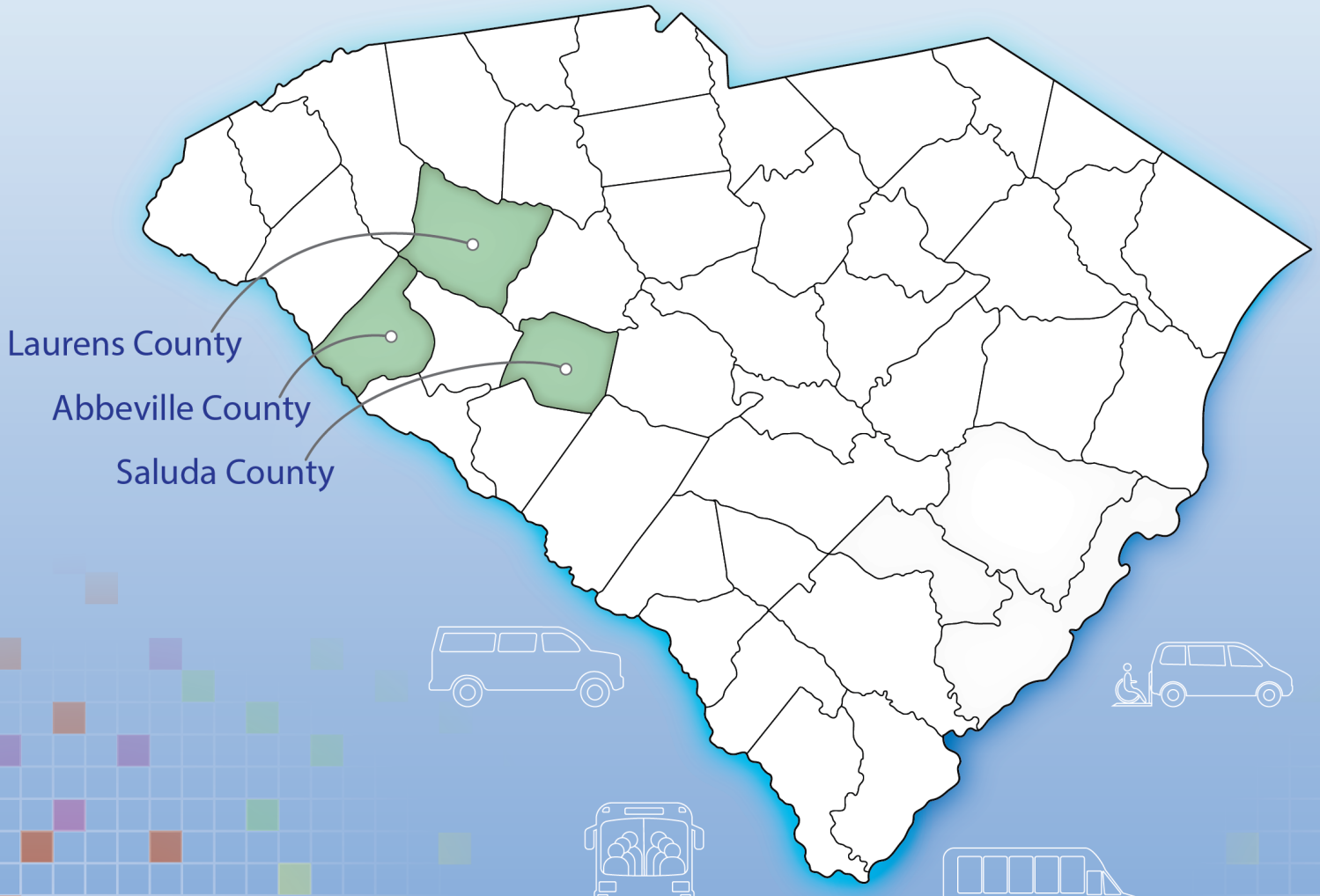
Expanding Mobility Options in Rural Western South Carolina:

Upper Savannah Transit and Mobility Feasibility Study for Abbeville, Laurens, and Saluda Counties

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Disclaimer Statement

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Acronyms

HNA	Health Needs Assessment
LRTP	Long Range Transportation Plan
MAT	McCormick Area Transit
SCDOT	South Carolina Department of Transportation
USCOG	Upper Savannah Council of Governments
WTI	Western Transportation Institute

Executive Summary

The Upper Savannah Council of Governments (USCOG) region in western South Carolina includes six counties: Abbeville, Edgefield, Greenwood, Laurens, McCormick, and Saluda. This report focuses on Abbeville, Laurens, and Saluda Counties, where transportation gaps have persisted for more than 15 years. Despite strong economic ties to manufacturing, healthcare, and retail sectors, these rural counties have no public transit system and limited mobility options. More than 75 percent of residents commute outside their home county for work daily, and over 2,300 households lack access to a personal vehicle. These conditions create barriers to employment, healthcare, education, and essential services, particularly for people with low incomes, older adults, young people, and people with disabilities.

Previous studies, including the 2010 Burton Center Transit Feasibility Study, identified critical transportation gaps in Saluda and Abbeville Counties. While some recommendations have been implemented in Greenwood County, the three study counties remain underserved. Stakeholder engagement conducted in 2025 reinforced that transportation is not simply a social service but a key driver of economic development and community resilience. Participants consistently cited transportation as a top barrier to accessing jobs, medical care, education, and civic life. They also highlighted the need for flexible, convenient service models and the importance of trusted local partners in building support for new mobility solutions.

Addressing these challenges requires practical, phased solutions that reflect rural realities and funding constraints. Near-term strategies should focus on low-cost, high-impact options such as volunteer driver programs for medical appointments and employer-supported carpool and vanpool initiatives. These approaches can deliver visible benefits while building trust and momentum for future investments. An emphasis on regional coordination would be part of the near-term strategies as well. Over the medium term, mobility management, and exploration of microtransit services will be essential to expand coverage and improve convenience. By starting with trusted partners and pilot programs, the region can demonstrate value, overcome skepticism, and lay the foundation for a sustainable, integrated mobility network that strengthens workforce access, health outcomes, and quality of life across all three counties.

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1 Introduction

The Upper Savannah Council of Governments (USCOG) region covers six counties in western South Carolina: Abbeville, Edgefield, Greenwood, Laurens, McCormick, and Saluda. Located near the South Carolina and Georgia border, these rural counties have economies deeply invested in manufacturing, transportation, warehousing, health care, and retail trades. This study explores the feasibility of rural transit services and mobility options in Abbeville, Laurens, and Saluda Counties, which currently have limited transportation choices and no rural public transit. More than 75% of residents in each of these counties leave their county for employment daily (77.8%, 75.9%, and 79.5% respectively).[1] Figure 1 shows a map of the study area. While Greenwood County is not technically part of the 3-county study area, it is included in much of the analysis due to its central location and importance to the region.

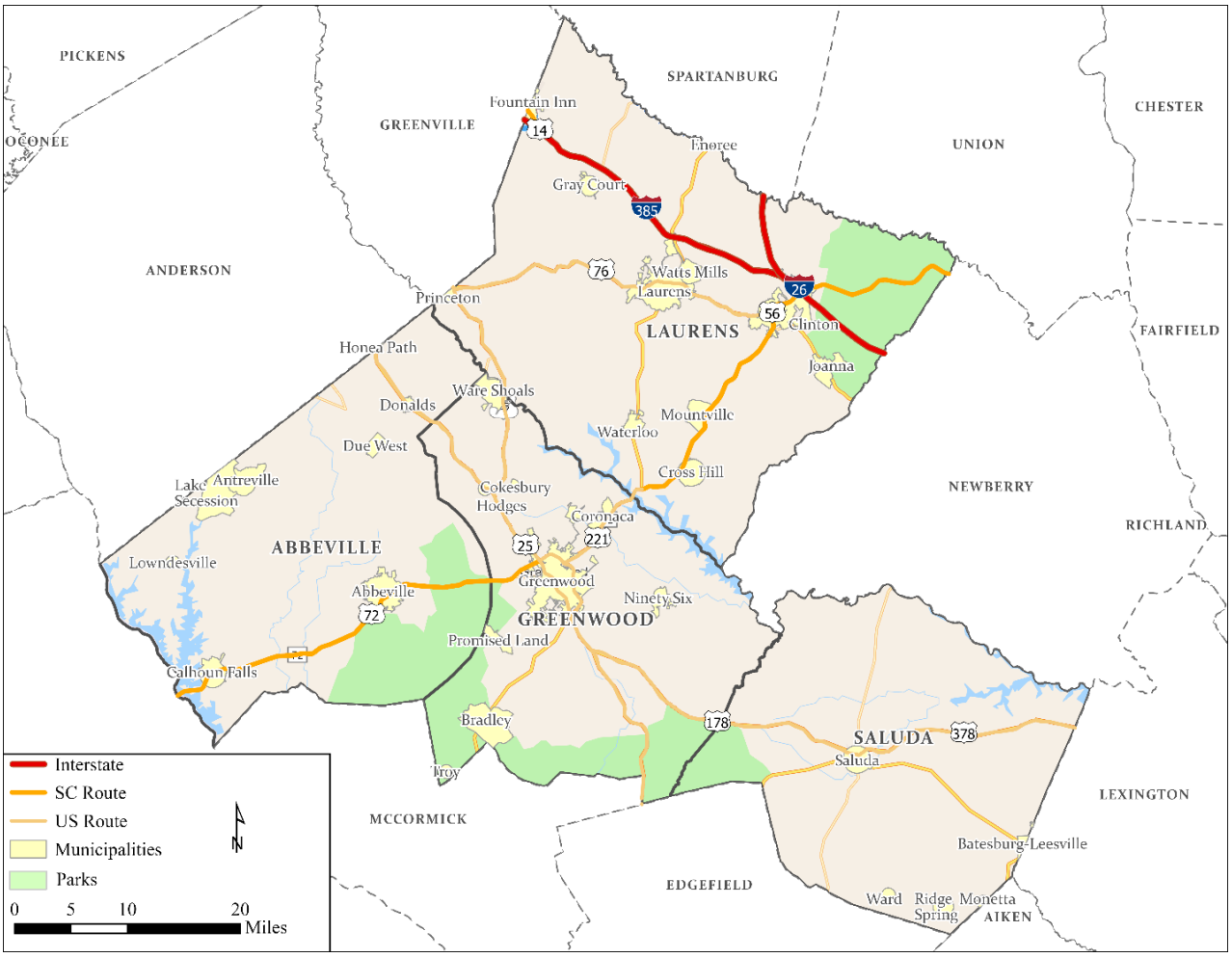


Figure 1: Study area map of Laurens, Abbeville and Saluda Counties, South Carolina

[1] U.S. Census Bureau – LEHD on The Map, Inflow/Outflow Job Counts, 2021. https://onthemap.ces.census.gov/ .

More than 2,300 households across the three-county area do not have access to a personal automobile. This represents 6.53% of households in Abbeville County, 4.97% of households in Laurens County, and 5.13% of households in Saluda County. [2] Establishing or enhancing public transportation services or other transportation options would expand workforce participation and access to essential services for residents, without requiring automobile ownership. Current planning efforts echo an ongoing and growing need for additional mobility and transportation services for Abbeville, Laurens, and Saluda Counties. The most recent Comprehensive Economic Development Strategy Objective 6.1 seeks to support the development of an efficient and affordable public transit or coordinated systems within the region and connections to nearby urban centers.

The Western Transportation Institute (WTI) and the National Association of Development Organizations (NADO) provided technical assistance in collaboration with the USCOG. WTI began background review in early 2025, worked with the USCOG to develop a project advisory committee in spring 2025, conducted online stakeholder interviews from March through June 2025, and completed a site visit and further stakeholder engagement in June 2025. Data analysis and report writing occurred from July through December 2025, and a draft report was submitted in January 2026.

1.1 Background

Researchers reviewed local plans and documents to understand the needs and history of transportation planning in the region. Several sources demonstrate the need for and interest in public transportation in these rural counties. Below is a list of documents reviewed, followed by highlights from each that are relevant to this study.

1. Momentum 2050 Moving South Carolina Forward (May 2025)
2. Upper Savannah COG Reports (2024)
3. Upper Savannah Council of Governments Long Range Transportation Plan 2020-2040 (2023)
4. Community Health Needs Assessments (HNA)
    - Self-Regional Healthcare & Edgefield County Healthcare Community HNA (2022)
    - South Carolina State Health Assessment
5. Upper Savannah Council of Governments Comprehensive Economic Development Strategy 2022-2027
6. Upper Savannah Regional Transit and Coordination Plan (2014)
7. Transit Feasibility Study for Abbeville, Greenwood, and Saluda Counties, South Carolina Final Report (2010)

Momentum 2050 Moving South Carolina Forward (May 2025)

This document states, “A strong transit system supports economic growth and improved quality of life. Public transportation provides people with an option for safe access to employment,

[2] Table B25044 ‘Tenure by Vehicles Available’, U.S. Census Bureau – American Community Survey, 2022 1 Year Estimates. http://data.census.gov.

education, community resources, medical care, and recreational opportunities. It not only improves the quality of life for thousands of South Carolinians who use public transportation each year, but also provides access to local businesses for patrons and the workforce. Many companies are expanding or relocating to South Carolina, with as many as half of these new jobs coming to rural areas; as a result, rural transportation will be a key component of transit in South Carolina. Solutions are also needed for an increasingly older population who are choosing to "age in place." This will require the state to address the public transportation demands of this growing senior population." (SCDOT, 2025)

Upper Savannah COG reports (2024)

The USCOG reviews and ranks transit grants from regional providers and forwards them to the South Carolina Department of Transportation (SCDOT). The USCOG continues to pursue grants and partnerships to expand transit in all counties and throughout the region, and is central to the success of developing more transportation options in the region.

Aging & Disability Resource Center (ADRC) Services provides, coordinates, and contracts for services to meet the needs of the Upper Savannah Region's senior population. Contracted services include transportation, home-delivered meals, congregate dining with activities, home care, and health and wellness promotion. Based on a summary of fiscal year 2024 aging services related to transportation:

- Laurens County reported an average of 56 seniors per month who received transportation
- Abbeville County reported an average of 21 seniors per month who received transportation
- Greenwood County reported an average of 92 seniors per month who received transportation
- Saluda County reported an average of 15 seniors per month who received transportation

Across the three-county study area, **an average of 92 seniors received transportation per month** (56+21+15) plus 92 in Greenwood County, for an average of 184 seniors per month receiving transportation.

Upper Savannah Council of Governments Long Range Transportation Plan (LRTP) 2020-2040 (2023)

Public transit is a key element of the USCOG LRTP. Section 7.1 states, "Rural public transportation presents a unique challenge. Long trips and low population densities mean that it is a challenge to get sufficient ridership to support transit routes. However, the lack of transportation options combined with the prevalence of elderly and low-income people in many rural communities means that there is a need for such a service."

Community Health Needs Assessments (HNA)

The Self-Regional Healthcare & Edgefield County Healthcare Community HNA (2022) report that in addition to lack of insurance, transportation and a struggling economy were also identified as barriers of access to care. Additionally, the South Carolina State Health Assessment states that

a lack of transportation options impacts economic and health care costs and is a barrier to accessing health care, especially for disadvantaged people and those living in rural areas.

Upper Savannah Council of Governments Comprehensive Economic Development Strategy 2022-2027

Objective 6.1 calls for supporting the development of an efficient and affordable public transit system or coordinated systems within the region and to connect to nearby urban centers.

Upper Savannah Regional Transit and Coordination Plan (2014)

This plan was based on information from transit agencies for FY 2009, 10 and 2011. The two public transit agencies that provide service in the Upper Savannah region are:

1. **Edgefield County Senior Citizens Council** operates a coordinated public transportation system with the county. The agency provides services to older adults, people with disabilities, people who are insured by Medicaid, adult day center passengers, residents of assisted living facilities, and Piedmont Technical College students.
2. **McCormick County Senior Center** provides public transportation throughout McCormick County, including transportation for older adults and people insured by Medicaid.

No transit currently exists in Abbeville, Laurens, or Saluda Counties. Public transit services are limited to residents of McCormick and Edgefield County. Taxi service is available to some extent in the City of Greenwood and in Saluda. A large park and ride facility is being built for the North Augusta area, located at I-20 and U.S. 25, just south of the Edgefield County line in urbanized Aiken County. In the future, bus service from the Upper Savannah region could connect to the park and ride for employment opportunities.

Transit Feasibility Study for Abbeville, Greenwood, and Saluda Counties, South Carolina Final Report (2010)

A Burton Center study conducted 15 years ago identified a critical lack of public transportation in Saluda and Abbeville Counties. The area had only minimal services provided by operators in neighboring McCormick and Edgefield Counties, a gap that persists today. While several Human Service transportation operators serve the area, their service is limited to their defined populations. The qualitative and quantitative assessment indicated populations within the community were underserved by transportation, including people living on low incomes, adults over the age of 65, children and teens, people living with a disability, and people from diverse racial and ethnic backgrounds. The study recommended the formation of a Regional Transportation Management Association (RTMA), hiring a mobility manager, and initiating On-Call services for the three counties. While some of the study's recommendations have been implemented in Greenwood County, the other counties still lack transit and transportation options.

In summary, several previous studies have established there is a need for transportation options in the study area counties. This study will focus on the feasibility of transportation options to help meet existing needs.

1.2 Report Organization

The report is organized into four chapters: Chapter 2 reviews transportation needs, employment and demographic characteristics, and summarizes stakeholder engagement. Chapter 3 describes various transit and mobility options that can help meet transportation needs in the area. Chapter 4 presents an implementation plan and next steps.

2 Identifying Transportation Needs

This section summarizes employment characteristics and demographic data that are used to assess transportation needs to estimate transit ridership demand (NRTAP 2022). It identifies populations more likely to need transit or other mobility options. This includes people aged 65 and older, people with low incomes, people living in households without a car, and people with disabilities.

2.1 Major Employers

The USCOG compiled estimates of major employers and their workforce using publicly available online data in July 2025, shown in Table 1. Figure 2 shows the locations of these employers.

Table 1: List of major employers and estimated number of employees in the study area

Abbeville County		**Saluda County**	
1. Sage Automotive Interiors, Inc.	400	1. Amick Farms	2100
2. Flexible Technologies LLC	375	2. Titan Farms	450
3. Abbeville County	216	3. Palmetto Gourmet Foods	300
4. ACS Manufacturing Inc.	157	4. Saluda Nursing Center	205
5. Stoll Fireplace Equipment Inc.	140	5. Best Dressed Chicken	205
6. West Carolina Communications LLC	131	6. Valley Proteins	160
7. East Teak Fine Hardwoods	120	7. SC Pet Food Solutions	100
8. Global Refrigeration Inc.	110	8. Quality Stitching	90
9. Abbeville Area Medical Center	75		
10. Reelco of Abbeville Inc.	75		
Laurens County		**Greenwood County**	
1. ZF Transmissions	2200	1. Self Regional Healthcare	2754
2. Yanfeng Automotive Interiors	860	2. Carolina Pride Foods, Inc	938
3. Sterilite Corporation	675	3. Capsugel Mfg Technologies	600
4. Walmart Distribution	670	4. Lander University	553
5. Presbyterian College	374	5. Piedmont Technical College	521
6. Prisma Health Laurens Cty Hospital	335	6. Cardinal Health	500
7. Teknor Apex	287	7. Greenwood County	496
8. D&W Fine Pack	260	8. Ascend Performance Materials	485
9. CeramTec North America	224	9. Burton Center	425
10. CCL Label	150	10. VELUX Greenwood, LLC	380
11. Laurens Electric Co-op	150	11. GLEAMNS Human Resources Commission, Inc	334
12. Alupress LLC	148	12. Wesley Commons	325
13. Brawo USA	53	13. Fujifilm Personalized Photo	300
		14. Colgate-Palmolive Co.	300

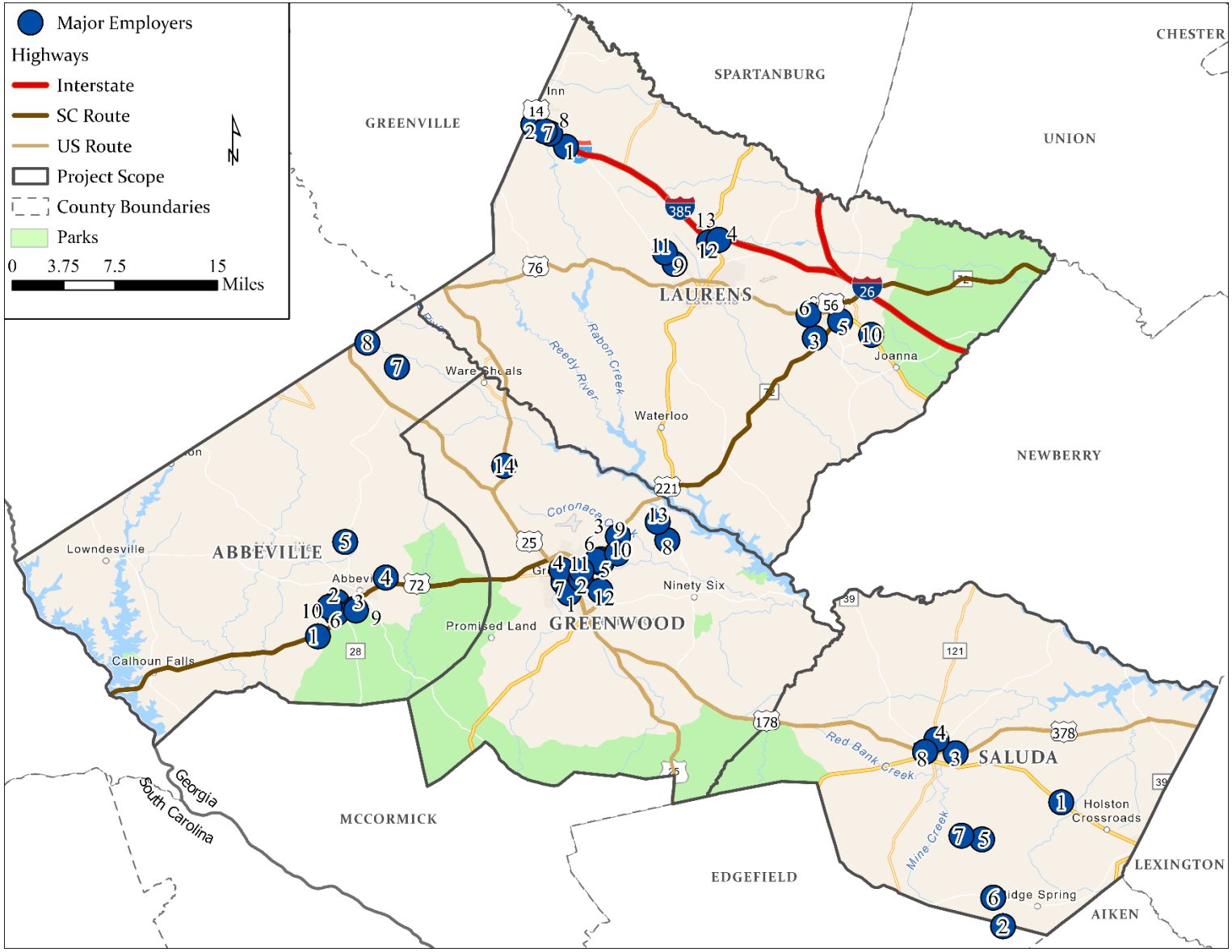


Figure 2: Location of major employers in the study area

Figure 2 shows that there are clusters of large employers in each of the three study area counties. Greenwood County's employers were included due to its central location among the study area counties. Large employers with over 100 employees are good candidates for ridesharing programs such as vanpool or carpool (see Section 3.5). Employers located in close proximity to each other may consider working together to organize rideshare programs.

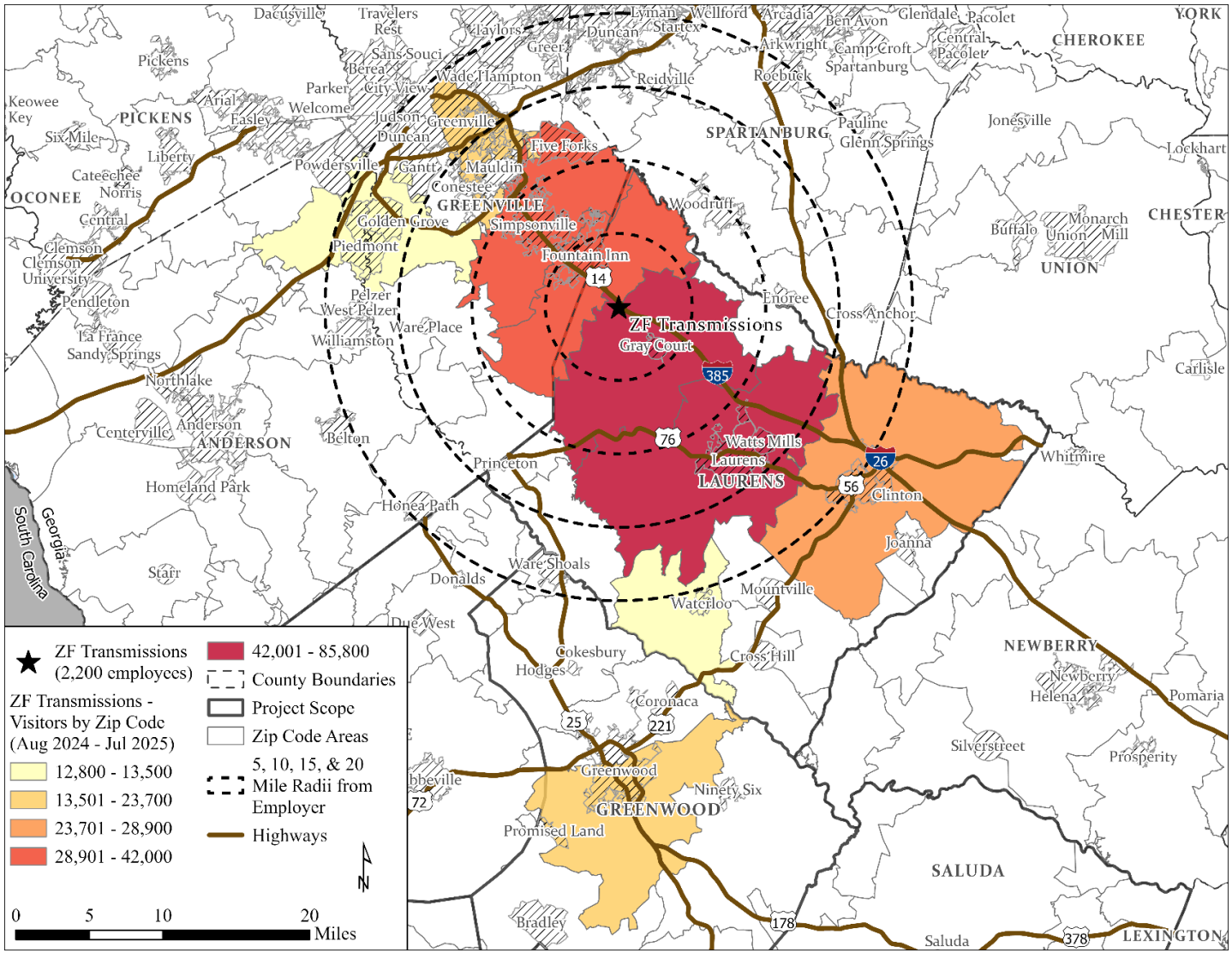
Laurens County provided data produced by their Placer AI subscription to analyze visitor patterns by zip code for its four largest employers. According to www.placer.ai , this data is collected from mobile devices to form a representative sample of the U.S. population. The data is then aggregated to estimate visits to any location in the U.S. Assuming most visitors are employees, this data can be useful to identify people living around 20 miles or more from their workplace, prime candidates for rideshare programs.

Figure 3 through Figure *6* were created using Placer AI data and represent visitors traveling to four large employers in Laurens County.

Darker colors represent areas with more visitors and lighter colors represent areas with fewer visitors.

The dashed circles represent the distance from the workplace in 5-mile increments, indicating 5, 10, 15, and 20-mile radii from the workplace.

Note: Most of the figures represent data for the period from August 2024 through July 2025, except for the Walmart distribution center (Figure 5), which represents data from a six-month time period from February 2025 through July 2025.



The highest number of visitors (42,001-85,800) to ZF Transmissions were from areas south and east of the workplace. While many visitors are from within 15 miles, a significant number are coming from areas around Clinton (23,701-28,900), about 20 miles away, as well as from Greenwood (13,501-23,700),over 25 miles away, which may be target locations for rideshare (vanpool or carpool) programs.

Figure 3: ZF Transmissions visitors by zip code (Aug 2024-Jul 2025)

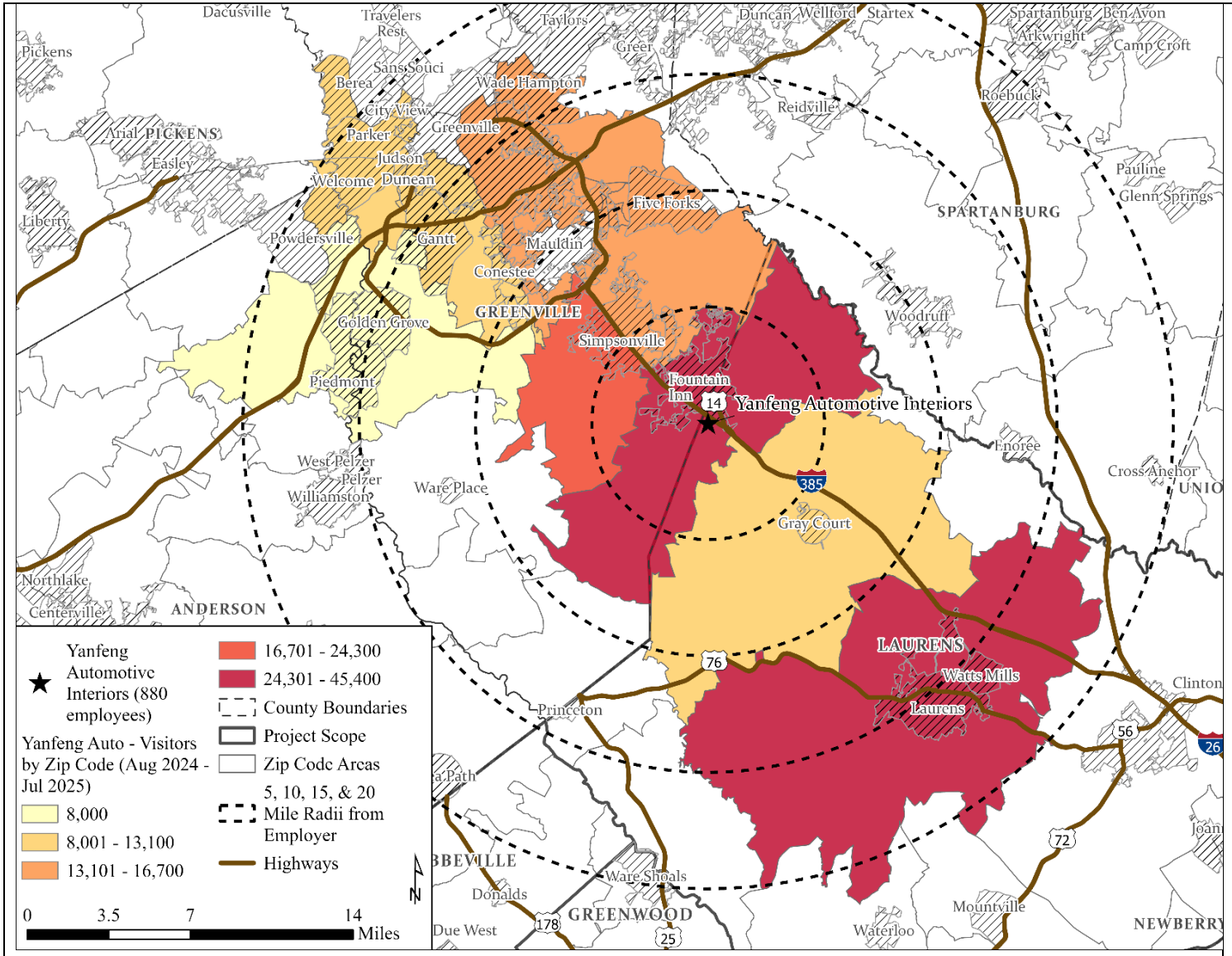


Figure 4: Yanfeng Automotive visitors by zip code (Aug 2024-Jul 2025)

Figure *4* shows visitors traveling to Yanfeng Automotive Interiors (880 employees), with highest visitation coming from within a 5-10 mile radius and from Laurens and Watts Mill areas between 15 and 20 miles from the workplace.

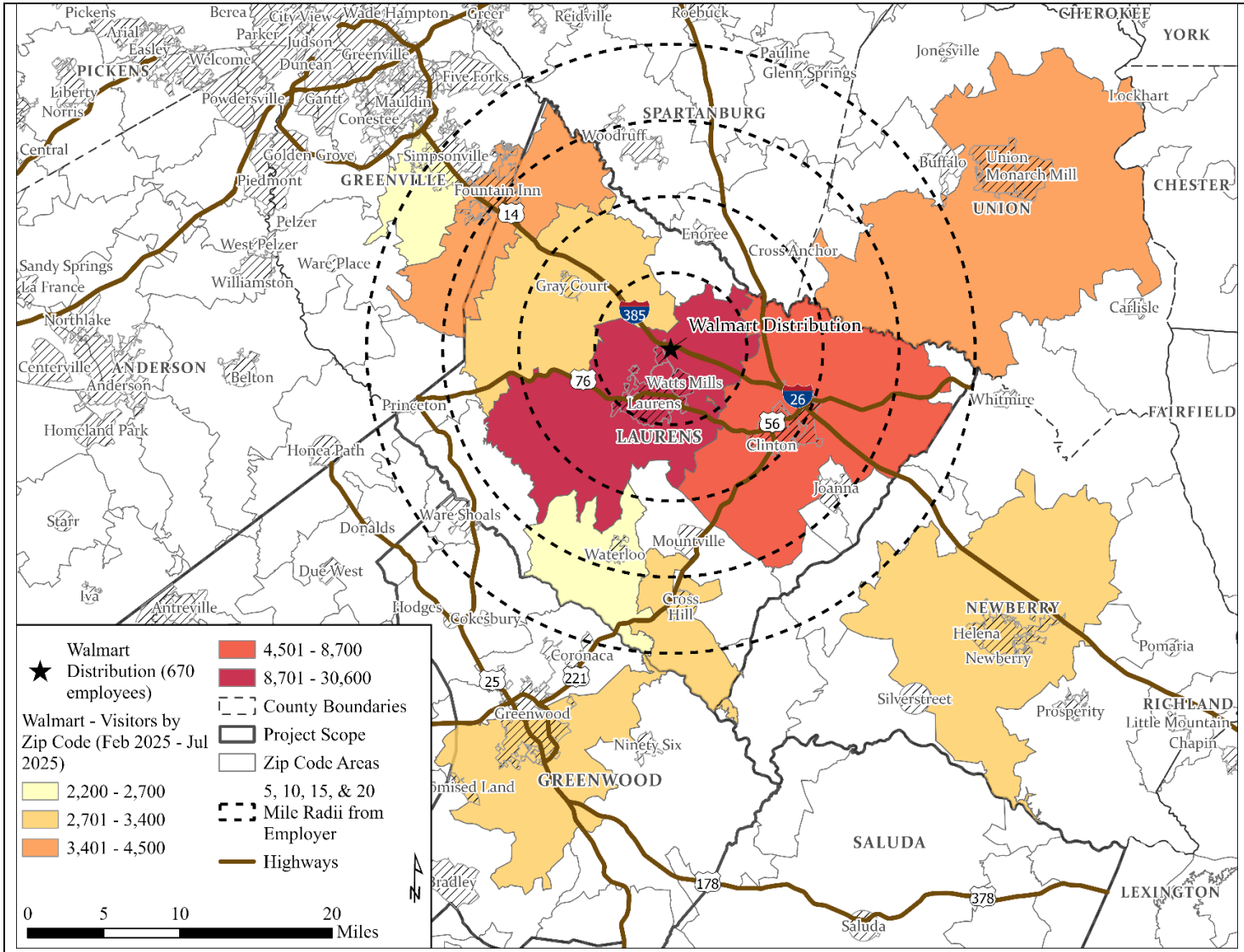


Figure 5 shows a map of visitors to Walmart Distribution Center (670 employees) with highest visitation areas within 10 miles, though a moderate amount of people are coming from the Union area over 20 miles away.

Figure 5: Walmart Distribution visitors by zip code (Feb 2025-Jul 2025)

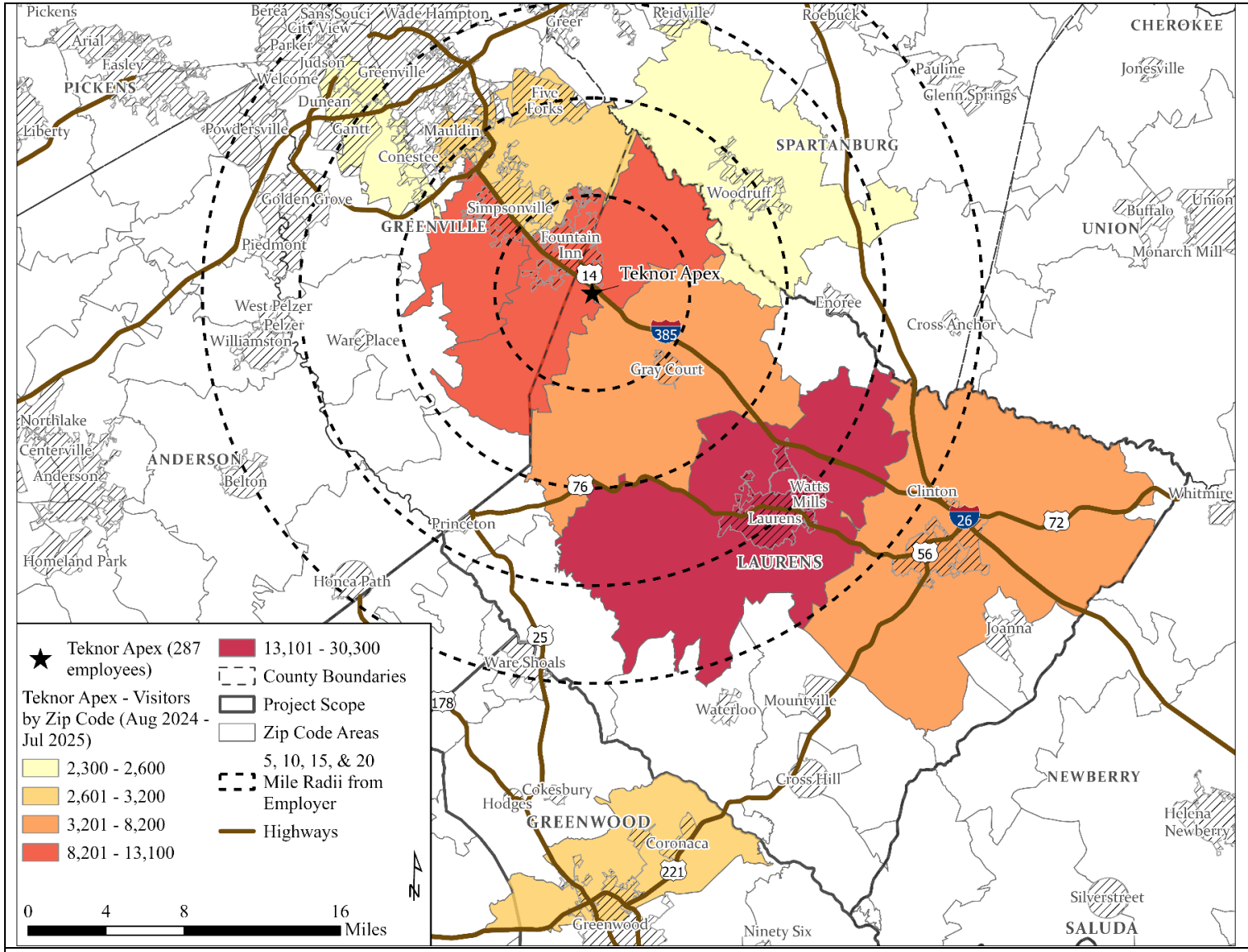


Figure 6: Teknor Apex visitors by zip code (Aug 2024-Jul 2025)

Figure *6* shows a map of Teknor Apex (287 employees), with highest visitation from Laurens and Watts Mill, around 15 miles from the workplace, followed by Clinton, over 20 miles away.

2.2 Demographics and Transportation Disadvantaged Index

Figure 7 through Figure 10 represent the study area's demographics by census tract of populations more likely to need transit or other transportation options. These include:

- Percentage of population age 65 and older
- Percentage of population living below poverty level
- Percentage of households with no vehicles
- Percentage of the population with a disability

Given that Greenwood County is in the center of the three study counties, it was included in this mapping process. To create Figures 7 through 10, the four-county average for each target population was calculated. The lightest color on each map represents census tracts that are at or below the four-county average. The darker colors represent census tracts with a range above the 4-county average, indicative of areas where a higher need for transportation is likely to exist. Note: The 4-county averages are indicated with an asterisk in the map legends.

Figure 11, the Transportation Disadvantaged Composite Index Map combines data from the previous four maps into one index. The dark red area represents census tracts where people are likely to have the highest need for transportation (5.59-7.30 index) which includes portions of the communities of Greenwood, Abbeville and Laurens. Data for Figures 7 through 11 is from the American Community Survey 2023 5-Year Estimates.

For this analysis, the project team calculated the transportation disadvantaged index for each of the 51 census tracts in the four counties. Table 2 shows the population and number of census tracts in each county. Laurens County has 20 tracts, reflecting its larger population, while Saluda County has just 6 Census Tracts, reflecting its lower population.

Table 2: Population and number of census tracts for study area counties (2023)

County	Population	Number of Census Tracts
Abbeville	24,352	7
Greenwood	68,329	18
Laurens	67,904	20
Saluda	18,958	6
Totals	**179,543**	**51**

Next, the team calculated the ratio of of target population percentage for each census tract to the four-county area average percentage, which results in an index, where:

- A value of 1 indicates the census tract target population percentage is equal to the 4 county average target population percengage.
- Values below 1 indicate that there is a lower percentage (i.e. less need) in that census tract compared to the study area, and
- Values greater than 1 indicate a higher % (i.e. more need) in that census tract compared to the study area.

For each census tract, the index values of each population group were combined to create a total needs index, where higher values indicate more potential need for transportation. A sample calculation for one census tract in Abbeville is shown in Table 3.

Table 3: Sample calculation for transportation disadvantaged index

	% Age 65+	**% Households w/ No Vehicle**	**% Below Poverty**	**% with a Disability**	**Total**
Four County Average	20.18%	6.25%	17.05%	14.58%	
Census Tract 9505 in Abbeville County	23.40%	15.60%	19.00%	18.20%	
Ratio of Census Tract/ Four County Average	1.16	2.50	1.11	1.25	**6.02**

Data from American Community Survey 2023 5-Year Estimates.

Figure 11 shows the results of the Transportation Disadvantaged Index analysis for the 51 Census Tracts in the study area. Index values range from a low of 2.18 to a high of 7.30. Higher values indicate locations where there are higher populations of people at risk for being transportation disadvantaged (age 65+, households with no vehicles, living below poverty level and people with disabilities).

This analysis provides a general indication of areas where “transportation disadvantaged” people live who may experience the greatest benefit from increasing transportation options. This information should be supplemented by input from community representatives who have a deeper knowledge of need, as discussed in Section 2.4. The transportation disadvantaged index shown in Figure 11 should be considered as indicative of needs across the area but not strictly interpreted in terms of magnitudes.

In summary, this demographic data demonstrates there is a significant need for transportation options in all three of the study area counties.

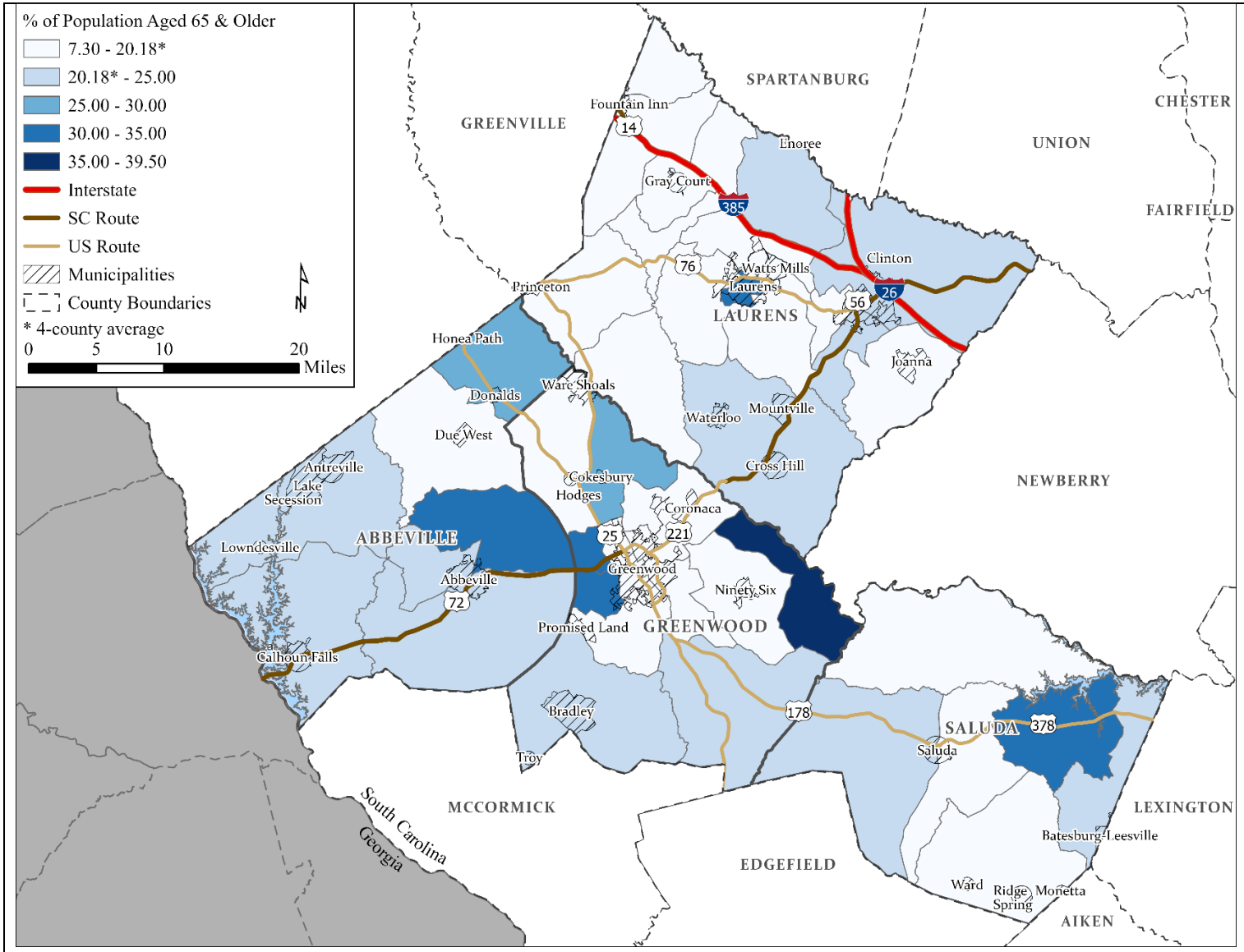


Figure 7 shows high (35-39.5%) population aged 65+ in Greenwood County north and east of Ninety-Six. The next highest (30-35%) aged 65+ are distributed around the town of Laurens, Saluda County (along 378), and parts of Abbeville and Greenwood Counties.

Figure 7: Percentage of population aged 65+

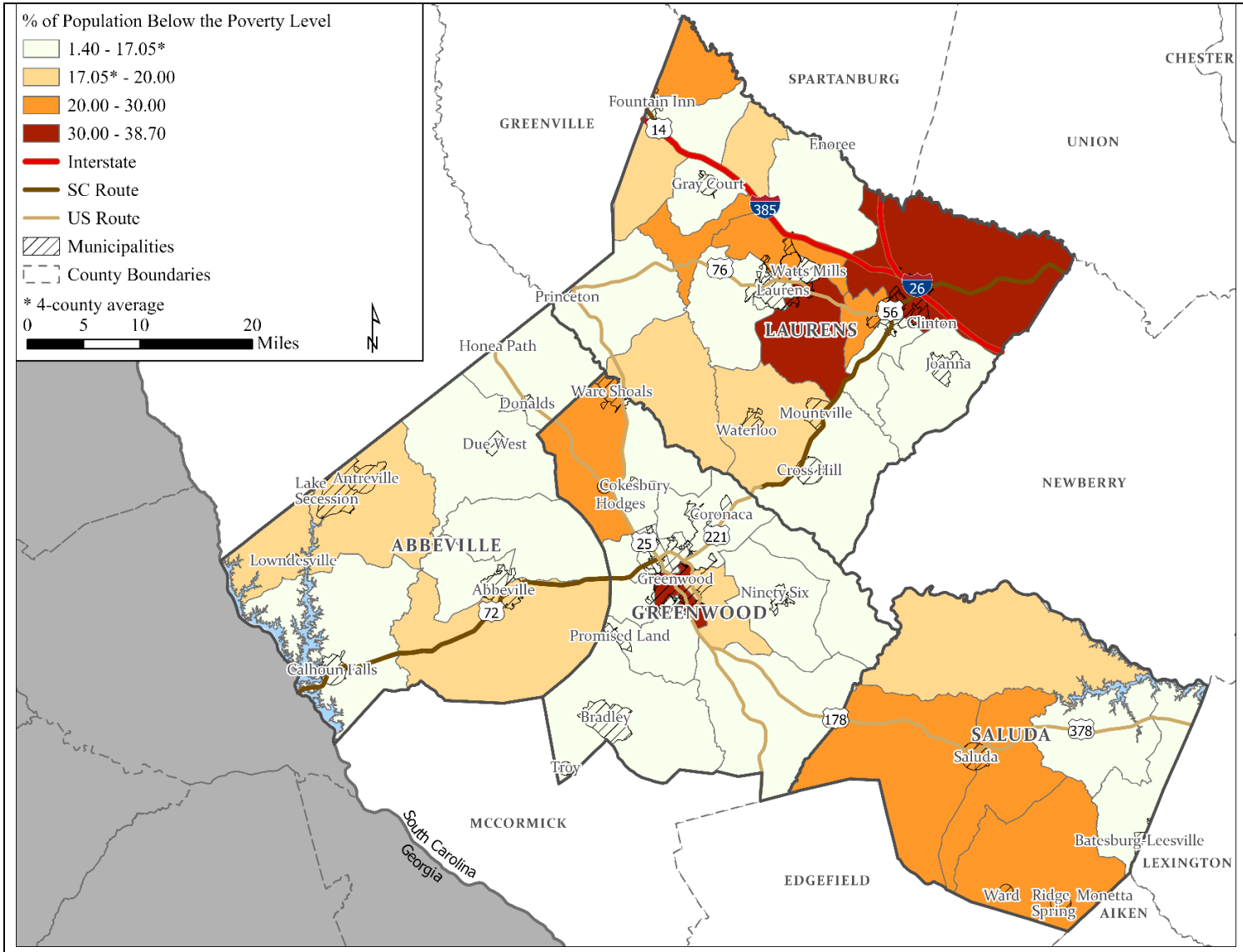


Figure 8 shows the highest percentages of populations below the poverty level (30-38.7%) are in census tracts within the town of Greenwood, adjacent to and south of Laurens, and in northeast Laurens County.

Figure 8: Percentage of population living below poverty level

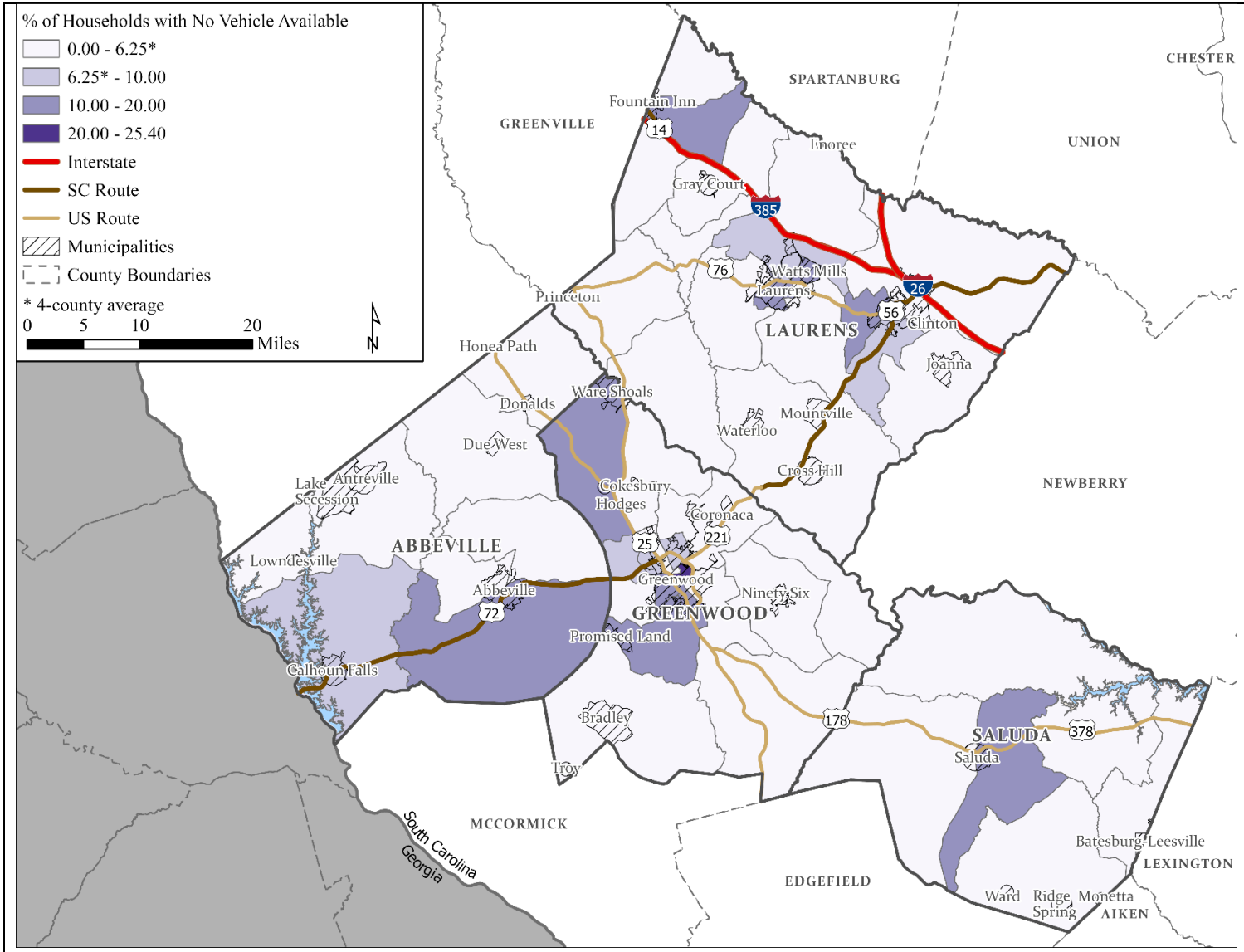


Figure 9: Percentage of households with no vehicle shows the highest percentage (20-25%) is in the town of Greenwood. There are several census tracts where 10-20% of households have no vehicles in various locations in Saluda, Abbeville, and Laurens Counties.

Figure 9: Percentage of households with no vehicle

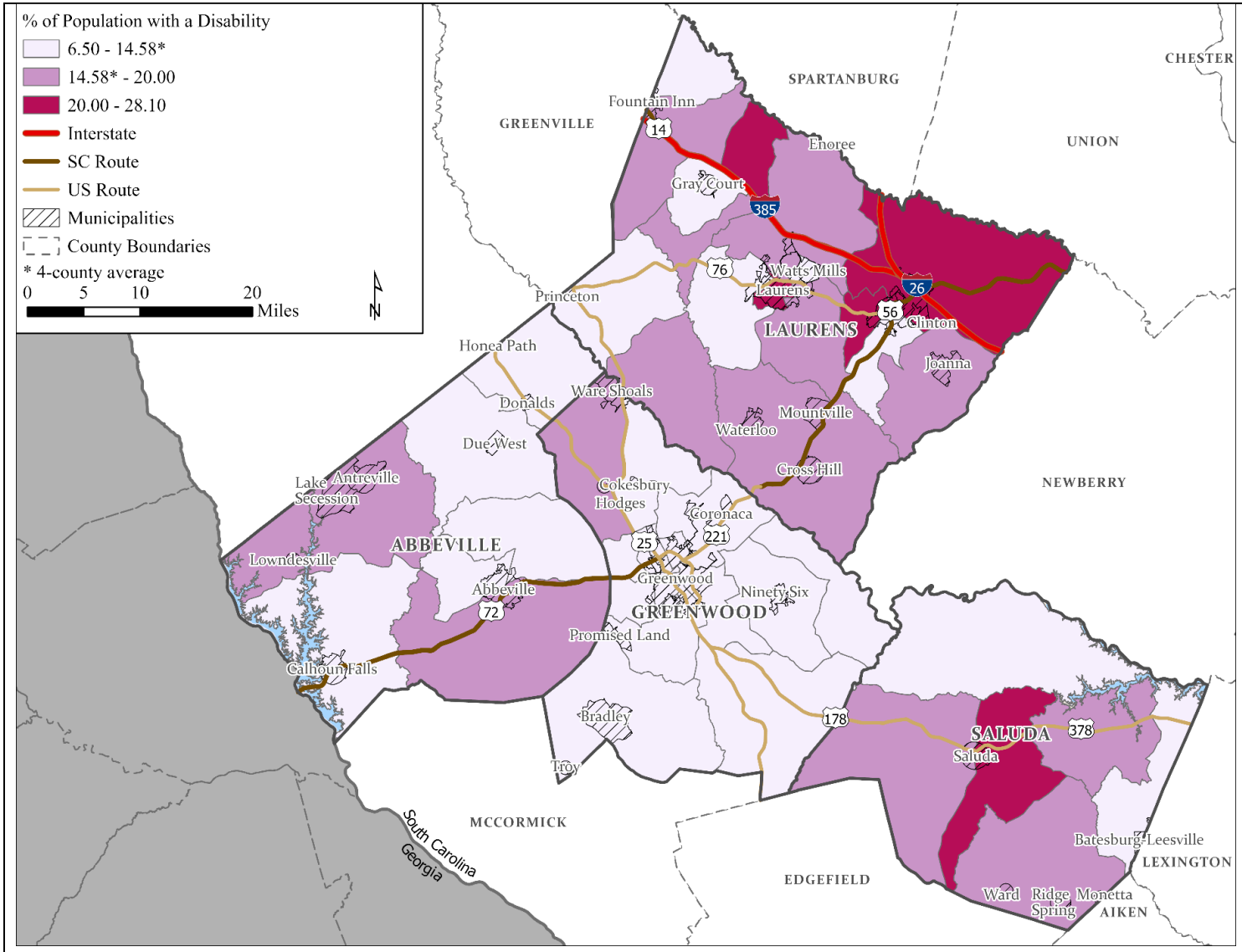


Figure 10: Percentage of population with a disability shows the highest percentages (20-28%) are in Saluda, and areas near the town of Laurens, north of Hwy 385 near Gray Court, and in northeast Laurens County.

Figure 10: Percentage of population with a disability

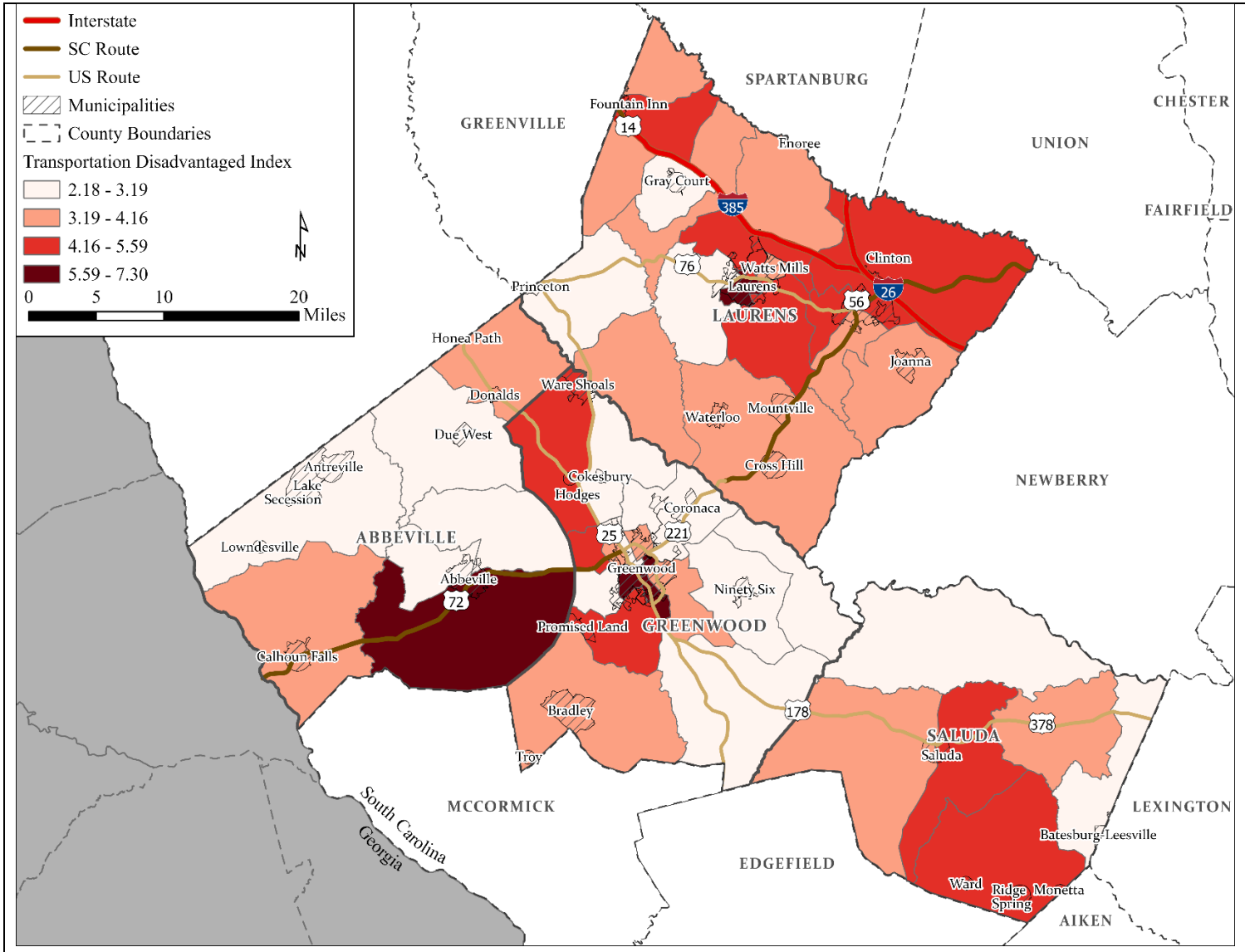


Figure 11 shows where people may have the highest transportation needs based on a composite index and include the census containing portions of Abbeville, Greenwood and Laurens.

Figure 11: Transportation disadvantaged composite index map

2.3 Existing Transportation Resources

This section describes existing transportation resources in the region, focusing on demand-response services and other options currently available to residents. These trips usually require reservations and may accommodate multiple passengers in the same vehicle (Momentum, 2050 page 39). Transportation options in the greater area include:

- **McCormick Area Transit (MAT)** offers low-cost public transportation in McCormick County. It serves McCormick County, Greenwood, Edgefield, Aiken, and Augusta, Georgia. It is operated by McCormick County Senior Center and serves Medicaid recipients, the elderly, and the general public. MAT advises calling 2-3 business days ahead to schedule a trip. MAT provided service in Abbeville County from November 2021 through December 2023, utilizing the Rural Transportation Association Program (RTAP), Community Rides Federal Grant program and SMTF funds. The awarded Community Rides Federal Grant expired on December 31, 2022; and the State Mass Transit Funds (SMTF) in the amount of $150,000 expired Dec 31, 2023.
- **Peach Blossom Express** provides public transportation services anywhere in the Central Savannah River Area (CSRA), which includes Edgefield, Saluda, and McCormick Counties. It is operated by the Edgefield County Senior Citizens Council along with the County. It provides service to all, including older adults, people with disabilities, people insured by Medicaid, adult day center participants, residents of assisted living facilities, and Piedmont Technical College students.
- **Aging & Disability Resource Center (ADRC) Services** work alongside Area Agency on Aging across the 3-county study area and provide some transportation to seniors and people with disabilities. Across the 3-county study area, an average of 92 seniors received transportation per month. In addition, an average of 92 seniors per month received transportation in Greenwood County.
- **Newberry County Council on Aging** offers transportation to Greenwood and Saluda. Transportation must be arranged through LOGISTICARE at least 3 days prior to participants' medical appointments.
- Two Disabilities and Special Needs Boards provide Title IX transportation services for eligible clients in their own service area, respectively. Both use agency-operated vehicles but may contract out for services as needed, although if the vehicles were obtained with FTA Section 5310 funds, there may be restrictions on their use.
    - **Laurens County Disabilities and Special Needs** serves Laurens County,
    - **The Burton Center** serves the other five counties in the region.
- Several private transportation companies, including taxicab and shuttle companies, provide specialized services for individuals and groups.
- Greyhound bus does not serve the USCOG region, but has locations nearby in the cities of Anderson, Greenville, Spartanburg, Columbia, Aiken, and Augusta. They are within driving distance if a connecting ride can be found.
- Amtrak does not serve the USCOG region, but has locations nearby, with a stop in Columbia, Clemson, Greenville, and Spartanburg if a connecting ride can be found. *(Upper Savannah Council of Governments Long Range Transportation Plan (LRTP) 2020-2040 (2023)*

There may be opportunities for organizations that already have vehicles to add routes that would serve Laurens, Abbeville, or Saluda Counties to help expand transportation options. SCDOT would be involved in any discussions regarding a contract for service that may be used to implement public transportation in any or all the three noted counties.

2.4 Community Outreach

This section outlines the approach used to engage stakeholders and gather input on transportation needs and priorities across the three counties. Stakeholder outreach was conducted between March and June 2025 in partnership with the Upper Savannah Council of Governments (USCOG). Approximately 80 individuals participated through online interviews, in-person meetings, and group discussions across Abbeville, Laurens, and Saluda Counties. Participants represented local governments, healthcare, education, social services, nonprofits, faith-based organizations, transit providers, and private industry. Engagement was strongest in Abbeville County, and valuable input was also received from participants in Laurens and Saluda Counties. The stakeholder interview question template is shown in Appendix A – Stakeholder Interview Question Template. A list of stakeholders is shown in Appendix B – Stakeholder Outreach/ Contact List.

Across all three counties, stakeholders consistently identified transportation as a foundational issue affecting access to employment, healthcare, education, and basic needs. Regional partners serving multiple counties, particularly Piedmont Technical College, Area Agencies on Aging, and the South Carolina Department of Public Health, reinforced that transportation barriers are not isolated to individual jurisdictions, but are systemic across the three-county area and surrounding rural counties.

2.4.1 Cross-County Findings

This section summarizes three key themes of stakeholder input that were common across the three counties.

1. Transportation Is a Barrier to Basic Needs, Education, Civic and Economic Participation

Stakeholders emphasized that the lack of reliable transportation constrains residents' ability to:

- Access medical care, pharmacies, and preventive health services
- Reach grocery stores and other essential services
- Maintain consistent employment, particularly for shift workers and entry-level positions
- Participating in education, workforce training, internships, and youth activities

Those most affected by transportation challenges include older adults, people with disabilities, people with low-income, students, and young people—particularly individuals without access to a personal vehicle or those without a driver's license.

Piedmont Technical College representatives highlighted that many students across Abbeville, Laurens, and Saluda Counties are first-generation students, low-income, Pell Grant-eligible, and

often lack reliable transportation to campuses, advising appointments, work-based learning sites, and internships. While some school districts assist with transportation for students with dual enrollment, most postsecondary students are responsible for their own travel, creating a significant barrier to certificate/degree completion and workforce entry.

A South Carolina Department of Public Health representative further noted that transportation consistently ranks as the #1 or #2 barrier to health in community health assessments across rural South Carolina, including the study area. Lack of transportation disproportionately affects people who identify as African American and Hispanic, and limits access to medical care, employment, and overall well-being.

Area Agency on Aging representatives noted that Abbeville and Saluda Counties are far from major medical facilities, and traveling to dialysis needs to be a priority.

2. Perceptions of Transit Limit Use and Support

Across the study area, public transit is widely perceived as:

- Unavailable or inconvenient
- Intended only for “poor” residents
- Financially unsustainable based on prior experiences

Stakeholders noted that changing these perceptions will be as important as implementing new services.

In Abbeville County, McCormick Area Transit (MAT) provided service from November 2021 through December 2023, utilizing the Rural Transportation Association Program (RTAP), Community Rides Federal Grant program and State Mass Transit Funds (SMTF). The awarded Community Rides Federal Grant expired on December 31, 2022; and the SMTF, in the amount of $150,000, expired December 31, 2023. Since there was no local/county funding, the service was discontinued, which left residents in Abbeville with unmet needs, especially access to medical care and groceries.

Community stakeholders reported mixed feelings about the MAT service. While people believed it was valuable, it was also perceived by some as inconvenient due to the need for advanced scheduling, fees charged by the mile, and not well-used for its intended purpose. MAT has been useful for some Piedmont Technical College students, especially those on the McCormick–Greenwood routes. While MAT and Peach Blossom Express serve multiple counties, there is limited awareness of their service, which points to the need for additional marketing/promotion of the existing services.

Both Piedmont Technical College and Department of Public Health representatives noted that limited awareness of existing services (including McCormick Area Transit and Peach Blossom Express) is a barrier to using the services across counties. Continued, and perhaps increased,

marketing/promotion of the services may help increase awareness and use of existing options. Limited coordination among transportation providers, colleges, health agencies, and social service organizations leaves individuals to navigate transportation options on their own, often unsuccessfully.

Changes in county leadership and politics have disrupted transit support. Some county elected officials prioritize other areas of budgets despite community support/demand for additional transportation options. In Laurens and Saluda Counties, the absence of visible service has reinforced the perception that transit is either unnecessary or not politically feasible. Long-term local (city or county) funding will be necessary to implement and sustain public transportation options.

3. Community Collaboration Is a Strength—but Needs a Convener/Champion

Stakeholders from each county shared examples of successful collaboration unrelated to transit, demonstrating strong local problem-solving capacity, trusted leadership, and clear benefits of collaboration to the community. Examples include faith-based service networks in Abbeville, countywide litter prevention in Laurens, and disaster response coordination in Saluda. Stakeholders cited the lack of a neutral entity to convene employers, governments, and service providers around the issue of transportation as a key barrier to making progress.

Regional partners reinforced that collaboration already exists within education and public health systems, but it is often sold in that sector of the economy:

- Piedmont Technical College works closely with school districts, employers, and nonprofits to support dual enrollment, internships, and workforce pathways, but transportation coordination rarely extends beyond the education system.
- Public health staff and community health workers routinely help clients navigate transportation barriers informally, including through limited voucher programs such as the Ryan White program that provides transportation assistance for low-income people with HIV/AIDs to get to medical and other appointments. However, public health staff and community health workers lack a comprehensive understanding of provider networks or a consistent referral structure.

The following paragraphs provide details on successful community collaborations.

- Several churches came together 17 years ago to create United Christian Ministries of Abbeville County (UCMAC) to help the less fortunate in one location where people can go to get help in Abbeville County. UCMAC is a nonprofit with over 100 volunteers that runs three food pantries, a rental assistance program, and previously had a free medical system. Churches, individuals, and organizations make it work.

- A family resource center in Abbeville is just getting started because of community conversations with the school district, individuals, and McCormick Area Transit.

- Stoll Industries is a family-run manufacturing company with a charitable arm that has plugged into coalition opportunities. They attend gatherings around human or social services, as they believe getting close to people affected by challenges is the best way to learn. They meet with a faith-based coalition once a month in Abbeville and invite organizations to group meetings to understand challenges and barriers to accessing services. Transportation challenges come up repeatedly, followed by challenges with childcare and housing.

- In Laurens County, all major cities - Clinton, Laurens, Gray Court, and Fountain Inn - plus the County itself committed to stronger litter prevention. Together, each unit of government adopted, or reaffirmed, litter-related ordinances, and the larger cities (and County) committed to helping fund the creation and operation of Keep Laurens County Beautiful. That effort was in partnership with the county's development corporation, Chamber of Commerce, and with the help of Palmetto Pride and SC DOT. Today, it is an award-winning program that represents a positive partnership between large stakeholders in the county.

- After hurricane Helene in September 2024, the town of Saluda pulled together, along with nonprofits in and out of state, including residents, the CEO of Harvest Hope, FEMA, state leaders, and others. People were passionate and worked together, regardless of their background or race, when there was a need.

2.4.2 Abbeville County Insights

Abbeville County stakeholders provided the most detailed input and expressed a strong interest in renewed transportation solutions.

Key needs and destinations

- Medical facilities, grocery stores (especially Walmart in Greenwood), employment sites, and educational institutions
- High-need areas include Calhoun Falls, Due West, and mobile home parks and Section 8 housing complexes in Abbeville

Key perspectives

- Transportation is increasingly viewed as an economic development issue, with employers citing it as a hiring barrier
- Stakeholders showed strong enthusiasm for flexible, on-demand microtransit models after visiting Wilson, NC

- Faith-based organizations and local industry were identified as trusted messengers and potential partners

Key challenges

- Limited public funding capacity
- Lingering skepticism from prior transit experience
- Need to demonstrate demand and tangible quality-of-life benefits

2.4.3 Laurens County Insights

Laurens County stakeholders emphasized the importance of framing transportation within broader economic and community development goals.

Key needs and destinations

- Connecting homes to workplaces, downtowns, medical facilities, shopping centers, and recreational destinations
- Older adults, students, people with disabilities, and low-income residents are identified as priority populations

Key perspectives

- Transit is more likely to gain support when positioned as supporting workforce access, tourism, and downtown vitality
- Regional coordination is challenged by jurisdictional boundaries and funding concerns

Key challenges

- Need for a clear, sustainable funding model
- Hesitancy to pursue services without strong regional alignment and state support

2.4.4 Saluda County Insights

Saluda County stakeholders emphasized an urgent need to address transportation issues, along with a strong community willingness to address the issues, particularly when mobilized through trusted local networks.

Key needs and destinations

- Medical care, pharmacies, grocery stores, and everyday errands
- Youth transportation to events and activities to support retention and community engagement

- High need identified within Saluda town limits, particularly Ward 1, though further outreach is needed to identify other areas of need.

Key perspectives

- Transportation needs are widely recognized, and support to address those needs is unlikely to face significant public opposition
- Word-of-mouth, churches, schools, and community leaders are critical channels for building support
- The community's hurricane response was cited as a model for collective action

Key challenges

- Limited technical capacity and funding clarity
- Competition among business owners can hinder collaboration without outside facilitation

2.4.5 Implications for Outreach and Implementation

Stakeholder input across all three counties suggests several overarching implications for future transportation planning:

1. **Start with trusted messengers and visible benefits**
   Faith-based organizations, employers, healthcare providers, and schools are key partners for outreach and credibility.
2. **Frame transportation as an enabler, not a social service**
   Emphasizing workforce access, health outcomes, youth retention, and economic resilience resonates more broadly than traditional transit narratives.
3. **Prioritize flexible, convenient service models**
   On-demand or microtransit approaches are viewed as more appealing, dignified, and practical than fixed-route services.
4. **Use pilot programs to demonstrate value**
   Short-term pilots, employer partnerships, and targeted demonstrations can help overcome skepticism and build momentum.
5. **Provide neutral regional coordination**
   A trusted external convener can reduce jurisdictional friction, align stakeholders, and support sustained collaboration.

3 Transit/Mobility Alternatives

When considering new public transportation or other mobility investments, it can be helpful to consider the spectrum of public options available. This spectrum spans from fixed (fixed route) to flexible services and includes variations in characteristics such as frequency or response times, ease of access, spatial coverage, and costs. Not all services are realistically available in all places; population size and density, as well as resource availability and community values, influence the types of services that may be suitable.

3.1 Key Concepts

This section introduces key concepts that influence planning and service design of public transportation. It is primarily based upon information provided in the Transportation Research Board's Transit Capacity and Quality of Service Manual (Transit Cooperative Research Program, 2013).

3.1.1 Density

Public transportation ridership is influenced by a number of factors, such as access to private vehicles and sociodemographics, "but the density of land uses along the transit line/route [or across the service area] is a basic requirement" (Transit Cooperative Research Program, 2013). Density – of people and households, housing units, and jobs – is a way of measuring the concentration of activity. As a result, measures of density are indicative of the number of potential transit riders; dispersed development makes it more difficult for transit service to connect people with employment, commercial centers, and services in a competitive travel time (Transit Cooperative Research Program, 2013).

Guidance on the minimum density needed to support a particular type and frequency of transit service depends on several factors, including willingness to fund the service. "Where population densities exceed about 1,000 persons per square mile and where there is some linear pattern to trip demand," transit planners generally look to incorporate fixed elements into transit service (Transit Cooperative Research Program, 2013). Population densities are approximately 42, 50, and 97 people per square mile, respectively, in Saluda, Abbeville, and Laurens County (America Community Survey 2023).

3.1.2 Productivity (Performance Measures)

The productivity of a transit service is typically measured in terms of ridership and defined as passenger trips per revenue hour (Transit Cooperative Research Program, 2013). The National Transit Database Annual Agency Profiles include standard reporting on unlinked trips per vehicle revenue hour as part of a group of "Service Effectiveness" measures (Federal Transit Administration, 2019). Unlinked trips refer to the total number of passengers that board a transit vehicle, counting each boarding separately (as compared to linked trips, which count the entire journey as one trip, including any transfers). While productivity is influenced by density, as described above, as well as service design, it is negatively correlated with (or inversely related to) the size of the service area (Transit Cooperative Research Program, 2013). In other

words, the larger the service area, the lower productivity tends to be. Productivity as measured by ridership is a critical transit performance measure; it influences transit service design and viability, as well as long-term financial sustainability. Additional transit performance measures relate to service availability and delivery, safety and security, maintenance, economic and environmental impacts, capacity, and comparative travel times (Transit Cooperative Research Program, 2013). In addition to tracking ridership, it would be important to establish performance measures that are relevant for transportation options for the three rural study area counties. For example, hospitals could track changes in missed appointments or in recurring trips to the emergency room over time, universities could track student retention rates, and large employers could track employee retention rates. The productivity/performance measures will help the community as they work to determine if the transit or other mobility programs and services are "successful."

3.2 Fixed Versus Flexible Transit (Mobility Options)

Transit services may be categorized by the degree to which they maintain fixed versus flexible characteristics (Figure 12), and the decision of which type or types of service to be implemented can be based, to a degree, on the expected ridership (or productivity) of the service (Figure 13).

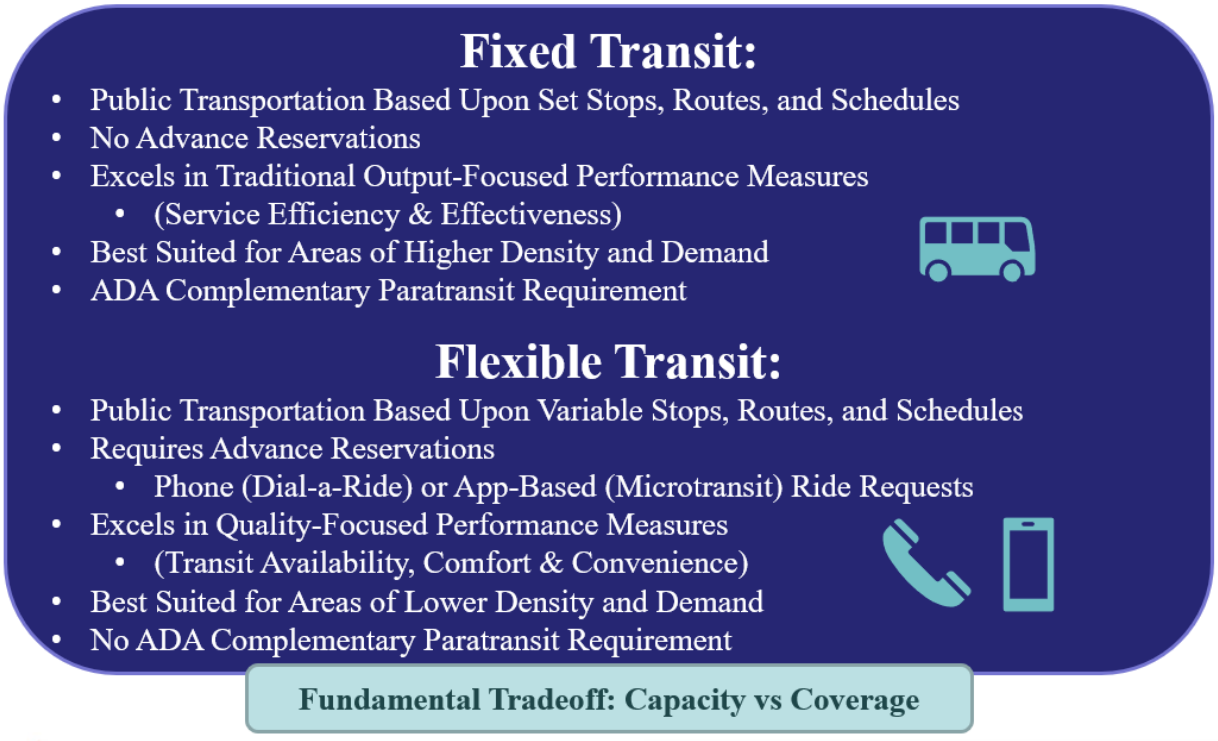


Figure 12: Key Characteristics of Fixed and Flexible Transit Services

Note: Graphic created by WTI based upon a synthesis of information presented in the Transit Capacity and Quality of Service Manual (2013).

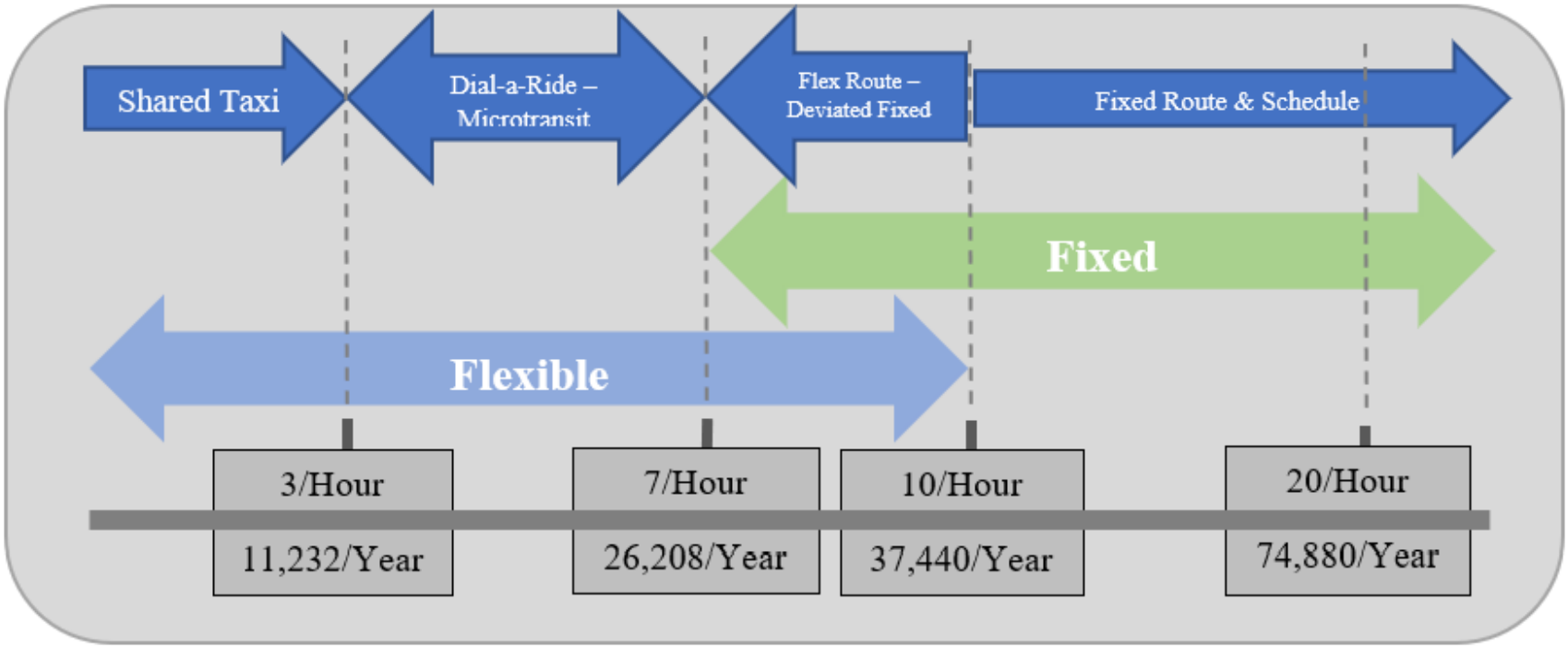


Figure 13: Sample Spectrum of Flexible and Fixed Transit Services In Relation to Ridership

Note: Graphic created by WTI based upon information presented for the Dallas Area Rapid Transit system (Transit Cooperative Research Program, 2013, Exhibit 2-26 DART Criteria for Fixed-Route and DRT Service). Riders per hour translated into annual estimates by WTI based upon 12 revenue hours per day, 6 days of service per week, and 52 weeks of service per year.

The key concepts of density and productivity discussed above, can vary with these categories of service. Fixed transit is characterized by repetitive, set, and specific stops, routes, and schedules. As a result, fixed transit does not require passengers to make a ride request or advance reservation. This type of service is typically associated with higher-density areas and maintains higher productivity as measured by ridership. The provision of complementary paratransit is required for fixed transit under the Americans with Disabilities Act.

Flexible transit is characterized by a lack of fixed stops, routes, and schedules. As a result, passengers need to make ride requests or advance reservations via phone (Dial-a-Ride or DAR) or mobile application (termed "microtransit"). This type of service is typically associated with lower-density areas and maintains lower productivity.

Fixed transit service design entails a tradeoff between routes that maximize ridership and routes that bring service within reach of a larger share of the community. Fixed transit in general allows for higher ridership, while flexible transit excels at offering coverage to a higher share of the community. In general, the goal is to "right-size" the service. A further discussion of the various options is noted below.

3.2.1 Fixed (Fixed Route)

Fixed Route Transit with Complementary Paratransit is an approach to public transportation based upon service provided along set routes with a set schedule. Service is typically accessed by an online, posted, or paper schedule, and travel is between fixed pickup and drop-off locations (i.e., bus stops). Agencies typically employ all operations staff (managers, drivers, maintenance). Service adjustments to routes and schedules are relatively infrequent (likely not more than on an annual basis).

Additionally, complementary paratransit service provision is required under the Americans with Disabilities Act (ADA) for persons whose disabilities prevent them from using the fixed route system (within ¾ mile along and at either end of a fixed route) (National Rural Transit Assistance Program, 2020). It is important to note that ADA requirements for paratransit services can often cost as much or more than for implementing fixed route transit (depending on factors such as their service area, demographics of their community, etc.). The Greenlink service (Greenville Transit Authority) and The COMET (Central Midlands Regional Transit Authority, Columbia) are examples of this type of service.

Deviated Fixed (or Flex) Route is an approach to public transportation based upon incorporating flexibility in stops and/or routes to address ADA requirements. Service is typically accessed by an online or paper schedule, and travel between pickup and/drop-off locations may include some variability in the route between stops. Service adjustments to routes and stops are typically constrained and ensure overall adherence to a set schedule. However, enough flexibility is maintained in the schedule to allow the bus/vehicle to deviate between fixed points (bus stops) to pick up someone who needs ADA-type service. Generally, the schedule is such that the bus/vehicle can deviate twice per hour (or per route). This type of service allows the general public to access the service using the set bus stops/schedule, while those who cannot access the fixed bus stops can access the service through the deviated/flexible service. Thus, ADA service is provided without the need for a separate paratransit service, which can help manage the cost of the overall transit service.

3.2.2 Flexible Services

Taxi Voucher or Ridehailing Subsidy programs are an approach to public transportation based upon partnership with one or more traditional taxi companies or ridehailing companies characterized by an effort to group rides when possible (e.g., Lyft Line, Uber Pool). Subsidies may either be set as a fixed amount per trip (variable cost for the rider) or as a variable amount per trip (fixed cost for the rider). Providers include Lyft, Uber, and local taxi companies. The COMET on the Go! program in the Columbia area provides this type of service (see https://catchthecometsc.gov/programs-services/the-comet-on-the-go/ for information related to The COMET at Night and COMET To The Market programs). The COMET Pick Up Program, serving people with a disability and people aged 65 or older, is also an example of this type of program/service.

Demand Response Transit with Traditional Technology (e.g., Dial-A-Ride) is an approach to public transportation based upon service provided across a defined service area and set service hours characterized by an effort to group rides when possible. Service is typically accessed (ride requests made) by telephone or email, and operations (scheduling and dispatching) are relatively labor-intensive (i.e., more manual inputs and assessments). McCormick Area Transit (McCormick County Senior Center) and the Peach Blossom Express (Edgefield County Senior Citizens Council) provide this type of service.

Demand Response Transit with Technology Platform Upgrade (Microtransit Software as a Service) is an approach to public transportation based upon service provided across a defined service area and set service hours characterized by an effort to group rides when possible. Subsidies are typically set at a variable amount per trip (fixed cost for the rider). Service is typically accessed by an app or website, and operations (scheduling and dispatching) rely on licensed technology platforms that use algorithms, making it less labor-intensive. Providers offering software include Via, TransLoc, Downtowner, as well as several other companies.

Demand Response Transit with Turnkey/All-in-One Vendor Operation (Microtransit Transportation as a Service) is an approach to public transportation based upon service provided across a defined service area and set service hours characterized by an effort to group rides when possible. Subsidies are typically set at a variable amount per trip (fixed cost for the rider). Service is typically accessed by an app or website, and operations (scheduling and dispatching) rely on licensed technology platforms that use algorithms, making it less labor-intensive. Additionally, a vendor operates all aspects of the service, requiring less public staff time (limited to contract oversight, service evaluation, and adjustment recommendations). Via and the Downtowner are two providers of this option. Several people from the area went to review RIDE, which is the City of Wilson, North Carolina's on-demand microtransit service. RIDE replaced the fixed route bus system on September 1, 2020. RIDE is a partnership between the City of Wilson and Via. RIDE serves most of the Wilson city limits. Currently, RIDE operates Monday through Friday from 5:30 a.m. until 7 p.m. On Saturdays, RIDE operates from 7 a.m. until 6 p.m.

It is important to note that however the demand response service may be delivered, there is a trade-off between the service area and the frequency at which service can be provided. For example, while one vehicle (van) may be able to provide a ride every 15 minutes or so in a 3 square-mile area, if the service area is 12 square-miles, one vehicle may only be able to provide a ride every 30 minutes (or more). Somewhat similar to a fixed-route service, decisions will need to be made regarding the service area, and the desired time someone may have to wait for their ride.

3.3 Volunteer Driver Programs

The most expensive part of operating a public transportation/transit program is the cost of the drivers. A volunteer driver program, therefore, reduces the cost of providing mobility to the public (or a subset of the public) by having qualified individuals, who are not paid, drive for the service/system. Liability, insurance, and responsibility for driver screening and oversight warrant further investigation if this mobility option were to move forward to implementation. There are three main types of volunteer driver program options, which include having volunteers drive their own vehicles, or drive an agency's or organization's vehicles, either in a fixed or flexible method.

3.3.1 Driving Own Vehicle

In this scenario, an individual would register to provide rides for a certain number of hours per day, week, or month in their own vehicle. This type of volunteer driving is typically associated with a certain purpose, such as transporting people to medical appointments, or transporting a specific demographic, such as older adults, to appointments or other activities, such as grocery shopping. In general, a faith-based, non-profit, or government agency would act as the "coordinating organization." The coordinating agency would register both people who need rides, as well as those who are volunteer drivers, and match requested rides with available drivers, maximizing mobility to the greatest extent possible. The Volunteer Transportation Reimbursement Program (V-TRIP) program offered in the Columbia area is an example of this type of service (see https://catchthecometsc.gov/mobility/ for more information).

3.3.2 Driving Agency/Organization Vehicles

To provide mobility for those who may not have access to a vehicle, an agency or organization may seek volunteers to drive a vehicle that is owned by the organization. Volunteers would sign up to drive a certain number of hours per day, week, or month, replacing paid drivers to help lower costs. This type of volunteer driver program could include either a pre-determined route scheduled a few days in advance or a more flexible and shorter notice service. For example, a driver may pick up a group of older adults at an independent living location and drive them to a grocery store and back. Or a driver may pick up a person from a multi-family housing facility and take them to a clinic or hospital for a medical procedure. In the two preceding cases, the schedule of pickup and drop-off times and locations is determined in advance.

In the more flexible, shorter notice service scenario, the volunteer driver would act somewhat like an Uber or Lyft driver, where technology would guide them to pick up and drop people off at their destination. When the volunteer driver is finished with their shift, they would simply bring the agency's vehicle back to the main facility or a designated location.

Whether driving their own vehicle or an agency's vehicle, a volunteer may be able to set their own schedule. While a volunteer would not get paid for their time, many volunteer driver programs show appreciation for those who volunteer their time to help others through events or other forms of appreciation.

3.3.3 Addressing liability for volunteer driver programs

Many stakeholders expressed concerns about liability issues associated with volunteer driver programs. The organizations listed below provide resources for limiting liability in volunteer driver programs.

- The Nonprofit Risk Management Center (NRMC) – Provides articles, webinars and resources including a "Volunteer Driver Pledge" to help manage risk.
- Volunteers Insurance Service (VIS) – Provides volunteer insurance and risk management services to organizations and their volunteers serving their communities.

Liability/insurance issues are important to address, as in some cases an incident may result in the volunteer driver's insurance being viewed as the primary insurance, with the insurance of the agency they volunteered for second. Any incident would/could be detrimental to a volunteer's private insurance. The resources noted herein can help address the liability/insurance issue, but also on the various roles and responsibilities of the individuals and agencies/organizations that may be involved in a volunteer driver program.

3.4 Vanpooling and Carpooling

While not considered public transportation, vanpooling and carpooling are two options that focus on helping people access employment. These options can focus on a single employer or multiple employers near each other. In general, carpooling and vanpooling are used in areas where employees travel longer distances to get between where they live and where they work, common in rural areas. If worksites have employees who travel 20-25 miles or more one way, they can consider whether they want to encourage or incentivize carpooling or investigate vanpools. Abbeville County has 10 employers that have between 100 and 249 employees, while Laurens County has 28 employers with 100 to 249 employees and 9 employers with 250-499 employees, and Saluda County has 9 employers with 100-249 employees. These larger employers could all be considered ideal workplaces for implementing carpooling and/or vanpooling programs.

Typically, the employees who participate in carpool or vanpool programs pay the cost of the program. Employers may subsidize the cost of the service (typically with vanpools) or provide incentives to employees who commute to work by carpool or vanpool. While employees may

take turns using their cars in a carpool, or select just one vehicle to use, with vanpools, employers typically supply the vans/vehicles to use, either through purchasing the vans, or by leasing them through an entity such as Enterprise (see https://www.commutewithenterprise.com/en.html). The COMET in the Columbia area has a partnership with Enterprise (see https://catchthecometsc.gov/programs-services/vanpool/) and the Berkeley-Charleston-Dorchester Council of Governments (BCDCOG) has its Lowcountry Go vanpool program (see https://bcdcog.com/vanpool/).

On a large scale, Share the Ride NC (North Carolina) is a statewide website that was created to help form carpools and vanpools. It is a partnership between the NCDOT and several agencies. Much more information on the various matching and other services offered can be found on their website: https://www.sharetheridenc.org/public/home.aspx

3.5 Additional Mobility Options

This section describes other mobility options that may be part of a solution to fill transportation service gaps in the study area.

3.5.1 Vouchers or reimbursement programs

While not a public transportation program or service, vouchers or other reimbursement programs can help provide mobility to a targeted subset of the population. Any group or organization could create a source of funds to establish a voucher/reimbursement program for a certain subset of the population. Vouchers could be further limited to a specific activity. For example, a medical facility could establish a reimbursement program for patients traveling to medical appointments.

Working with the Deep East Texas Council of Governments (DETCOG), the Western Transportation Institute helped pilot a voucher program for older adults with limited (or no) mobility options. The voucher program provided a "checkbook" so senior citizens who were able to get a ride from a friend or family member to places such as grocery stores, pharmacies, or to medical appointments, could reimburse the person who gave them a ride. The reimbursement rate was tied to the Federal (business) reimbursement rate. DETCOG initially used Older Americans Act funding for the pilot program. More information about this specific project can be found here.

3.5.2 Mobility Management/Mobility Manager

As noted in Federal Transit Administration (FTA) Circular 9040.1H, Rural Areas Formula Grant Programs Guidance, "Mobility management is a capital project activity that consists of short-range planning and management activities and projects for improving coordination among public transportation and other transportation service providers…." While mobility management activities can be carried out by a recipient or subrecipient of FTA funding through an agreement entered into with a person, including a government entity, it is an option that a Mobility Manager could be hired by USCOG (or another "local entity") to improve mobility options in Abbeville, Laurens and Saluda Counties, and could work to improve coordination for

transportation services in all of the six counties served by USCOG. Decisions about local funding to support mobility management (a mobility manager) and the "host organization" for a mobility manager are two items to address. SCDOT would need to be part of the discussion for moving this effort forward.

- Kansas has a mobility management program divided into 10 coordinated transit districts.
- Oklahoma's Mobility Management Program website includes steps for starting a program, funding sources and a history of mobility management.
- Ohio's Mobility Management Program website provides program details and links to various guidance.

3.6 Transit/Mobility Options Summary

As Abbeville, Laurens, and Saluda counties review mobility options, it is likely that multiple options will need to be implemented to address the various challenges that exist within the region. In addition, based on conversations with stakeholders, it appears that the Counties have limited funding at this time for implementing large-scale public transportation programs. Therefore, options such as fixed-route transit or even large-scale demand-response transit are less feasible. Given limited local funds, low population density, and the dispersed nature of destinations in the study area, flexible services are a more feasible starting point. Lower-cost mobility options, such as carpool and vanpool for employment-related transportation, and volunteer driver programs are reasonable starting points within these Counties. In the next section, more specific details about implementing these solutions are provided.

4 Transit/Mobility Recommendations

As noted in the previous section, there are multiple options/services that can provide enhanced mobility in Abbeville, Laurens, and Saluda counties and their communities. Based on information provided during WTI's site visit, interviews, and other meetings, it was evident that local funding was limited. This is a challenge, as operating a public transportation system is expensive.

The latest information available (FY2024 data from the National Transit Database) indicates that the Peach Blossom Express costs $68.37 per revenue hour to operate, and MAT costs $41.52 per revenue hour to operate. The overall expenses for those two systems for FY24 were $616,152 and $992,818, respectively. Using an average price of $54.95 per hour, a demand-response system in any of the counties, even operating on a limited basis (3 days per week and operating 10 hours per day, 7:30 am to 5:30 pm) would cost approximately $85,722 per year for one vehicle. If you increase the potential service to 5 days per week and 10 hours per day, the operating costs increase to approximately $142,870 per year. While Federal funds passed through by the South Carolina DOT (SCDOT) may pay up to half of those expenses, it would take $42,861 or $71,435, respectively, of other/local funding per year to support just one vehicle with limited services (Table 4). While fare revenue could help support some of those expenses, the people who are most likely to need this service probably have fixed or limited incomes, so fares would have to be set accordingly, which would likely lead to low fare revenue. SCDOT would lead a "risk assessment" regarding funding sustainability and the capacity of transit systems to expand services if this process were to move forward.

Table 4: Annual expense for additional routes on existing demand response transit

Additional Routes (one vehicle)	Total annual expense	Local annual match at 50%
3 days per week at 10 hours per day (7:30 am to 5:00 pm)	$85,722	$42,861
5 days per week at 10 hours per day (7:30 am to 5:00 pm)	$142,870	$71,435

In Greenville, their fixed-route service costs $131.27 per revenue hour to operate, while their demand-response (paratransit) service costs $112.76 per revenue hour to operate. The COMET in Columbia has costs per revenue hour of $114.02 and $188.26, respectively, for those same services.

Microtransit can be an option to provide transit service in low-density areas where a fixed route is not economically viable. The annual operating cost for Wilson's RIDE service was approximately $1.6 million in 2022, with a cost per vehicle revenue hour of $72.92. Operational expenditures for similar microtransit systems ranged from a high of $95.43 per vehicle revenue hour for Morrisville, NC Smart Shuttle to a low of $42.12 per vehicle revenue hour for Wake County, NC's GoWake Smart Ride system (AASHTO, 2023).

Whether it is the Peach Blossom Express or MAT services, the Greenville or COMET services, or Wilson, NC RIDE micro transit service, the largest expense for any of those systems is the cost of the drivers. That is why, in Section 4.1 Recommendations, in the short term, the focus is on programs/services where the driver would not be paid.

4.1 Implementation Considerations

Implementation of any mobility solutions should be based on county readiness, capacity, local funding and political support. Solutions could be implemented across all three counties, or solutions could be implemented in one county, and not the other two. As a starting point for improving mobility options in Abbeville, Laurens, and Saluda Counties and their communities, carpooling/vanpooling programs and volunteer driver programs are recommended for initial consideration.

1. Carpool or Vanpool Programs

When implementing carpool/vanpool programs, it is recommended that the USCOG and partners focus on the 56 employers in the Counties that have a minimum of 100 employees. After reviewing additional information, such as the distances that employees travel to work sites, further decisions should be made regarding whether vanpools or carpools should be implemented. Discussions should also be held with large employers to determine if they would be interested in working collectively or individually on starting or supporting carpool and vanpool programs. Detailed information about vanpools can be obtained by talking to folks from the COMET and the other organizations noted in Section 3.4.

2. Volunteer Driver Program

Stakeholders across all three counties emphasized the need for transportation to medical appointments, making this an ideal starting point for a volunteer driver program. The quickest way to launch such a program is by having volunteers use their own vehicles. Over time, the goal should be to transition to a model where volunteers drive vehicles provided by an agency or organization. In addition to talking to representatives from the COMET about their Volunteer Transportation Reimbursement Program (V-TRIP) (see https://catchthecometsc.gov/mobility/), there are additional resources to assist with the development and operation of volunteer driver programs.

- The National Rural Technical Assistance Program's Volunteer Drivers Toolkit can be found here: https://www.nationalrtap.org/Toolkits/Volunteer-Drivers-Toolkit/Welcome
- The Rural Health Information Hub's Volunteer Models for Rural Transportation can be found here: https://www.ruralhealthinfo.org/toolkits/transportation/2/volunteer-models
- The Neighbor to Neighbor program in Myrtle Beach, SC is another example of a volunteer driver program (see https://n2ncarolinas.org/).

When moving from a program that has volunteer drivers using their own vehicles to one where volunteers are driving an organization's vehicles will require additional planning.

Discussions should identify which organizations, such as local governments, faith based, non-profit, or medical organizations, are willing to provide vehicles for the services. Businesses could be engaged to donate fuel, tires, oil changes, or other items to help keep costs as low as possible.

While neither the carpool/vanpool nor volunteer driver programs noted are true public transportation services, these programs will help address some of the existing mobility challenges and can lead to the implementation of public transportation/transit services in the next three to five years.

3. **Add routes to McCormick Area Transit and Peach Blossom Express**

McCormick Area Transit could add routes to serve Abbeville County, and Peach Blossom Express could add routes to serve lower Saluda County, if political support is developed, and funding sources are identified. SCDOT would be interested in the development of cost allocation methodologies to see how the expenses of operating this potential new service would be accounted for and supported.

4. Microtransit

Given current challenges for finding local funds for transit systems, microtransit may be pursued in the future (3-5 years) if political support for transit can be built and new funding opportunities emerge.

5. Mobility Manager/Mobility Management

Unless adequate funding can be secured from local sources and SCDOT, implementing mobility management services or hiring a mobility manager is something that should be considered a mid-term (3-5 year) goal. SCDOT should not be relied upon as a future funding source or for any stopgap measures if funding shortages occur. SCDOT is limited in its funding ability by the relatively flat annual $6 million in State Mass Transit Funds (SMTF), and most of those funds are allocated to match existing federal transit programs.

4.2 Conclusions and Next Steps

Review of several previous studies, as well as employment and demographic data, has established a need for more transportation options in the Abbeville, Laurens, and Saluda Counties. Persistent transportation gaps in these three counties continue to limit access to employment, healthcare, education, and essential services. Despite multiple studies over the past 15 years confirming these needs, mobility options remain scarce, particularly for people with low incomes, older adults, and people with disabilities. Stakeholder engagement reinforced that transportation is not only a social service but a critical enabler of economic development and community resilience. Across all three counties, stakeholders consistently identified transportation as a foundational issue affecting access to employment, healthcare, education, and community life. Addressing these challenges requires practical, phased

solutions that reflect local funding realities and rural travel patterns. As a starting point for improving mobility options in Abbeville, Laurens, and Saluda, carpool/vanpool programs and volunteer driver programs are recommended.

Initial steps (now through Year 1) include reviewing this report with the stakeholders from each county to determine which counties have support/champions to keep moving forward with this process. Primary steps include reviewing the mobility options to determine which may be implemented, working with the relevant Chambers of Commerce or employers to determine interest in carpooling and/or vanpooling programs, and talking to the faith-based community or other organizations about the interest in a volunteer driver program.

Once a decision is made on the modes/programs to implement, additional data would be gathered to finalize the details needed for implementation of the selected modes/programs.

Short-term steps (1-3 years) include implementation of near-term strategies that prioritize low-cost, high-impact options such as volunteer driver programs for medical appointments and employer-supported carpool and vanpool initiatives. These approaches can deliver visible benefits while building trust and momentum for future investments. Regional coordination with existing providers/services should be part of any implementation efforts.

Carpool and vanpool programs

- Visit with larger employers in the three counties to gauge carpooling/vanpooling interest.
- Reach out to nearby vanpooling programs The COMET in the Columbia area and Lowcountry Go vanpool program in the Berkeley-Charleston-Dorchester area to discuss their programs. For more insights, consider reaching out to Share the Ride NC (North Carolina), a statewide website that was created to help form carpools and vanpools.

Volunteer driver program

- Start with transportation to medical appointments for a volunteer driver program. Reach out to local medical contacts interested in transportation to discuss interest in volunteer driver programs (see initial contact list in Appendix B).
- Consider reaching out to folks at the Neighbor to Neighbor program in Myrtle Beach, SC . In addition, explore resources from the COMET's Volunteer Transportation Reimbursement Program (V-TRIP) and the National Rural Technical Assistance Program's Volunteer Drivers Toolkit.

Medium term steps (3-5 years) include mobility management (possibly hiring a mobility manager) and exploration of microtransit services which will be essential to expand coverage and improve convenience.

- Continue conversations with SCDOT regarding mobility manager funding
- Explore funding options for adding routes to McCormick Area Transit to serve Abbeville County and Peach Blossom Express to serve lower Saluda County.
- Develop local coalitions and explore funding options that could support microtransit service.

Appendix C contains resources that provide practical guidance and examples for implementing rural transportation programs.

Throughout the process of developing these mobility options, continue communications with key stakeholders, including SCDOT. By starting with trusted partners and pilot programs, the region can demonstrate value, overcome skepticism, and lay the foundation for a sustainable, integrated mobility network that strengthens workforce access and quality of life across all three counties.

I have been impressed with the urgency of doing.
Knowing is not enough; we must apply.
Being willing is not enough, we must do.
--Leonardo Da Vinci

Do what you can,
With what you have,
Where you are
--Theodore Roosevelt

Appendix A – Stakeholder Interview Question Template

Previous studies have identified the need for public transportation (transit) or other transportation options in Abbeville, Laurens, and Saluda Counties. We are reaching out to you to better understand local priorities and perceptions about transportation options in your area. Transportation options could include possibilities such as carshare, vanpool, vouchers, microtransit, ebikes, etc. Please answer the following questions from your perspective as someone familiar with the culture and communities in Abbeville, Laurens, and/or Saluda Counties.

Identifying success:

1. Please briefly describe an example of success (within the three-county area) where a major community issue was addressed by collaboration among multiple people/organizations/agencies:
    a) In your opinion, why do you think this effort was successful? What elements existed within the effort to create success?

Priorities: What populations, trip types, origins and destinations are the top priority for stakeholders

2. Reliable transportation benefits us all. What populations would most visibly benefit from transit or other transportation options within your community? (Youth, older adults, commuters, people living on a low income, people living with disability, students, visitors, …).

3. Please describe the specific areas or neighborhoods where people have the greatest need for transit or transportation options?

4. Are there specific destinations, for certain purposes, where people need to go that should be prioritized for transit or other transportation options? (medical centers, work locations, schools, shopping centers…)

Perceptions: Is there stigma around who uses public transportation, or the use of public dollars for public transportation that only helps certain people?

5. What is the perception of transit in the area?
   Possible follow up:

a) Please describe the community thinking around who uses public transportation?
b) What existing attitudes, beliefs, or cultural norms could be leveraged to change perceptions about public transportation in the Upper Savannah area?
c) Please describe what could be done to make transit more appealing to potential riders?
d) Please describe what needs to happen to build political support among elected officials and decision makers? What could be done to make transit more appealing to local governments?

Funding

6. In addition to state and federal funds, how could transportation options be funded within the three-county area? (Abbeville, Laurens, Saluda)
   a) How could federal funding be matched? (for example, a local industry or foundation that could contribute funds toward the required federal match)
   b) Who are the partners that need to be involved?

Collaboration

7. Please describe barriers to collaboration among community stakeholder organizations related to transit (within the three county area):
   a) What could be done to help overcome these barriers amongst community organizations?

General

8. How could the successes of the example provided at the beginning of the interview be replicated to address transit?

9. Do you have anything else you would like to share regarding transit or mobility in your community, or the Upper Savanna COG region?

Thank you for your time!

Appendix B – Stakeholder Outreach/ Contact List

USCOG identified representatives from the three study area counties to participate in an advisory team, who then identified stakeholders in the area with an interest in transportation. Stakeholders consisted of a diverse group of people from local government, the medical community, social services, non-profits, faith-based organizations, and others. WTI staff worked with USCOG to organize and conduct key stakeholder interviews, group meetings, and conversations with approximately 80 people in Abbeville, Laurens, and Saluda Counties as summarized below.

Abbeville County (~39 stakeholders)

- 3 online interviews March-June 2025
- Piedmont Technical College meeting in Abbeville June 10, 2025 (6 participants)
- Becoming ABBAville group dinner/discussion June 10, 2025 (~30 participants), organized by Michael Mahaffey

Laurens County (6 stakeholders)

- 1 online interview
- Meeting in Laurens, June 12, 2025 (5 participants)

Saluda County (12 stakeholders)

- 1 online interview
- Meeting in Saluda County Council room, June 11, 2025 (11 participants)

Stakeholders that work across county boundaries (~26)

Online interviews were conducted from March to June 2025 with representatives of the following organizations that work across counties.

- Regional Area Agency on Aging
- Piedmont Technical College
- South Carolina Department of Public Health
- McCormick Area Transit
- Edgefield Peach Blossom Express (2 participants)

WTI staff presented on transportation needs/options and heard feedback at the Area Agency on Aging (AAA) Regional meeting in Greenwood, June 10, 2025 (~20 participants). AAA services cover all three study area counties.

The following list of stakeholders includes people who have expressed interest in or contributed to this study by participating on the advisory team, stakeholder interview, and/or meetings.

Name	Role in Community or Professional Affiliations
* advisory team members	
Abbeville contacts	
Angela Pruitt	Abbeville High School Job Coach/Family Services Coordinator
Austin Walker*	Abbeville County Economic Development Partnership
Bill Boone*	Executive Director of the United Christian Ministries of Abbeville County (UCMAC)
Brian Moon	Abbeville County, County Director
Darren Maddox	Abbeville Assistant Finance Director
Michael Mahaffey	Director of Global & Regional Initiatives Stoll Industries
6/10/25 Abbeville Group Dinner/Meeting organized by Michael Mahaffey (did not get everyone's name)	
Aimee Mahaffey	retired
Ashley	Abbeville County school district
Brenda Feece	Executive Director Crossroads women's center
Bridgette Yoder	Abbeville Movement Facilitator
Chris	Abbeville section 8 housing
Claudia Brooks	Edgefield County Wellness Coalition
Deborah Childs	Abbeville
Dennis Holland	United Way of Lakelands
Janice Gray	Abbeville Mental Health Clinic Director
Jason Yoder	Abbeville
Joann Burket	cyclists Abbeville Coalition
Kelly William Finley	New Day Branding
Mitzi	Family First Alliance
Shannon Clark	Calhoun Falls Family Practice
Laurens contacts	
Alesia Carter*	United Way of Laurens County Executive Director
Aryele Redmond	United Way of Laurens County
Dabs Davis	Laurens County Chamber of Commerce
GP McLeer*	Upstate Mobility Alliance, Mayor of Fountain Inn
Justin Banfield	Prisma Health CEO
Kim Chalmers	Piedmont Technical College
Whitney Lagrange	Laurens County Development Corp
Saluda contacts	
Angela Erhardt	Saluda County Department of Social Services Director
Brenda ?	Self Regional Health

Denise Holland	United Way
Frank Daniel Sr.	Saluda County Council member
Mike Kelly	Saluda Town Planner
Miliken Mathews	Mayor Town of Saluda
Myranda Butler*	Saluda Town Council member
Stephanie Hughes	Self Regional Health
Tracy Vitmy	Area Agency on Aging
Wanda Shall	Piedmont Technical College
Regional contacts	
Abigail Vences*	PASOs serving Greenwood, Saluda Community Health Worker
Caroline Chappell*	Piedmont Technical College
Gloria Estrada*	S.C. Department of Public Health, Prevention Unit Program Coordinator II
Peggy Merritt	Area Agency on Aging
Renee Miller-Cotton*	SCDOT Regional Program Manager, Office of Public Transit
Rick Green*	Government Services Director Upper Savannah Council of Governments
Transportation/Transit System contacts	
Becky Powell Moon*	McCormick County Senior Center Executive Director
Linda Beldsoe Whitmore	Transportation Coordinator - Edgefield Peach Blossom Express
Shannon L Eargle	Director - Edgefield Peach Blossom Express
Suggested by local contacts for future engagement	
Brandi Sears	School District - Adult Education
Christy Hall	Saluda area. Former SCDOT Secretary of Transportation (retired in 2024)
Katie Florida	Saluda area
Rev. Annette Mathis	Saluda area
Shelby D Reed	SC Dept of Workforce
Stephen Taylor	West Carolina Tel Com
Taiese Kidd	Flexible Technologies HR Director

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Appendix C – Resources

The resources listed below provide practical guidance and examples for implementing rural transportation programs. They include materials on volunteer driver programs, ridesharing initiatives, rural health transportation strategies, and voucher programs, offering actionable insights for agencies and community partners seeking to expand mobility options in Abbeville, Laurens, and Saluda Counties.

Volunteer driver program resources

- **COMET's Volunteer Transportation Reimbursement Program (V-TRIP)** is an example of how a nearby volunteer driver reimbursement program works. https://catchthecometsc.gov/mobility/

- **The National Rural Technical Assistance Program's Volunteer Drivers Toolkit** is a guide that provides the framework for developing and maintaining volunteer driver programs. https://www.nationalrtap.org/Toolkits/Volunteer-Drivers-Toolkit/Welcome

- **The Rural Health Information Hub's Volunteer Models for Rural Transportation** describes different ways volunteer driver programs can be set up. It provides examples of volunteer driver programs, considerations for implementation, program clearinghouse examples, and links to helpful resources. https://www.ruralhealthinfo.org/toolkits/transportation/2/volunteer-models

- **The Neighbor to Neighbor program in Myrtle Beach, SC** has a mission to provide access to the community for adults with disabilities, older adults, and veterans through transportation, pantry delivery, and connectedness. https://n2ncarolinas.org/

The following resources help address liability issues for volunteer driver programs.

- **The Nonprofit Risk Management Center (NRMC)** – Provides articles, webinars and resources including a "Volunteer Driver Pledge" to help manage risk. https://nonprofitrisk.org/resources/risk-on-the-road-managing-volunteer-driver-exposures/

- **Volunteers Insurance Service (VIS)** – Provides volunteer insurance and risk management services to organizations and their volunteers serving their communities. https://visvolunteers.com/

Rideshare (carpool and vanpool) resources

- Vanpooling programs The COMET in the Columbia, SC area https://catchthecometsc.gov/programs-services/vanpool/

- Lowcountry Go vanpool program Is located in the Berkeley-Charleston-Dorchester area of South Carolina. This website has details on their Lowcountry Go Vanpool Program that provides eligible groups of four or more commuters with a 7 or 15 passenger van to use to commute to and from work. https://bcdcog.com/vanpool/

- Share the Ride NC (North Carolina), a statewide website that was created to help form carpools and vanpools. https://www.sharetheridenc.org/public/home.aspx

- **Rural Health Information Hub's Ridesharing models for rural transportation** provides examples of ridesharing programs in Minnesota, Washington and central Virginia, considerations for implementation, program clearinghouse examples, and resources to learn more. https://www.ruralhealthinfo.org/toolkits/transportation/2/ridesharing-models

Rural health/medical transportation resources

Rural Health Transportation Toolkit contains promising models and many resources to support organizations implementing transportation programs in rural communities. https://www.ruralhealthinfo.org/toolkits/transportation

The Rural Health Information Hub (RHI) is funded by the Federal Office of Rural Health Policy to be a national clearinghouse on rural health issues. Two transportation related resources from RHI are described below.

- **Rural Transportation Toolkit** compiles promising models and resources to support organizations implementing transportation programs in rural communities across the United States. The toolkit information is focused on developing, implementing, evaluating, and sustaining rural transportation programs. https://www.ruralhealthinfo.org/toolkits/transportation
- The program clearinghouse section provides examples of transportation programs in rural communities https://www.ruralhealthinfo.org/toolkits/transportation/3/program-clearinghouse

Health Outreach Partners works with local community-based organizations across the country to improve the quality of life of low-income, vulnerable, and underserved populations. They launched a transportation initiative in 2016 to document the impact of transportation barriers on healthcare costs and strengthen patient-centered transportation solutions. The following documents were produced as part of this transportation initiative.

- **Transportation & Health Access: A Quality Improvement Toolkit. Using a Continuous Quality Improvement Process to Reduce Missed Appointments Due to Transportation Barriers (Health Outreach Partners, 2019)**
  This toolkit was created to assist health centers with assessing the scope of the problem of missed medical appointments due to transportation barriers and implementing the Plan-Do-Study-Act (PDSA) cycle, a continuous quality improvement (CQI) process, to find patient-centered solutions. Link: https://outreach-partners.org/2016/10/19/transportation-quality-improvement-toolkit/

- **Rides to Wellness Community Scan Project (Health Outreach Partners, 2017)**
  The purpose of this project was to determine the impact of transportation barriers on health care costs and to highlight existing patient-centered transportation solutions. This report

includes profiles illustrating communities that are adopting patient centered transportation solutions that show promising opportunities for return on investment. Link: https://outreach-partners.org/2017/06/23/rides-wellness-community-scan-project/

Dialysis Transportation: The Intersection of Transportation and Healthcare (2019) is from the Transit Cooperative Research Program and responds to major concerns of public transportation agencies on the rising demand and costs to provide kidney dialysis trips and how these trips require more specialized services than public transportation is designed to provide. https://www.nap.edu/catalog/25385/dialysis-transportation-the-intersection-oftransportation-and-healthcare

Transportation voucher/ reimbursement programs

Deep East Texas Council of Governments (DETCOG) Transportation Voucher Program

https://westerntransportationinstitute.org/wp-content/uploads/2019/02/4W6998_DETCOG-Trans-Voucher_Final-Report_FINAL_Jan2019_wcover_2.pdf

Mobility Management Resources

"Mobility management is a transportation strategy that focuses on meeting community needs through the coordinated use of a variety of transportation providers including public transit, private operators, cycling and walking, volunteer drivers, and others." (Oklahoma Mobility Management Program, 2026.) See links below for more information on statewide mobility management programs in Kansas, Oklahoma and Ohio.

- Kansas has a mobility management program divided into 10 coordinated transit districts. https://ksrides.org/kansas-mobility-management/
- Oklahoma's Mobility Management Program website includes steps for starting a program, funding sources and a history of mobility management. https://okmm.multiscreensite.com/
- Ohio's Mobility Management Program website provides program details and links to various guidance. https://www.transportation.ohio.gov/programs/transit/transit-funding-resources/mobility-management

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