

Transportation Need

Explore your transportation needs and how you meet them. Complete each box and continue the activity on the next page.

Why is having reliable transportation important to you?

What is your life like when you don't have reliable transportation?

What is your ideal way to meet your transportation need?

Transportation Barriers

- ☐ Suspended driver's license
- ☐ No vehicle insurance
- ☐ No vehicle
- ☐ Limited/no public transportation
- ☐ Money issues
- ☐ Schedule/Time to get places
- ☐ Childcare/transporting kids
- ☐ Other _____
- ☐ Other _____

Looking at barriers to transportation, what are your biggest stressors? Why?

What barrier do you want to start working on first?

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Goal setting is a good way to stay focused on what you want to achieve. Write what you want to accomplish in the next six months (short-term) and year (long-term).

Short-Term Goal
(6 months)

Long-Term Goal
(12 months)

You have a clearer picture of where you want to be in the future when addressing your transportation need. Write the barrier you identified on the previous page of what you want to start working on.

Action Planning

An action plan is a checklist for the steps or tasks you need to complete to achieve your goal. Be clear in what you want to accomplish when filling in the steps. Each step should be related to the identified barrier. This activity can be completed with your case manager if you are having difficulties thinking of steps.

Step 1: _____

What to do if I hit a barrier? _____

Step 2: _____

What to do if I hit a barrier? _____

Continue on next page

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Step 3: _____

What to do if I hit a barrier? _____

Step 4: _____

What to do if I hit a barrier? _____

If you need more steps, continue on back of worksheet or blank paper

Advocating for yourself

Sometimes we feel like our voice or need is not heard. Sometimes this happens when we are uncomfortable or when we feel powerless. Prepare your self by completing the 4 *W*'s and an *H* to meet your needs and ensure your issue is heard.

What is the issue: _____

When did it start: _____

Why is it important for you to get this addressed: _____

Who is affected by this issue: _____

How you want this issue to be resolved: _____
