What the Bronx Can Teach Us about Transportation Ethics for People with Disabilities

The lack of accessible public transportation for people with disabilities is nothing less than a human rights violation. This challenge is deeply significant to my family and I. My grandmother, simply referred to by our family as “Abuela,” lives in Washington Heights and is physically disabled, as she has mobility-related health issues and depends on a walker to move around outside of her apartment. Fortunately, my grandmother has support from a home attendant and her three daughters who all live in the New York City metro area. Furthermore, the MTA replaced 80-year-old elevators in the 181st Street station of the 1 line, allowing the station to reopen in December 2021 after being shuttered since December 2020 and allowing her to use the station, although she is still unable to use most stations (Saltonstall, 2021). Inaccessible public transit infrastructure is no mere inconvenience; it forces people with disabilities into dependence and poverty, and should be taken seriously as a great ethical concern of our time.

However, not every street or community has its disability needs met in NYC or the United States, and this is particularly true in the Bronx. Cities across the nation fail to provide sufficient access to public transportation for people with disabilities, and the Bronx serves as a case study of implications of those failures.

As Disability Scoop notes, 72% of New York City subway stations are not accessible by the standard of the Americans with Disabilities Act, also known as the ADA. This means that 338 of the 472 subway stations within the city are virtually out of reach for people with
disabilities (Bergal). The picture is even more stratified if one breaks data down by borough. The MTA website states that 47 out of 151 Manhattan stations are fully or partially accessible, roughly 31%; the Bronx, on the other hand, has a mere 14 out 70 stations considered accessible, exactly 20% (MTA Accessible Stations) (Subway Map). Even the Staten Island Railway, which is not factored in the subway station total, has an accessibility rate of about 24% as 5 in 21 stations claim to be accessible (Staten Island Railway, p. 9). By both percentage and raw number, the Bronx has one of the lowest rates of stations that are accessible by the standards of the ADA among the five boroughs.

This lack of ADA accessible subway stations is a paradigmatic example of what the social model of disability terms as disabling conditions. The social model of disability reveals that disability is a product of societal conditions, and that those conditions must change to better serve impaired people. This framework contrasts with the medical model of disability, which argues that disability is more than the biological condition of a person's body, an apolitical tragedy to be resolved with medical intervention (People With Disability Australia). Ultimately, the social model of disability concludes that the many harms that people with disabilities face are not inevitable biological misfortunes, but the consequences of society's choices. Through the framework of the social model of disability, one can see that the lack of ADA accessibility in subway stations is a disabling condition, which could be remedied by the renovation of stations citywide so that they are made more accessible.

Furthermore, there are many places which lack any subway access at all. In New York City, many areas are considered “transit deserts” due to their distance from a subway station. Transit deserts are most plentiful in Staten Island and eastern Queens, but they are present in the Bronx as well. Considerable swaths of the Bronx such as 3rd Avenue and White Plains Road
lack any train line to help residents travel to other neighborhoods. These transit deserts are mitigated by the bus network that covers ground that the subway system does not (Jaffe). That being said, the buses are far from an ideal method of transportation. According to the Bus Turnaround Coalition, 73% percent of bus routes in the city received a D or F letter grade on the basis of speed and reliability (Spivack). Even when the buses do come to the stop, the lack of bus lanes and trained operators means that buses aren’t as accessible as advertised (Evelly).

At the same time, much of the United States lacks even the option of mediocre public transportation. For most parts of the country, the automobile is the primary method of transportation. This presents a challenge for Americans with physical or mental disabilities, as it may not be feasible for them to operate a vehicle. People who do not drive must struggle to move through communities that were not designed for them. As Andrew Price from Strong Towns argues, “they are either a burden to their friends and family to escort them around, isolated at home and get out very little, have to rely on mobility services, or they tough it out and walk, cycle, or take transit in environments not suited to those forms of transportation” (Price). Furthermore, the expenses that come with car ownership place a further burden on the life of a person with disabilities (Price).

The subpar state of public transportation and car-dependency of the United States both represent disabling conditions. To utilize the framework of the social model of disability, the physical impairments of people with disabilities is far from the only factor that prevents their mobility. Instead, societal arrangements that are exclusionary for people with disabilities make life further difficult. Arranging communities around the optimization of automobile travel has many disadvantages, and the marginalization of those unable or unwilling to drive is among
them. Therefore, greater investment in public transportation to accommodate people with disabilities is needed.

Many people with disabilities in the United States are able to drive, although at a far lower rate than their nondisabled counterparts. According to a study conducted by the U.S. Department of Transportation (DOT) published in 2018, many people with disabilities still drive. Driving is the main method of transportation for many people with disabilities, although at a much lower rate than their non-disabled counterparts (Brumbaugh 2018). The amount of people with disabilities who use cars for transportation is far greater than the number of drivers with disabilities alone, as the DOT also accounted for individuals who commute by car as a passenger, which includes 23.5% of workers, 31% of non-workers, and 36.2% of people over 65 with disabilities commute as a passenger in a personal vehicle (Brumbaugh, p. 7-8). Price noted that car-dependent communities lead to the marginalization of those who cannot drive and may have to ask friends and family for assistance in mobility, which can strain personal relationships (Price). These societal arrangements constitute disabling conditions for people, as they amplify the impact of physical impairments, requiring people with disabilities to ask for help and face the inevitable complications that may arise.

Not all people with disabilities have access to cars, though. Even in the United States, some households are car-free, and that is especially true in New York City. Manhattan has the lowest household car ownership rate among the city’s five boroughs, as 76.6% of households are car-free, and the Bronx is the second lowest at 58.3%, closer to the citywide average of 54.5% (Tri-State Transportation Campaign). A factor behind the Bronx’s lower car ownership rate may not only be its public transportation access, but also its poverty. While the median income for car-free households is $69,630 for Manhattan and $40,630 for the city, it is only $27,400 in the
Bronx (Tri-State Transportation Campaign). According to data from the U.S. Census, New York’s 15th Congressional District, which covers the South Bronx and West Bronx, is the poorest district in the country (Santiago). The very same district also has the highest percentage of people of color, at 97% (Santiago). Lastly, the Bronx also has the highest percentage of people with disabilities of all ages in the city, and the highest percentage of people with ambulatory challenges (“Disability Matters,” p. 7, 37). Issues of poverty, race, and disability form a nexus of oppression in the Bronx.

People with disabilities face the intersecting issue of poverty throughout the United States. 51.4% of people with disabilities come from households where annual income is $25,000 or less, and people with disabilities are disproportionately unemployed compared to those without disabilities, as only 20% of self-reporting people with disabilities have a full or part-time job, compared to 76.6% of people without disabilities (Brumbaugh, p. 3). In the mobility context, physical impairment and unemployment are factors that make a person less likely to leave their home (Brumbaugh). In New York City, poverty is a particularly acute problem for people with disabilities. 34% of working-age people with disabilities live in poverty in the city, a higher proportion than in the United States and New York State, those being 26% and 30% respectively (DiNapoli, p. 3). Therefore, the city has a particularly pressing need for equitable transportation, as New Yorkers with disabilities are restricted in regards to income and mobility; as transportation options increase, so do areas where a person with disabilities may find employment.

Something that both the Disability Scoop and Washington Post article have in common is an emphasis on how mobility is connected to a sense of freedom (Bergal) (Alderton). The ADA has been noted by the Mid-Atlantic ADA Center as an extension of the Civil Rights movement
("History of the ADA"). The ADA and activism towards civil rights are linked as both recognize that federal government action is a prerequisite for equality. Rooted in the practice of addressing the needs of people with disabilities is the principle of liberty and justice that ought to be extended to all Americans.

Just as built environments can curtail the mobility of people with disabilities, they can also cause disabilities. For example, when communities are exposed to vehicle pollution, they experience an elevated risk of disabilities including asthma. According to an NYU study conducted from 2002 to 2005, children in the South Bronx are twice as likely to attend school near a highway than other parts of the city, which leads to students developing asthma (Fernandez). These findings demonstrate how the social model of disability relates to environmental justice, as both require changes in physical space for more equitable outcomes. Public officials are working to rectify these transportation inequities. At the federal level, Senator Chuck Schumer and Congressmember Ritchie Torres plan to place a cap on the Cross-Bronx Expressway to limit exposure from truck emissions (Cohen). Moreover, cities with legacy transit systems, those built before 1975, are leading the way with infrastructure improvements; such cities have pledged to use the billions of dollars the federal government has given to public transportation towards making stations more accessible (Bergal). The Bronx has already been the focus of MTA station upgrades, as the 170 Street station on the 4 line has recently been made ADA accessible (Sequeira). Fostering transit justice is a daunting task, but government authorities can make strides if they invest time, labor, and funding.

The disabling conditions within New York City’s public transit infrastructure, which are symptomatic of a broader national ill, expose the disproportionate impacts of unethical urban planning on marginalized communities. The phenomenon gestures towards the importance of
incorporating ethical frameworks into public policy. Unjust public transit infrastructure has the capacity to produce disability itself, both by causing physical impairments and by stripping citizens of the liberty provided by mobility. By the same token, accessible and equitable public transportation breaks down barriers for all Americans to engage in civic life. Ultimately, there cannot be liberty without mobility. Just as a seat on the bus was needed to move toward equality for Black Americans, so is a ride on the train needed to move toward equality for Americans with disabilities. Although the racial and disability rights movements may seem distinct, neither civil rights movement will be complete until there is accessible transportation throughout the United States.
Works Cited:


“History of the ADA.” Mid-Atlantic ADA Center, https://www.adainfo.org/content/history-ada.


