. Community organization partners were invited to participate in a key informant interview or to arrange a focus group discussion, depending on their interest and availability. Ultimately, the Consultant facilitated 4 guided interview and 4 focus group discussions. Due to COVID-19, all group discussions and 3 interviews took place virtually using Microsoft Teams. The consultant conducted one interview in person.

Interviews and focus groups followed an open-ended discussion guide.<sup>2</sup> The Consultant facilitated conversations with participants about transportation needs, barriers, and future priorities facing them or the populations they served. Community member participants were offered \$30 for their time. The conversations were not video or audio recorded. The Consultant recorded field notes and key quotations using Miro.

The Consultant analyzed the notes using an open coding technique, beginning with a start list of themes based on the discussion guide and then reviewing notes for additional common themes and key words.

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<sup>1</sup> Some prefer person-first labels (i.e., individuals with disabilities). This report primarily uses the term “disabled individuals” to highlight the social model of disability in which societal factors—rather than impairments—create challenges.

<sup>2</sup> The Focus Group guide is included at the end of this technical report.

## RESULTS

More than 35 individuals participated across focus group discussions and guided interviews, including Community Health Workers and individuals and organizations representing LatinX, Asian and Pacific Islander, immigrant, LGBTQ+, and rural communities; low-income, unhoused, and housing insecure families and individuals; and disabled individuals.

The primary themes to emerge from community conversations included:

- Destinations and routes
- Modes of transportation
- Barriers to transportation access and mobility
- Solutions to improve transportation access and mobility

These themes are further described in the following sections and specific stories and experiences are included when possible.

### Where are people going?

Generally, participating community members described going to many of the same common and expected locations: home, employment, shopping, school and child care, dining, and places of worship. Many individuals traveled to appointments, including appointments with medical providers, service providers, and the court system. Participants in multiple discussions identified natural destinations, such as parks and lakes, as important.

Specific routes commonly referenced by participants centered along the I-90 corridor as far as Medical Lake to the west and Coeur d'Alene to the east, though some participants lived in or traveled to other areas of the county including Deer Park and Colville.

### How are people getting around?

Public transportation, including Spokane Transit and ParaTransit, was frequently identified by participants as critical for accessing services and care. Certain community members preferred to find rides with family or friends due to unfamiliarity with local driving laws or fears about encountering customs enforcement agents. Many participants walked, rode bikes, or used scooters for recreation, exercise, and travel. A small number mentioned rideshare services, such as Lyft and Uber.

### What barriers and challenges to transportation do people face?

**Driving is not accessible for many individuals.** Cultural, community, family, and individual factors contributed to an individual's inability to drive. Examples included abusers who prevent individuals from driving or learning to drive; seniors and people with certain intellectual and developmental disabilities that prohibit safe driving; and cultural and language barriers that prevent individuals from other cultures (e.g., immigrants and refugees) from obtaining a license, insurance, and the necessary knowledge of local driving laws. Participants explained the ripple effect of a family member who is unable to drive: for example, family members often fill in as caregivers and help loved ones get to appointments. For individuals in rural communities, this caregiving can cost hours each day and lead to caregivers giving up

on their own activities and needs, increasing stress and changing family dynamics. Costs associated with driving, such as for fuel, also presented a barrier. Specifically, some individuals forgo car insurance due to cost and unfamiliarity with requirements, which then leads to increased stress and fears of deportation or other encounters with the criminal justice system. Structural and environmental factors, including kids playing in streets, potholes, and safety issues on US Highway 195 specifically, also presented challenges to safe driving for some participants.

### **Navigating and using public transit is time-intensive, costly, and inaccessible for certain communities.**

Participants across multiple discussion groups described the time burden of traveling by bus; one explained it could take up to 2-3 hours simply to arrive at their destination due to transfers and wait times. Certain communities lack access to public transportation, including “dead neighborhoods,” rural areas, and other neighborhoods outside the central urban core (e.g., Audubon neighborhood, 195 corridor). Some said that walking can often be faster than taking the bus, or that they are forced to walk when public transit does not meet their needs. Others described struggling to find transit options that fit their work schedules; the lack of options early in the morning, at night, and on Sundays meant some people “need to work around the bus schedule.” The impact of this added time spent commuting is significant for the communities engaged in this project and disproportionately burdens individuals who already experience barriers to optimal quality of life.

Individuals may be eligible for free bus passes for medical appointments and other needs, but participants explained that a two-hour pass does not offer enough time to complete travel due to reasons noted above, and that day passes for medical appointments are not flexible enough for general transportation needs. While some individuals received assistance payments (for example, for disability), those payments aren’t enough to cover public transportation costs. Some individuals may need to travel with a helper or caregiver, adding to travel costs. Overall, current options for reduced-fare public transportation are not meeting needs.

In addition to time and monetary costs, navigating public transportation can be confusing, frightening, and otherwise inaccessible for many people. For example, the “hectic” downtown bus plaza and public transit system is particularly distressing for individuals with neurodivergence. Disabled individuals and seniors may struggle to carry bags and groceries or find space for walkers and other mobility assistance devices. People traveling with multiple children may feel hesitant to take the bus, participants described. For others—such as those with mobility impairments—even walking to a bus stop and standing at a bus stop is physically unreasonable. People with sight impairment, for example, struggle to identify bus stops when they are marked differently (e.g., sometimes signs are on an STA pole, other times “seven feet in the air”).

For people from other cultures, the public transportation system can seem cold and overwhelming. Participants working at an organization that serves the LatinX community described busses in other countries becoming community spaces with salsa music, conversation, colors, and art, while Spokane’s busses were described as “sterile” and “like those cubicles in offices where there’s no community.” Some cultures may put less emphasis on timeliness or expect more flexibility from bus drivers, causing them to miss busses and experience long delays. Individuals who speak English as a second language and who may not read English struggle with knowing where bus stops are located, determining which bus to take, understanding how to pay for bus fare, and asking for directions and assistance. As one participant who works with immigrant and refugee communities explained, many newly arrived immigrants “don’t

even know what street they live on.” Fear of law enforcement and customs agents also prevents some of these communities from using public transportation. Some people may choose to stay home rather than access needed services; one participant emphasized, “[Undocumented] people have too much to lose.”

### **People need more public options to access medical care, social services, and other appointments.**

Participants in multiple discussions shared challenges with ParaTransit and similar services. The requirements to schedule rides (for example, requiring a doctor’s approval, and the timing and duration of available rides) lead some individuals to opt to take an ambulance to receive care so that they can also have secured transportation home. Further, ParaTransit only covers medical appointments, but participants shared many other reasons for needing to travel, including attending appointments with service providers and the court system.

**Safe bicycle and pedestrian infrastructure improves accessibility and mobility for all people.** As described earlier, nearly everyone walks or rolls for travel or recreation at some point. Participants suggested that many people believe biking in our region is dangerous due to a lack of protected bike lanes. Sidewalks with uneven surfaces and those lacking wheel chair ramps present significant barriers for seniors, people with mobility impairments, and those relying on wheels such as wheel chairs, walkers, and strollers. Even components designed for safety—such as crosswalks—can unintentionally put some individuals at risk. Participants in one group discussion identified specific challenges for individuals with sight impairment: inconsistent or narrow sidewalks (e.g., along Francis), garbage and recycling bins and scooters on sidewalks (e.g., along Wellesley), overgrown vegetation, and diagonal curb ramps (e.g., at traffic circles) make for unpredictable and unsafe travel; and the lack of accessible pedestrian signals at leading pedestrian interval intersections creates confusing signals about the safety of crossing. As a result, one participant summarized, “we don’t have the same opportunities.”

**Communities struggle with access when services and people are separated.** Community stakeholders said people want “what you need where you need it safely accessible.” Many of the barriers identified by historically excluded community members and service providers stemmed from transportation, services, and people existing separately, rather than being co-located. Without critical services—including employment, grocery stores, social supports, and medical care—and recreational opportunities in neighborhoods, individuals and families struggle to find transportation to these resources.

### **What solutions could be prioritized in the future?**

**Support safe, legal, accessible driving for those who want or need to drive.** Fixing potholes and rough roads and addressing safety concerns on and around major highways, such as 195, can help improve safety of our roads according to community stakeholders. Specific suggestions to improve accessibility for individuals from other cultures included identifying a community partner to teach culturally-responsive classes on driving and local laws, and working to find and provide low-level, basic insurance sold by a Spanish speaker.

**Make it easier to ride the bus than to drive alone.** Participants suggested improving bus routes to reduce travel times and increasing options at night, early morning, and on Sundays to support the many people who work outside of standard business hours.

**Ensure public transportation access is not tied to income.** Community stakeholders suggested obtaining grants to provide free public transit to all people, or free bus fare during peak travel times. Other specific suggestions included determining a sliding scale or more affordable option for low-income individuals and families, engaging partners to provide monthly bus passes through SSI and disability benefits, providing a caregiver bus pass option for those who require support, and providing day-passes rather than two-hour passes.

**Help reduce barriers and stress associated with using public transit.** Participants recommended hiring individuals or volunteers to help people navigate the bus system and understand basic rules or bus riding. Providing space for walkers, strollers, grocery bags, and carts on busses and creating more accessible bus stops (e.g., adding benches) can help improve accessibility for families and individuals with mobility impairment. To increase cultural responsiveness of public transportation, participants recommended working with Spokane Transit to provide cultural humility training for staff and drivers and to beautify busses and bus stops. For example, large colorful signs welcoming riders in multiple languages, images directing riders how to pay fares and ride safely, and representational art in bus stops can help increase comfort with public transportation according to community stakeholders. Finally, participants suggested finding ways to increase language access such as having volunteers on busses who speak multiple languages and developing an application in a variety of languages to help people understand routes, pronunciation of street names, and schedules.

**Find solutions for uncovered travel to services.** Overreliance on emergency medical services for transportation increases health care costs and draws resources away from acute, emergency medical needs. ParaTransit, medical cabs, and Special Mobility Services help increase access, but do not meet the needs of individuals who are traveling to non-medical appointments such as court appointments and meetings with service providers.

**Ensure all neighborhoods are safely walkable and bikeable.** Many participants recommended increasing protected bike lanes to reduce driving and promote safety as part of overall improvements to bike and pedestrian infrastructure. For pedestrian safety, community stakeholders suggested increasing the number and safety of crosswalks (e.g., along Division), using landscaping and tactile sidewalk design for sight-impaired walkers, and ensuring sidewalks are consistent, wide, protected, and free of obstacles. Walk audits can be useful tools for identifying barriers and needs in neighborhoods.

**Plan communities that concentrate services near people and transportation hubs.** The current system is not meeting the needs of community members who typically face barriers to accessing systems and services, which further widens gaps between BIPOC, disabled, low-income, rural, English-language limited, and migrant communities and wealthier, often whiter, counterparts. One participant explained, “people most affected by environmental injustice are most likely to use public transportation.” According to community stakeholders, certain communities lack resources such as grocery stores and social services, and public transportation options “don’t go where they need to go.” Other creative solutions already exist in the community in the form of mobile advocacy programs that “meet people where they’re at;” community and cultural centers offering services and resources such as food, books, and computer and internet access; Spokane Neighborhood Action Partnership’s neighbors on the go volunteer program, and transportation programs run by organizations such as The Arc and Catholic Charities.

## Limitations

Due to the “snowball” recruitment method and intention to hear from historically excluded communities, the interviews and focus groups should not be considered representative of the larger community, and findings from one group may not be generalizable to other similar groups (i.e., the experience of one housing provider does not reflect the experience of all housing providers). However, the results provide useful insight into barriers, needs, and priorities of community members. Finally, the COVID-19 pandemic prevented some organizations from participating or assembling focus groups. Future projects should strive to engage a diverse population throughout the planning process.

Discussion Guide

<p><b>Pre-Discussion</b></p>	<p><i>Welcome participants as they arrive and obtain verbal consent for participation as possible</i></p>
<p><b>Opening Remarks</b></p>	<p>Welcome Purpose Overview Process Overview Introductions</p>
<p><b>Facilitated Discussion</b> <b>Research Questions:</b></p> <ol style="list-style-type: none"> <li>1. What are the primary transportation <b>needs</b> in Spokane County, particularly for historically-excluded communities, such as BIPOC, seniors, people with disabilities and chronic health conditions, LGBTQ+, immigrants and refugees, and low-income households?</li> </ol>	<p><i>Take a moment to think about a typical day or a typical week in your life. Where do you go? When you leave home, do you get into a car? Walk to the bus stop? Then we're going to take about 5-7 minutes for you to work on your own: on a piece of paper/Miro board (in person/online), sketch out your day: where do you go? How do you get there? (Provide an example)</i></p> <ol style="list-style-type: none"> <li>a. <i>What are some of the places you go in a typical week? (Capture notes on flip chart or Miro)</i></li> <li>b. <i>How do you get where you need to go? (Capture notes on flip chart or Miro)</i></li> <li>c. <i>How well is this working for you? How satisfied are you with how you get where you need to go? (Capture notes on flip chart or Miro)</i></li> </ol>
<ol style="list-style-type: none"> <li>2. What are the primary transportation <b>barriers and challenges</b> in Spokane County, particularly for historically-excluded communities, such as BIPOC, seniors, people with disabilities and chronic health conditions, LGBTQ+, immigrants and refugees, and low-income households?</li> </ol>	<ol style="list-style-type: none"> <li>a. <i>What keeps you from getting where you want to go? Or what keeps you from being able to get where you want to go in the way you want to get there?</i></li> <li>b. <i>Are there places you'd like to go, but can't because of transportation issues?</i></li> </ol>
<ol style="list-style-type: none"> <li>3. What are the primary transportation <b>priorities for the future</b> in Spokane County, particularly for historically-excluded communities, such as BIPOC, seniors, people with disabilities and chronic health conditions, LGBTQ+, immigrants and refugees, and low-income households?</li> </ol>	<ol style="list-style-type: none"> <li>a. <i>What would make it easier for you to get around and get where you want to go?</i></li> </ol>
<p><b>Closing</b></p>	<p>How results will be used Opportunities for engagement Resource sharing Thank you</p>