

ICLD

Learning Case



Cape Town's Quest for Accessible Transportation¹

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Photos: Description: A MyCiti bus at Civic Centre Station, Cape Town

Photo Credit: Jarrett Stewart, creative commons

1. Learning Objectives

- Examine city councils' role in disability-related issues including access to transportation and public spaces
- Consider the experiences of people with different types of disabilities who navigate transportation in urban settings
- Understand South Africa's obligations towards people with disabilities
- Consider how cities like Cape Town might meet obligations that require significant resources
- Consider what forms of consultation and monitoring are necessary for an effective, accessible transportation system

2. Case Description

Dilemma

In 2011, 2.8 million people (7.5% of the population) in South Africa lived with a disability (Statistics SA, "Census 2011" 2014). People with disabilities spanned all racial and socioeconomic groups, with 36% of those with disabilities from "households of poor socioeconomic status" (Department of Women, Youth & Persons with Disabilities, n.d.). "People with disabilities" is an umbrella category including people with difficulty seeing, hearing, communicating, physical disabilities that affect walking and movement (including the need for assistive devices such as wheelchairs, scooters, crutches, walkers and canes), and cognitive difficulties (difficulties in remembering, concentrating and understanding) (Statistics SA, "Stats SA Profiles" 2014). People with disabilities faced a number of social, attitudinal, structural and infrastructure barriers that inhibited their full participation in society. They were less likely to attain higher education, less likely to be employed and more likely to live in poverty than those without disabilities (Statistics SA, "Census 2011" 2014).

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With a population of just under 4 million in 2011, Cape Town is a sprawling metropolis nestled between mountains and the coast in South Africa's Western Cape Province. It is the province's largest city, home to the nation's parliament, and one of the country's three capitals.² It was a diverse city in 2017: 42.6% of people identified as Black African; 39.9% as Coloured³; 16.5% as white and 1.1% as Asian (City of Cape Town 2017). The combination of the city's geography and the legacy of apartheid's racial segregation meant that many in Cape Town, particularly those from black and coloured communities, commute long distances into the city centre, emphasizing the need for effective transportation. An estimated 15% of the city's population lived with a disability, and, of those who were employed, 43.6% used public transportation (City of Cape Town 2014, p. 6-7). The Cape Town metropolitan area was served by mini bus taxis, private taxis, rail services, buses and ride share options. Though since 2009 it has been within the city's jurisdiction to operate public transit, most of the existing services were not owned or operated by the city. To fund a city-run transit service, the city would likely need assistance from other levels of government or private entities (see Boule and van Ryneveld 2015).

As in most African countries, most people in South Africa did not own private vehicles; instead, nearly 70% of households used the mini bus taxi service on a daily basis, with 21% using bus services, and nearly 10% using commuter rail services (Statistics SA, "National" 2014). Communal or public transit was therefore a critical link between people and resources – including services, education, and employment. Yet, these forms of transportation were rarely fully accessible to people with disabilities and presented barriers with respect to physical infrastructure and communication (i.e., accessing information about routes, stops, scheduling and tickets). The Western Cape Association of People with Disabilities (n.d.) noted that "[s]ustainable and affordable accessible transport for persons of all disabilities remains a challenge and is one of the largest barriers to the independence of persons with disabilities" adding that this was an area of active campaigning and engagement for the group. For people with disabilities, being unable to access transportation affected their access to places where they were able to enjoy other rights (i.e., the right to education [Article 26], the right to work [Article 23], the right to health [Article 25], the right to rest and leisure [Article 24], and the right to participation [Article 27]) (Universal Declaration of Human Rights, United Nations 1948).

Your Role

You are a city councillor on the Cape Town City Council. The Western Cape Association for People with Disabilities has approached you with concerns about the inability of their members to access transportation in the city. The city has already convened a working group with respect to a new bus system to be operated by the city. You have the opportunity to present to this working group. How do you proceed? Who do you involve? What do you advocate for? How do you convince your colleagues?

Background

Social and Economic Context

People with disabilities face a number of social and economic barriers in South Africa. As the country's Integrated National Disability Strategy noted, "The key forms of exclusion responsible for the cumulative disadvantage of people with disabilities are poverty, unemployment and social isolation (Office of the Deputy President of South Africa 1997). Socially, people with disabilities often are limited by other's attitudes toward them. This can include fear and misinformation about disability, concerns about

² Alongside Pretoria and Bloemfontein.

³ Each of these groups is diverse within itself including a variety of cultural, religious and language backgrounds. In South Africa, "Coloured" is both an apartheid-era classification referring to people who are mixed race, and a contemporary category used by people, particularly in the Western and Northern Cape, of San, Khoekhoe, Asian, African and European descent who have developed a unique culture after a "long process of mixing and acculturation" and who largely speak Afrikaans (World Directory of Minorities and Indigenous Peoples, n.d.). While some people proudly claim a "Coloured" identity, others reject the term.

contagion, beliefs that disability relates to curses, or viewing people with disabilities as “dependent” and “in need of care” (Office of the Deputy President of South Africa 1997). Some of these attitudes are based in what is sometimes called the “medical model” of disability (CANBC 2017), which focuses on providing care and treatment for people with disabilities, but seldom involves consultation with or leadership by people with disabilities themselves (i.e., programs *for* people with disabilities, not *by* people with disabilities). This approach does not recognize people with disabilities’ ability to contribute to, and be an active part of, society.

Another barrier includes people with disabilities’ disproportionate exclusion from the labour market. The Integrated National Disability Strategy notes several reasons for this exclusion, including “discriminatory attitudes and practices by employers” and societal “ignorance,” inadequate education and consequent skill development, inadequate access to training and rehabilitation, inadequate access to information, work environments that are inaccessible, and “inaccessible public transport” (Office of the Deputy President of South Africa 1997). These barriers to inclusion mean that poverty can be a predictable outcome of disability, both for the individual with a disability and for their families. Accessible transportation is a key barrier to two linked factors of social and economic inclusion: 1) education and training, and 2) employment.

Legislative and Policy Context



Description: Cape Town City Hall
Photo Credit: Martie Swart, creative commons

Social inclusion is defined as “the process of improving the terms of participation in society, particularly for people who are disadvantaged, through enhancing opportunities, access to resources, voice and respect for rights” (United Nations Department of Economic and Social Affairs 2016, p. 17). One way to guide social inclusion is through legislation and policies that give specific attention to people with disabilities and their inclusion in society. As the South African National Disability Strategy notes, “[a] human rights and development approach to disability focuses on the removal of barriers to equal participation and the elimination of discrimination based on disability” (Office of the Deputy President of South Africa 1997).

South Africa’s constitutional Bill of Rights specifically prohibits discrimination on the basis of disability (Government of South Africa 1996); however, the country lacks detailed legislation about how to implement this (Office of the Deputy President of South Africa 1997). At the policy level, however, there is some clear guidance on what the inclusion of people with disabilities looks like in practice. A 2007

National Public Transportation Strategy (“Towards 2020: Public Transport Strategy and Action Plan”) “focused on upgrading existing public transport and on Integrated Rapid Public Transport Networks whilst highlighting the need for 100% accessibility” (Zero Project 2014, Pillay and Seedar 2014). The National Building Regulations and Building Standards Act specifies that “people with disabilities should be able to safely enter [...] building[s]” and safely use facilities within (including toilets) (Disability Info South Africa n.d.).

Internationally, South Africa is a party to the United Nations Convention on the Rights of Persons with Disabilities (CRPD), and its Optional Protocol. Article 9 of the CRPD requires countries to “take appropriate measures to ensure to persons with disabilities access, on an equal basis with others, to the physical environment, to transportation, to information and communications” including accessibility of “buildings, roads, transportation and other indoor and outdoor facilities, including schools, housing, medical facilities and workplaces” that are accessible to the public, whether privately or publicly operated.”

Accessible Transportation



In South Africa is still heavily impacted by many facets of apartheid’s legislated racial inequality. Among other things, apartheid geographically separated different racial and cultural groups. This included greatly limiting access to land through the Native Land Act (1913) which left the majority black population with access to only 13% of the country’s land (South African History Online, “Native Land Act” 2021). The Group Areas Act (1950) took this spatial inequality a step further by establishing “bantustans” or “homelands” in rural areas remote from work opportunities, declaring them to be separate countries and restricting mostly black South Africans to specific areas based on their racial and cultural identity (South African History Online, “Group Areas Act” 2021). Although these laws were repealed decades ago with the advent of democratic majority rule, one of the ongoing legacies of apartheid is spatial division and inequality (Marais 2011, Rogerson and Nel 2016, Kenyon and Madlingozi 2022). Settlement patterns reflect “spatial economic disparities” where black and Coloured areas have higher levels of poverty and are less likely to have services, employment opportunities, recreation, shopping and high-quality infrastructure including sanitation, electrification and transportation (David et al. 2018). As a result, the country has a “highly distorted separation of people from both their places of work and most of social services required to live a productive life” (Thomas 2016). In this context, transportation is arguably “a basic human right, along with other important social services such as health and education” (Walters 2014). Mbara (2006)

argues that transportation cannot be addressed in isolation, with cities holding an obligation to develop land use policies and transportation infrastructure jointly (addressing both the location of key services and amenities and access to them) in order to meet the needs of residents.

In 2009 Cape Town's collective transportation system was a patchwork of privately run bus companies, privately owned minibus taxis, taxicabs and ride-shares (such as Uber), and government-run rail connecting the city to suburban and outlying areas. Each of these involved some barriers to accessibility. Mini bus taxis required the ability to use stairs, making them inaccessible to most wheelchair users and many others with mobility disabilities. The announcement of stops was typically either oral or visual, but rarely both, excluding those with hearing or visual impairments respectively. Rail services that connected people from outlying areas to the city were inconsistently accessible. Describing stairs, uneven surfaces and broken elevators, Ari Seirlis, the Chief Executive Office of the QuadPara Association of South Africa noted that for wheelchair users "[t]rains and platforms are particularly inaccessible" adding "[t]his denies wheelchair users opportunity to circulate, skills development opportunities and employment opportunities, especially those in communities where train services are provided" (quoted in Gontsana 2017). Other wheelchair users noted the lack of accessible bathrooms in train stations ("Train Stations Are Not Easy for Disabled People" 2015). In addition to these infrastructure barriers, financial accessibility also impeded access to transportation. Ride-share services such as Uber, could ease transportation by collecting people with disabilities from their homes and bringing them directly to their destinations but were offered at a premium price unaffordable to the many people with disabilities who were living in poverty. Shared forms of transportation also suffered from a number of cross-cutting challenges that affected all users, but may disproportionately impacted those with disabilities, including overcrowding, safety, timeliness, infrequent service, and gaps in the transportation network (Ngubane, n.d.).

3. Instructions

Discussion Questions:

- **Jurisdiction:**
 - What should a city's role be with respect to increasing social inclusion of people with disabilities?
 - Does the city have an obligation to provide accessible transportation? Why or why not? If not, who, if anyone has this obligation?
- **Funding**
 - If the city has an obligation to provide accessible transportation but does not have sufficient funds, what are some potential ways forward?
 - How should accessibility funding be prioritized in relation to other transportation-related costs (e.g., road construction and repair, inaccessible transportation, etc.)?
 - To what extent should the burden of cost-sharing fall on the transit user?
 - Should there be a premium cost for accessible transportation? What about this would be fair, and what about it would be unfair?
 - Should those without disabilities subsidise the cost of accessible transportation? What about this would be fair, and what about it would be unfair?
 - Is transportation a human right? Does the answer to this question affect how you might think about funding accessible transit?

- **Consultation**
 - Who should be consulted in developing accessible transportation?
 - (Consider: populations, city departments, other levels of government, private industry)
 - What should the city do if the majority population (without disabilities) opposes the investment in accessible transportation?
 - Who should be involved in monitoring or assessing the implementation of accessible transportation?
 - (Consider: populations, city departments, other levels of government, private industry)
- **Model**
 - What does accessible transportation look like?
 - Should it be an integrated system including all components of Cape Town’s current transportation network?
 - If so, how will it include the different owners, operators and stakeholders?
 - Should it be incremental, or focus on one component (for example, the proposed new bus system), or one area of the city (for example the city centre)?
 - Who might be advantaged or disadvantaged by these approaches?
- **Impact**
 - What could the impact of accessible transportation be?
 - Consider the impact on different populations of people with disabilities.
 - Consider the impact on different populations without disabilities.
 - Is there anyone for whom such a program might have unexpected negative implications? Who, or why? What can be done to alleviate this?
 - What are the long-term consequences of continuing to fail to meet the transportation needs of Capetonians with disabilities?

4. The Real Case Ending

What Happened?

South Africa’s hosting of the 2010 FIFA World Cup served as an impetus for a centralised, integrated system of public transportation modelled on a form of bus rapid transit (BRT) popular in South America (City of Cape Town, “About MyCiTi” n.d.). This system introduced a card-based payment system, commonly branded buses, designated bus lanes in high-traffic areas, fixed schedules and labelled stops, (City of Cape Town, “About MyCiTi” n.d.). The new bus system, named “MyCiTi,” was also intended to be part of an “integrated network of public transport services to create greater social and spatial equality and more efficient cities” (City of Cape Town, “About MyCiTi” n.d.).

“The City of Cape Town wants all citizens and visitors – with and without disabilities – to access public spaces and transport systems to use and enjoy the city to its fullest. For this reason, the City considers people with disabilities when it plans new facilities including buildings, transport infrastructure, signage, roads and bridges.”
(City of Cape Town, “About MyCiTi” n.d.)

In consultation with organisations of people with disabilities, the city developed a public transportation Universal Access Policy (Zero Project 2014) to make “all environments accessible to all people” at all stages of life to “the greatest extent possible, without the need for adaptation or specialized design” (City of Cape Town 2014, p. v). This comprehensive policy was in line with South Africa’s international human rights commitments under the CRPD, as well as national policies and best practices. The Universal Access Policy was intended to foster and support the “incremental implementation towards a more inclusive approach providing physical accessibility to all” across the full range of transportation elements in the city as well as related infrastructure such as “footways and road crossings” bus stops, taxi ranks and train stations, and incorporation into “the design of neighbourhoods and the built environment” (City of Cape Town 2014, pp. 2-4).

In practice, the policy only fully applied to the new bus service. Aiming to be broadly accessible to people with a wide range of disabilities and special needs,⁴ the MyCiTi bus service included structural features such as ramps at stations, kneeling buses for wheelchair users, textured surfaces to accommodate people with visual impairments, and audio induction loops to better accommodate those with hearing impairments at ticket booths (City of Cape Town, “Universal Access” n.d.). Integrated into the MyCiTi network was the Dial-a-Ride system of 24 retro-fitted wheelchair-accessible vehicles offering a “dedicated kerb-to-kerb service for people with disabilities who are unable to access mainstream public transportation services” (City of Cape Town, “MyCiTi: Dial-a-Ride” n.d.).

Cape Town was proud of their universal access policy MyCiTi bus system and how they led the way with respect to accessible transportation. There continued, however, to be gaps between policy and practice. While the MyCiTi infrastructure was generally functional damage occurred to ramps that was not always promptly repaired, inhibiting access for wheelchair users (Wheelchair Travel n.d.). People with disabilities also faced obstacles in accessing bus stops and stations due to uneven surfaces, the lack of sidewalks in some areas, and other physical obstacles. The Dial-a-Ride service was over-subscribed and some had to book a week in advance and wait multiple hours for service, making it impractical for commuting to work (Yoder 2017). Many were not able to access the service at all due to long registration waiting lists. Reflecting on protests due to COVID-19-related beach closures, Makgosi Letimile, a Capetonian who used a wheelchair, noted, “Covid made me realise that humanity understands accessibility – it is just that they choose not to do anything about it” (quoted in Guerrero Casas 2021).

Reflection Questions:

- What do you think of the City of Cape Town’s approach? What gaps can you identify?
- Does the approach of focusing initially on buses make sense? Why or why not?
 - Who does this serve well? Who is left out?
 - Do you feel the human rights of people with disabilities are fulfilled and respected through this policy?
- The city’s Universal Access policy is ambitious and ground-breaking. What are the advantages and disadvantages of developing policies that present objectives that are distant from the current standard?
- What elements of this case are unique to Cape Town's context and history? What elements are relevant to and applicable to other contexts as well?

⁴ The City lists “visually impaired persons, people in wheelchairs, senior citizens, young children, pregnant women and those with prams, passengers with luggage, passengers travelling alone at night, and passengers carrying large objects such as surfboards or bicycles” as groups they are aiming to accommodate (City of Cape Town, “Universal Access” n.d.).

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