

*Promoting Incentives for
Integrated Employment and
Self Employment in Illinois*

The Arc of Illinois

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THE STUDY

In 2002, The Arc of Illinois received initial funding from the *Chicago Tribune Charities, a fund of the McCormick Tribune Foundation* for the “Promoting Incentives for Integrated Employment In Illinois Project.” This project is dedicated to addressing the fact that over 80% of adults with mental retardation and other developmental disabilities in our state are unemployed.

This represents the highest rate of unemployment for any demographic group in the United States, and this trend has shown little change over the past ten years.

“Promoting Incentives for Integrated Employment and Self Employment in Illinois” Project of The Arc of Illinois plans to study these issues, build consensus among all stakeholders, and propose viable solutions to benefit all residents of Illinois.

EXECUTIVE SUMMARY

People with developmental disabilities want to work in their communities. Yet today, unemployment rates for individuals with developmental disabilities are estimated to be as high as 80% to 90%.

We have made great advances in special education, assistive technology, health care and community living. Yet today, we as a state have not made it a priority to work with individuals with developmental disabilities to find real employment opportunities in their communities.

In this report, ***Promoting Incentives for Integrated Employment and Self-Employment in Illinois***, The Arc of Illinois calls upon policy makers to raise the bar and make the employment of individuals with developmental disabilities a major priority.

In Illinois there are about 199,000 Illinoisans with developmental disabilities. We cannot, we should not, deny them the opportunity to become full partners in community living through supported or self-employment.

Many programs are available to us in Illinois, but little has been done to coordinate and implement important employment opportunities right here in Illinois such as:

- ✓ The Ticket To Work
- ✓ PASS Plans for Achieving Self Sufficiency
- ✓ Special Education Transition Planning
- ✓ Medicaid Buy-in Option
- ✓ Person-centered funding for Medicaid HCBS waivers
- ✓ Assistive Technology

Each year about 1,500 students with developmental disabilities exit the special education system. It is time to devote resources and opportunities to those students so they can become employed or self-employed in their home communities. We have the knowledge. We have the technology. We need the political will and leadership to make employment for individuals with developmental disabilities a reality in Illinois.

Introduction

The purpose of this paper is to review the history and background of integrated employment for persons with developmental disabilities, review pertinent legislation, and examine trends in policy and practice both nationally and in Illinois.

Included are a review of the transition process, a requirement of the federal special education legislation; an overview of the vocational rehabilitation system and its implications for persons with developmental disabilities; and a look at state agencies and their programs charged with serving adults with developmental disabilities in Illinois.

People with developmental disabilities have benefited from many major societal changes in the past century. Advances in medical care have allowed many people with developmental disabilities to survive, thrive and grow to adulthood and old age. Passage of the federal special education legislation in 1975 made access to free, appropriate public education a right. The Americans with Disabilities Act and the Rehabilitation Act have opened many doors for people with disabilities. Reauthorization of the Rehabilitation Act in 2000 and the Olmstead Supreme Court decision in 1999 have also had a major impact.

Assistive technology has also opened the door for people to be included and employed in their home communities. Yet, we are not applying what we know and have learned regarding employment here in Illinois for individuals with developmental disabilities.

Many challenges remain for persons with developmental disabilities in becoming fully integrated into their communities, including being integrated into our nation's workforce. Unfortunately, persons with developmental disabilities in Illinois appear to face many more challenges than their counterparts in other states.

Nationally, the unemployment rate for individuals with developmental disabilities is estimated at 80-90%. We cannot identify any new employment initiatives in Illinois for individuals with developmental disabilities within the past five years. There is a high demand for employment services. We know that about 1,500 individuals with developmental disabilities exit from special education each year. Employment options are few and far between for these former special education students. One of the best tools to assist individuals in gaining employment is the Social Security Administration's Plan for Achieving Self Support (PASS) work incentive.

Only 16 persons in Illinois had PASS plans according to the Social Security Administration's **SSI Annual Statistical Report, Table 33: Recipients benefiting from specified work incentives, by state or other area, December 2002** (www.ssa.gov/policy/docs/statcomps/ssi_asr/2002/table33.html)

Illinois, unlike many other states, continues to operate large state institutions, which are vastly expensive and consume a disproportionate share of revenue for a relatively small number of people. According to data compiled by The Arc of Illinois, the majority of adults with developmental disabilities in Illinois live with their families and do not receive government-funded supports and services (www.thearcofil.org).

Here is an overview of the current status of service delivery and employment for adults with developmental disabilities in Illinois:

Adults with Developmental Disabilities in Illinois - Facts and Figures

190,000 - Estimated number of adults (over 18 years) in Illinois with developmental disabilities (The Arc of Illinois, 2003)

17,000 - Estimated number of transition-age youth with developmental disabilities with IEP's in Illinois (OSERS, 2002)

8,439 - Number of adults with developmental disabilities participating in Medicaid Home and Community Based Services waivers in Illinois (IDPA, 2003)

2,880 - Number of adults with developmental disabilities residing in state-operated facilities in Illinois (The Arc of Illinois, 2003)

1,277 - Number of adults with mental retardation placed by DHS/DRS in competitive employment during FY03 (DHS/DRS, 2/04)

16 - Number of adults in Illinois with Social Security Administration Plan for Achieving Self Sufficiency (all disabilities) (SSA, 2002)

Many adults with developmental disabilities in Illinois do not participate in the "regular" workforce. Rather, the most available employment option is a sheltered workshop, work activity program or a developmental training program.

The Institute for Community Inclusion, Center on State Systems and Employment, reports that in 1999, only 11%, or 3,975 of the 33,925 adults with developmental disabilities being served in state-funded programs in Illinois participated in integrated employment. A comparison with other states of similar size and number of adults identified with developmental disabilities shows much higher rates of participation in integrated employment. During the same time period, 32% of the adults with developmental disabilities in Massachusetts and 20% of the adults in New York State participated in integrated employment.

www.communityinclusion.org/rrtc/Research/StateProfiles/States/Illinois.html

The vast majority of persons with developmental disabilities born today grow up with their families, attend public school, participate in their communities and have hopes and dreams for their futures- hopes and dreams that include working and living in their own communities.

While other states have expanded options for adults with developmental disabilities to have jobs in the community, few such options exist in Illinois. At the same time, state budget deficits and poor planning have affected existing programs, leaving adults with developmental disabilities exiting the school system with limited options, in spite of the transition mandate in IDEA.

The "Promoting Incentives for Integrated Employment and Self Employment Project" is dedicated to examining these issues, and forming alliances to implement systems change in Illinois.

The transition process and its implications for integrated employment.

To gain an understanding of integrated employment and its role in the lives of persons with developmental disabilities, it is important first to examine what is known as the **transition process**, which is mandated by the federal special education law IDEA (Individuals with Disabilities Education Act).

This legislation, originally passed in 1975, mandates a “free, appropriate public education” for students with all disabling conditions age 3-21 years old in the least restrictive environment (www.pacer.org). The passage of IDEA now means that all persons with disabilities exiting the school system today have been literally “born into” a system of entitlement to appropriate services in the least restrictive environment. However, actual implementation of IDEA continues to vary widely from state to state, as well as within each region of Illinois. Because of IDEA, families and students now expect to transition into the world of work as well (www.hrtw.org).

Transition planning is mandated to begin at age 14 years 6 months and must address the student’s transition to all aspects of adult life, including employment, post-secondary education, independent living, transportation, self-help skills, socialization, access to health care, and other supports needed on an individual basis. The transition plan is the key to employment opportunities to students with developmental disabilities. Like its counterpart, the Individual Education Plan, the transition plan should be considered as the legal document that maps out the path to employment for the student in special education. We cannot overstate the importance of the transition plan as a way of achieving employment after the student exits the special education system. Individuals must utilize the transition plan to the fullest extent to achieve competitive employment.

When students with developmental disabilities who are still attending school participate in transition and work-related activities which can and should include work-study programs, job training, vocational evaluation and actual work experiences, the requirement of IDEA to provide services in the least restrictive environment (LRE) continues to apply. We recommend that the transition plan needs to call for inclusive community employment experiences whenever possible. At all times these employment experiences should be indicative of the students’ employment goals. All employment experiences should also be compensated for with the proper social security taxes being withheld because those taxes will play another important role, which will be explained later in this paper. In short, real work for real pay, just like non-disabled students.

Transition planning allows the special education student to lay the groundwork for employment after the student exits special education.

The Arc and many other advocates recommend that the student utilize the transition years of 18 to 21 as a real work experience with as many as three separate work experiences each year. This formula then gives the student twelve different work experiences to draw upon as he determines the field of employment he is interested in pursuing. This process also enhances the opportunity of employment at those work experience placements. You should utilize the transition plan to achieve employment during the school year.

ADULT SERVICES ARE NOT MANDATED

We encourage the special education student and his family to take full advantage of the “mandate” of special education. This is because once the student exits the school system (via graduation, certificate of completion, and/or reaching age 21), the reality is that adult services are not mandated by law like special education services. So our advice to students and families is to utilize the special education mandate to lay the groundwork for employment and adult services.

After the student exits the special education system, the community service system may or may not have the resources to assist the young adult to become employed in the community. Often times the reality of the adult system is that the service delivery systems designed for adults with developmental disabilities typically were developed for a different population with different expectations i.e., a shorter life span, lack of appropriate educational opportunities and assistive technology, access to limited services in segregated settings only, and no expectation of participating in the “regular” workforce. (Hackett, 2002, personal communication).

Today, because of IDEA and the explosion of research on employment and people with developmental disabilities, people can be employed and yes, they can be self-employed as well.

The problem continues in Illinois that the adult system is much the same as it was thirty years ago with developmental training programs and segregated workshops providing most of the employment services for people with developmental disabilities. Other employment services such as integrated employment and self-employment have only been added to the system as state funding has allowed. Not all adult service providers provide integrated employment or self-employment opportunities in Illinois, so employment resources may vary in each region of the state.

You can see why it is critical to take advantage of the special education mandate and the transition plan.

The adult system is limited to state funding and priorities of the community service provider in your area. Often the funding and the priorities are different from the expectations of the special education graduate and the family. Great care should be taken during the transition planning process so that the student and the family are aware of the adult service system in their community and other resources that are available. Being aware of the adult system in your community will assist you through the transition. Plan an exiting from the special education system into adult services.

Division of Rehabilitation Services

As the student begins to consider exiting the special education system, as a part of the transition plan the student should develop a relationship with the Division of Rehabilitation Services and their staff in his area. Some advocates recommend that this relationship begin in the last three years of special education, others recommend the last year of special education. That choice is yours to make but that relationship can be a critical bridge to employment and the adult community system. The Division of Rehabilitation Services in Illinois can provide funding for job coaching, integrated employment and self-employment. You should do your homework and know what is available from the local Division of Rehabilitation Services office in your area. Under Federal Law, the Division has a mandate to serve individuals having the label of a “severe disability conditions.”

What is vocational rehabilitation? Vocational rehabilitation was first established by the federal government in 1913, with creation of the National Vocational Guidance Association. In 1916, Congress passed the National Defense Act, providing vocational training and education for members of the armed services. In 1918, the Smith-Sears Veterans Rehabilitation Act provided vocational training for veterans with service-related disabilities, and in 1920 passage of the Smith-Fess Act established limited vocational training, job placement, and counseling services for the general population of persons with physical disabilities. By 1935, every state had some form of vocational rehabilitation program (VR), although there was no mandate to serve persons with developmental disabilities. Vocational rehabilitation programs in the states are funded by the Rehabilitation Services Administration (RSA), part of the United States Department of Education, Office of Special Education and Rehabilitation Services (OSERS) (www.ed.gov/osers/rsa).

Employability and Employment Outcomes

In 1973, the Rehabilitation Act was passed which provided increased federal funding to states for vocational rehabilitation services, coordinated federal and state efforts to promote and expand employment for persons with disabilities and to prohibit discrimination against persons with disabilities in employment and job promotion.

Further, this federal law requires that first preference for vocational rehabilitation services must be given to those persons with the most severe disabling conditions. (Turnbull, Turnbull, Bronicki, Summers and Roeder-Gordon, 1989). The Rehabilitation Act also requires that the person with a disability must manifest “employability”.

The Rehabilitation Act was amended in 2001 to revise the scope of employment outcomes under the VR program. Effective since October, 2001, the “employment outcomes” of vocational rehabilitation programs means that outcomes in which the person with a disability works in an integrated setting. This can include full-time or part-time competitive employment, labor market, supported employment, or “other vocational outcomes”, but a sheltered workshop is no longer considered a positive employment outcome. Some have said that this change in the law in 2001 has led some vocational counselors to avoid serving individuals with severe disabilities.

Other outcomes include the vocational rehabilitation client’s ability to make an “informed choice” regarding participation in “extended employment” (non-integrated or sheltered employment), provided that the vocational rehabilitation program also makes available options to participate in integrated employment. In other words, “extended employment” cannot be the only option offered to a client (www.ed.gov/legislation/FedRegister/finrule/2000-1/).

Vocational rehabilitation programs do not typically offer specialized services and supports for persons with developmental disabilities. In many states, including Illinois, specialized vocational rehabilitation services are available for persons with vision and/or hearing impairments. Some persons with developmental disabilities may qualify for these services and supports if they also have a vision and/or hearing impairment.

Vocational rehabilitation programs state that they serve persons with all types of disabilities, as long as they meet the eligibility criterion and are considered “employable”.

Limited data is currently available from DHS/DRS regarding the numbers of clients served annually and their disabling condition(s). In 2004, The Arc of Illinois received correspondence from DRS (formerly ORS) indicating that: *“DRS serves a large number of people with mental retardation and other developmental disabilities in its vocational rehabilitation program. In FY2003, DRS served 8,189 persons with a primary disability of mental retardation. Of this number, 1,277 were placed into competitive employment during the fiscal year. These numbers represent 15.8 percent of all persons served by the DRS VR program and 14.5 percent of all persons placed into competitive employment during FY2003” (Douglas Morton, 2/10/04 email to The Arc of Illinois).*

DRS did not indicate the numbers of persons with other developmental disabilities (cerebral palsy, autism or epilepsy) whom they served.

In terms of data regarding numbers of persons with developmental disabilities in Illinois, considerable work remains to be done.

Some estimates can be derived from studying the annual reports issued by the Illinois State Board of Education and the Office of Special Education and Rehabilitation Services (OSERS).

If the numbers of students ages 14-21 and 18-21 are tracked for several years, bearing in mind that the only “developmental disability diagnoses” that are also considered “special education eligible diagnoses” are mental retardation and autism, an estimate of the numbers of young adults with these developmental disability diagnoses can be made.

OSERS (the Office of Special Education and Rehabilitation Services of the United States Department of Education) has Illinois statistics broken down by state/age/diagnosis for 2000-01 school year:

Age Range	Diagnostic category	# Students with DD*
12-17 years	MR= 13,375 Autism = 797	14,172
18-21 years	MR= 3,220 Autism = 183	3,403
OSERS Estimated total students with DD 2000-01 in Illinois		17,575

**This is not an accurate count- some students with developmental disabilities are listed under other special education categories (e.g. - orthopedic impairment, deafblind, Other Health Impaired).*

Furthermore, some students with developmental disabilities are in regular education, while others are non-attending or attend private schools. It appears that Local Education Agencies in IL did not use the “multiple impairments” classification for transition-age students (for 2000-01 school year). This classification is used for student data subsequent to 2001, often includes children with developmental disabilities (most frequently a

combination of cognitive and physical disabilities). (n.b. - this is interpretation of data by Arc of Illinois staff)

www.ed.gov/about/offices/list/osers/osep/index.htm).

As part of the federal State Partnership Systems Change Initiative, DHS/DRS conducted a demonstration transition project in three sites in Illinois (Chicago, DuPage County, and Springfield) for 360 young adults with physical, cognitive and mental health disabilities ages 16-21 who were also SSI recipients. This project involved collaboration between DHS/DRS, DHS/DDD and DHS/DMH and ended in 2003.

This is the only collaboration between DHS/DRS and DHS/DDD that is documented and available to the public at the present time. More information can be found at www.spiconnect.org.

The Adult Developmental Disability Service System

As with the Division of Rehabilitation Services, it is also critical to develop a relationship with the Individual Service Coordination organization covering your area. Contact should be made about three years from exiting the special education system. The Individual Service Coordination organization or ISC is the gatekeeper to the adult system in Illinois. The ISC's can provide great insight and advocacy on the adult service system in your area. You want and need a good working relationship with the service coordinators that work for the Individual Service Coordination organization in your area.

Adults with developmental disabilities who are receiving services in the community typically access them from private community providers who contract with the Department of Human Services, Division of Developmental Disabilities (DHS/DDD). Most adult services in Illinois are funded in part by Medicaid.

Medicaid Is The Key To Adult Services

Access to the adult service providers is made by contacting the Pre-Admission Screening Agent (PAS- also known as the Independent Service Coordination agency (ISC), an independent agency contracting with Department of Human Services, Division of Developmental Disabilities (DHS/DDD)

Medicaid is the key to adult services in Illinois. In the last year of the transition plan, you will want to add a goal to the plan that the student will complete a Level II Medicaid Screening with the Pre-Admission Screening Agent, which is free to the individual. This screening will determine if the student is eligible for Medicaid waiver services. Most individuals with mental retardation and/ or other developmental disabilities are Medicaid eligible if they have already been found eligible for SSI (Supplemental Security Income). For people with developmental disabilities, Medicaid is both a source of health insurance as well as a funding mechanism for adult services. Medicaid is the key to adult service in Illinois.

The Independent Service Coordination organizations serve a specific geographic area of the state. The ISC's are responsible for Medicaid eligibility screening and applying for state funding on behalf

of individuals with developmental disabilities. The ISC's also refer individuals to appropriate adult community services. The ISC's are responsible for referring applicants seeking state-funded residential services, completing and submitting applications for Medicaid Home and Community Based Services waivers for adults, and monitoring the delivery of services to clients approved for these waivers.

A listing of the 18 PAS agents, by region, can be found on the website of the [Illinois Lifespan Project at The Arc of Illinois](http://www.illinoislifespan.org) (www.illinoislifespan.org). Aggregate data on the numbers of persons served can be found on The Arc of Illinois website (www.thearcofil.org).

Many adult service providers operate multiple programs, including community living options, group homes, sheltered workshops, day training programs, and integrated employment.

Smaller numbers of adults with developmental disabilities may access private-pay services from grassroots community programs, for example, the Center for Independent Futures in Evanston (www.independentfutures.com).

In addition, some adults with developmental disabilities are participating in competitive, community-based employment, without the involvement of an adult service provider. This is often the result of a well-thought-out transition plan.

The only current source of data on this group of adults is the Social Security Administration (www.ssa.gov) which reports annually on the numbers of adults, by state, with mental retardation who leave the SSI rolls, or have their monthly benefits reduced, due to earned income. Persons with other diagnoses considered to be developmental disabilities are not reported by the Social Security Administration.

It is clear that much work remains to be done in order to collect accurate data about adults with developmental disabilities in Illinois, their participation in the workforce, and their access to needed services and supports.

Adult Services Are Funded Through The Home & Community Based Waiver

Illinois has a Medicaid Home and Community Based Waiver (1915(c) waiver), which serves adults with developmental disabilities. This waiver served 8,349 persons in "Waiver Year 2002", which ended on 6/30/02 (www.dpainline.com/hcbswaivers/dd.html).

Other Medicaid waivers for adults in Illinois serve persons with severe physical disabilities, persons with traumatic brain injuries, persons with AIDS and senior citizens. (Some individuals with developmental disabilities may be included in these waiver categories.)

Medicaid Is The Key To The Adult System

Adults (over 18) with developmental disabilities who have been found to be Medicaid waiver eligible through a Level II Medicaid Screening are eligible for an array of Medicaid-funded services. Those Medicaid eligible individuals should be given the choice of receiving employment services, in-home services, services in center-based day programs, and sometimes community residential options. Regarding community residential options, DHS/DDD has restrictions beyond Medicaid

eligibility, employment and residential options are not necessarily available in one's own community or region of the state.

The Center for Medicare and Medicaid Services (CMS) is the federal agency responsible for the Title XIX (Medicaid) and Title XXI (KidCare) programs in Illinois, both operated by the Illinois Department of Public Aid. (www.cms.gov)

What Is Integrated/Supported Employment?

The focus of this project, integrated employment for persons with developmental disabilities, is actually not a new idea.

In their 1989 work, *Disability and the Family: A Guide to Decisions for Adulthood*, Turnbull, Turnbull, Bronicki, Summers and Roeder-Gordon, defined integrated employment as “*people are employed in a setting where the work force consists mostly of people without disabilities. Workers with disabilities may receive varying degrees of support from outside service agencies, but they are still employees of the businesses in which they work. They are not employed by adult service agencies.*”

Supported employment is a form of integrated employment where the person with a disability, frequently a person with a cognitive or mental health disability, (Tashjian and Schmidt-Davis, 2001) works for pay in community settings with support in the form of training, assistance (including assistive technology), and job coaching. The job coach can be an employee of a human service agency, the state rehabilitation program, a co-worker, or other individual hired to provide customized support.

Integrated and supported employment opportunities are funded by either the Developmental Disabilities Home & Community Based Waiver or the Office of Rehabilitation Services. The funding is generally determined by the adult service provider in your area. Different rules and regulations apply depending upon which state agency is funding the service, so individuals have two options they need to evaluate depending upon their needs.

Individuals and families with the requisite financial resources sometimes hire their own job coaches and pay them privately (Hackett, personal communication, 2003). As another option, PASS plans can assist for the payment of job coaches as well.

Some rehabilitation services professionals regard job coaching as a support that needs to phase out within a designated period of time. Individuals with disabilities who require on-going job coaching in order to maintain employment may encounter challenges in working with rehabilitation services. (Mascia, personal communication, 2002). However, federal regulations are in place that recognize that individuals with severe developmental disabilities can access long-term job coaching.

Self-Employment for People with Developmental Disabilities

One of the most innovative recent trends in enabling people with disabilities - including those with developmental disabilities - to be included in the mainstream workforce is through self-employment.

National leaders in this effort are Cary Griffin and David Hammis, from Montana, affiliated with Griffin-Hammis Associates and the Rural Institute at the University of Montana.

Citing major changes in the workplace, particularly correlated to the economic upheaval of the past decade, Griffin and Hammis explain that *“there is no longer a clear line between so-called conventional employment and self-employment.... workers often look for employment opportunities that allow greater control of their lives and their futures. Self-employment gives workers new options: In light of these changes, it is not surprising that people with disabilities consider the range of self-employment options when seeking possibilities for themselves.”*(Griffin and Hammis, 2003).

Griffin and Hammis emphasize the need for sound knowledge of both the world of business and the parallel universe of traditional supports and services for persons with significant disabilities. By utilizing creative planning and support strategies, taking advantage of new opportunities such as Social Security Work Incentives, the Ticket to Work, and person-centered funding (also known as “cash and counseling”), self-employment can be a viable option for people with developmental disabilities who would otherwise be relegated to sheltered employment or no employment opportunities at all.

As Griffin and Hammis explain, *“Self-employment, as described in their book, is the next logical step in the evolution of supported employment technology. Because all people who are self-employed use, create, and purchase a variety of supports - ranging from accounting services to sales representatives- owning a business meshes well with the American Dream, and with the commitment of rehabilitation professionals, family members, friends, and neighbors to assist people with disabilities in achieving typical lives. Owning a business can be one of the least stigmatizing forms of employment for individuals with significant disabilities because the opportunity to gently rely on ongoing or time-limited rehabilitation services coexists with typically purchased business supports.”* (Griffin and Hammis, 2003).

Their new book, **“Making Self-Employment work for People with Disabilities”** is highly recommended.

For more information on Self-Employment, go to: www.griffinhammis.com

The traditional approach to including people with developmental disabilities in the workforce in Illinois has both had little success in terms of actual participation in employment of any kind and in the percentage of people served. Most adults with developmental disabilities in our state do not work and do not receive needed community services and supports. Often times they face long waiting lists for community services, both employment and community living options.

Now is the time for Illinois to move forward with flexible, person-centered centered funding, which can be utilized to enable people with developmental disabilities to become employed and taxpayers.

Under the auspices of The Arc of Illinois, training to promote self-employment is being made available to consumers, families and service providers in our state. Griffin and Hammis combine extensive business experience with in-depth knowledge of the vocational rehabilitation and government benefits systems. Their practical experience in supporting consumers to start their own

businesses, and in training others to make the paradigm shift from “serving clients” to “promoting self-employment” needs to be replicated in Illinois.

Consumer and Family Perspectives

Consumers with developmental disabilities and their families should be regarded as the “team leaders”, collaborating with providers, employers and other professionals to achieve integrated employment outcomes, as well as integration into all aspects of community life. Unfortunately, this is not always the case, and many consumers and their families continue to encounter numerous attitudinal and logistical barriers.

Here are some comments from families and consumers who have transitioned from the school system, and reside in varied locations throughout Illinois. These individuals and families have graciously shared their time and insights from their own transition experiences with us.

Integrated Employment- some thoughts from families and consumers

1. Male, age 36, Stephenson County. (Interviewed jointly with his father).

R. is an articulate adult with Down syndrome who is employed full-time at a local hospital as a janitor. He has worked in the position for the past six years. He graduated from high school at age 21 after receiving special education services. He enjoys his current job very much, and travels to work by bicycle or walking, or receives a ride from his parents if the weather is bad. He lives at home with his parents, and is very active in community activities and self-advocacy organizations. He has held a variety of jobs since leaving school. Many of the jobs, including his present position, were obtained via his family’s involvement in their community. For a short time, R. received job-coaching services provided jointly by the adult developmental disability provider agency in his area, and the DHS Division of Rehabilitation Services. He is paid a competitive wage of \$6 per hour for his full-time job, plus benefits including health insurance. He does not receive any government benefits or participate in government-funded programs at this time.

2. Female, age 53, Sangamon County

D. is employed as a live-in Personal Assistant (PA) for a woman who has a physical disability. She has held this private-pay position for 37 years. D. is a very articulate person who has Down syndrome, with speech and hearing impairments. She attended only a few years of primary school and lived in a nursing home and in an institution while she was growing up. She has been driving for many years, and is involved in self-advocacy activities. Her health insurance is through Medicare and she also receives Social Security (SSDI). She is not involved with any government-funded programs, but did work briefly with the (then) Office of Rehabilitation Services some years ago. Her advice for other adults with developmental disabilities is to remember that you have a right to work, and recommends a career as a PA as a good choice to explore.

3. Male, age 40, Suburban Cook County (interview with mother/guardian)

J. lives with his mother in suburban Cook County. He has a cognitive disability, hearing impairment, and severe asthma. He attended special education classes until his graduation at age 21. He attended a regular high school in his community during his final year of schooling. At the present time, he participates in adult programming with a developmental disability provider agency in his area. He works at a local public golf course 2 days per week, 2 hours per day, in a job sharing arrangement with other participants from his program. His duties at the golf course include collecting garbage, washing golf carts, cleaning and stocking the bar. He takes great pride in his job and in wearing the golf club uniform on his workdays. During the rest of the week, J. works in the workshop at his provider agency and participates in a Day Training program, which he also enjoys. J. travels to and from work on agency vehicles, utilizing his PACE paratransit card to pay a discounted monthly fare. He receives health insurance through his mother's employment and is also enrolled in Medicaid. He participates in the DHS/DDD Home Based Assistance program but does not currently work with an Independent Service Coordination (ISC) agency. (His mother fulfills this role.) His mother expressed her concern about how the current tight job market has a particularly great impact on job opportunities for adults with disabilities.

4. Male, age 20, Will County (interview with mother)

T. is a 20-year-old male with Down syndrome. He has graduated from high school and is currently enrolled in his school district's Transition Program. (This is a program for young adults with IEP'S, ages 18-21, based at a community site and includes outings, group activities and preparation for independent living.) He continues to be active in the Special Olympics team at his high school. Through the school district vocational coordinator, T. has found his present job at a light manufacturing plant in a nearby town. He currently works 2 full days per week and earns a competitive wage. He travels to work via school bus, and his parents pick him up at the end of his workday. Accessing paratransit services continues to be challenging. His family is considering moving to an adjacent county with better transportation services when T. turns 21 and is no longer eligible for transportation services from his school district.

T. is not involved with DHS/DRS or any community-based provider agencies. He receives SSI and SSDI and is enrolled in Medicare. He is also covered by his parent's health insurance. He does not require services from a job coach at his current job.

He has had many previous work experiences, starting in middle school. He worked at a large grocery store for 2 years as a bagger and is planning to apply for a position at a new grocery store opening in his area.

His mother is glad that she allowed him to participate in many community-based work experiences during his high school years, rather than focusing on his remaining on campus and taking classes. She says that he is a "doer", not a "book learner", and greatly benefited from the hands-on work experiences arranged by the school vocational coordinator. She says his school did a great job of preparing him for work.

T. hopes to be able to leave home and live on his own. His family is currently exploring housing options together with other families of young adults with developmental disabilities in their area.

5. Male, age 24, Suburban Cook County (interview with mother)

D. is a 24-year-old male who lives at home with his family in suburban Cook County. He has a developmental disability and is legally blind. He attended his local high school, participating in special education classes and received a certificate of completion at age 21.

This summer, D. is working as an assistant counselor at his local park district's day camp, earning \$7.45 per hour. During the year, he works on weekends for the park district assisting with football and basketball games and operating the scoreboard. He also volunteers 2.5 days per week as an activity assistant at a local children's museum.

D. was offered the park district jobs through personal contacts he made during the many years that he was a camper at the day camp.

He found the volunteer position at the museum through personal contacts (his former Lekotek leader is employed at the museum). He travels to and from work on his bicycle or gets a ride from his mother.

During the initial 2 years after high school, D. was employed by the high school in a paid position, 30 hours per week, doing recycling and messenger work. This position ended after 2 years.

D. is planning to contact DRS again as he is eager to find full time, paid employment.

He participates in the DHS/DDD Home Based Assistance Program, and in the Traumatic Brain Injury (TBI) Medicaid Waiver. He has health insurance through Medicare and Medicaid.

His mother reports that she has been primarily responsible for all aspects of her son's transition. She states that his lack of full-time employment and supports makes it difficult for her to work.

6. Male, age 20, Suburban Cook County (interview with mother)

J. is diagnosed with autism and lives at home with his family. He has officially graduated from his local high school, attending special education classes, but has "shelved" his diploma and is enrolled in an alternative transition programming for youth with IEP's. His program includes attending a local college 2 days per week in a career exploration program for high school students, as part of his IEP (paid for by the school district). The other 3 days he is slated to participate in job training in his community. He has been referred to YouthAbility, a volunteer program for high school students with disabilities, sponsored by the Jewish Vocational Service (www.jvschicago.org) and is currently awaiting placement in a volunteer position.

J. previously held jobs at his high school, during the school day, as part of the DHS/DRS STEPS program. These jobs included work in attendance services, data entry and food service. He also received mobility training in high school and is able to travel independently on public transportation (local bus system), and will walk around his community. He has health insurance coverage through his parent's employment and is in the process of applying for SSI and Medicaid. J. does not receive any services from DHS/DDD or DHS/DRS at the present time.

His mother has 3 recommendations concerning transition for young adults with DD and their families: 1) Join The Arc of Illinois and get involved with legislative advocacy (www.thearcofil.org); 2) Contact the Center for Independent Futures (www.independentfutures.com) for information about future planning; and 3) emphasize self-advocacy and job training in the community for your child.

7. Female, age 24, Lake County (interview with mother)

E. is a 24-year-old woman with Down Syndrome who lives in Lake County with her family. She graduated from high school at age 21 with a diploma after receiving special education services from the special education cooperative in her region.

She currently works part-time, 4 hours per day, 5 mornings per week at a popular coffee shop/restaurant in her area. She travels back and forth to work via taxi, using subsidized fare coupons provided by her town (a free-standing subsidized transportation program for senior citizens and persons with disabilities). She receives minimum wage for her job and her duties include making coffee drinks to order, cleaning and bussing tables, filling condiment dispensers and newspaper racks. E. began working in this job while she was still in high school. She has held this job for 4 years. This was one of several job placements arranged by the transition coordinator from her special education cooperative. When she started the job, she received some short-term job coaching from DRS and now has a job coach who checks in on her on an intermittent basis. E. previously held another part-time job in the afternoon but had to give it up due to lack of transportation options.

She is covered by her father's health insurance, and also is enrolled in Medicaid and SSI. She is not involved with any programs or services funded by DHS/DD.

She participates in special recreation programs in her community, and is able to stay home alone while her parents are at work.

E.'s mother stresses the importance of taking full advantage of transition services and supports while your young adult child with DD is still in school. She attributes her daughter's success in getting and holding a job to the pro-active transition staff at their special education cooperative. She perceives the current offerings from adult service providers in her area to be less than adequate in terms of scope, appropriateness and commitment to work in the community. E. would like to leave home and has explored housing options, but she and her family continue to search for an appropriate setting in their local area.

8. Male, age 47, Suburban Cook County

M. is a 47-year-old man who has cerebral palsy. He is employed part time in a bank in the customer service department.

He resides in a CILA (group) home run by a community provider. M. graduated from a regular education high school program at a state-run residential facility for students with physical disabilities in Chicago and completed two years of college.

He has Medicaid health insurance and also receives SSI.

M. travels to and from work using CTA Paratransit and considers himself fortunate to be able to access rides when needed.

He is active in disability advocacy organizations and two Centers for Independent Living.

M. is not currently involved with DRS but had worked with them in the past when his VR counselor found him a job as a receptionist at a social service agency. He obtained his present job via personal contacts.

His advice for other consumers and their families is to work with school personnel and begin career exploration before the 8th grade. Be sure to put employment goals in the IEP and inform guidance counselors and transition staff that people with developmental disabilities are interested in competitive work rather than working in a workshop. He encourages other consumers to be creative in thinking about different kinds of work to pursue.

9. Male, age 23, Chicago

A. is a 23-year-old man who has a developmental disability and lives in Chicago with his family.

He graduated at age 21 from a special education high school in Chicago, and has been working for the past 6 months at a home improvement mega-store in the city. He works part-time handling the shopping carts at this store. A. found his job through the job placement coordinator at a community developmental disability provider. The transition counselor at his special school referred him to this agency. He travels back and forth to work on the CTA el train, after having received travel training while still in high school. A. is able to travel independently on public transportation, both train and bus. He has Medicaid health insurance and also receives SSI. He does not receive employee benefits from his job at the present time. A. reports that he attempted to work with DRS in the past but experienced difficulties in maintaining communication with his vocational rehabilitation counselor. He does not participate in any programs or services from other agencies. A. wants to tell other young adults with developmental disabilities that “you can work”! He would like to be able to live on his own in the future but is not currently working on this goal.

Other consumers and families recently in contact with The Arc of Illinois continue to experience systemic barriers to achieving desired transition outcomes:

My son’s job coaches keep quitting because we have to wait so long for payment from DHS, and I can’t afford to front the money. The entire amount of his Supported Living check goes to pay for a job coach. The DRS counselor keeps telling us “you belong in a workshop and would be better off there” (parent, Winnebago county, adult son employed in retailing).

My adult child was referred by DDD to a “supported employment program” where the program manager’s title is “Vocational Evaluator”, the staff are called “Job Coaches”, and the program is situated in the “Employment Services” division of the agency, but no one has a job, is being trained to get a job, or is even thinking about working (parent, suburban Cook County, adult daughter doing in-house volunteer work initiated by family).

My son graduated from high school in Chicago (from EMH program), attended City College Special Ed program, and now is home doing nothing. We keep going to the DRS Counselor and are always told that nothing is available. He is able to take public transportation alone and has applied for many jobs. What should we do? (Parent, Chicago, adult son staying at home).

My daughter has a regular high school diploma and attends the community college in our area, taking one course at a time, when I am able to go with her. I am her PA, provide her transportation, and provide her with daytime nursing care. The DRS counselor keeps telling us that she is “too severely disabled” and “too medically fragile” to work. We tried to get DD services (like respite) for her, but were told, “Your daughter is not considered developmentally disabled”. We lost our family health insurance, which had paid for her nursing services, and finally got her on DRS Home Services just 7 hours a night so I can sleep. She wants to work and to get out of the house. (Parent, Lake County, adult daughter staying at home).

In recent years, some cutting edge programs have been initiated by service providers and families. One exciting example in the Chicago metropolitan area is the Center for Independent Futures (www.independentfutures.com). The Center has developed unique vocational and residential program options. This organization, and a few other similar groups, serves persons with developmental disabilities. However, these innovative programs are private-pay only programs, thus limiting the numbers of consumers who can participate.

There is not currently a single information source, or umbrella organization, where consumers and families can access information about these non-traditional, grassroots initiatives. Consumers and families who must rely upon government funding, typically via a 1915(c) Home and Community-Based Medicaid waiver, often have fewer options to choose from.

Illinois Life Span Project Can Assist

The **Illinois Life Span Project**, at **The Arc of Illinois**, maintains an ever-expanding database of programs, options, and resources statewide. Families, consumers and professionals can contact Illinois Life Span directly to access this information (www.illinoislifefspan.org). This program is funded by the Illinois Council on Developmental Disabilities. There is not another information and referral resource in Illinois at this time that is statewide and is dedicated to persons with developmental disabilities of all ages.

Transition Is A Family Issue

When adults have significant developmental disabilities and are unable to travel alone, to work without ongoing supports, or even to stay at home unattended, options can be limited. While many local communities have made significant progress in the past decade in expanding inclusive day options for school age children, and also developing more “senior day care,” adults with developmental disabilities have sometimes been overlooked (www.nfcacares.org).

Our current system is stretched too far. Unfortunately in Illinois many consumers and families do not have the opportunity of choosing between day training, sheltered workshops and integrated employment because employment opportunities are not readily available in many areas of the state.

Receiving some services, even if they are not what is desired, may be the only option. Family caregivers of adults with developmental disabilities must work, care for other family members, and manage their households and daily responsibilities.

When the state service delivery systems and restrictive funding mechanisms do not live up to hopes and aspirations of consumers and families, many families are simply too worn out, too overextended, and simply “too old” to continue to fight the system (Personal communication, Hackett, 2002).

The family caregiver issues seem rarely to be discussed in the larger arena of integrated employment opportunities for adults with developmental disabilities. Even the family caregiver movement seems sometimes to operate on the assumption that the family caregiver typically cares for their parent and/or spouse rather than an adult child with a disability.

This is an area that warrants further study- what supports do families of adults with developmental disabilities need in order to have integrated employment be a viable option for their family member?

Transportation, access to medical services, and ongoing support of a personal assistant (PA) and/or job coach often fall on the family to arrange and implement.

In order for persons with significant developmental disabilities to succeed in integrated employment, supports must be available to address their “non-work” needs as well.

A parallel can be drawn to the TANF “welfare-to-work” programs, which find that their success or failure is predicated upon the availability and quality of “wrap-around” services such as health care coverage, transportation, and child care, in addition to vocational training and employment counseling (Skinner, 2002).

Many of today’s adults with developmental disabilities were never expected to live until adulthood, let alone complete school and seek employment (www.hrtw.org).

“In addition to the increase in absolute number of aging adults with developmental disabilities, there is a notably large increase in their life expectancy. The mean age at death for persons with developmental disabilities was 66 years of age in 1993, up from 19 years in the 1930’s and 59 years in the 1970’s. (Janicki, Dalton, Henderson, & Davidson, 1999).

Mary Helen Witten, Project Officer at the Centers for Disease Control and Prevention, National Center on Birth Defects and Developmental Disabilities, has termed this phenomenon “an epidemic of survival” (CDC/Bright Futures Grant Meeting, 1/08/04, Boston, MA).

In practical terms, this means that the current service delivery system is not prepared to deal with the growing numbers of baby boomers and their adult children with disabilities who have been raised at home, attended school under the mandate of IDEA (Individuals with Disabilities Education Act), received transition services and expect to take their place in the workforce and in their own communities. Due to the vast improvements that have taken place in terms of medical care and educational opportunities, today’s adults with developmental disabilities have not only survived but also thrived.

The Challenge Is Ours

We need to continue to work collaboratively with consumers, families, providers and policy makers to meet this challenge.

Integrated employment is not new but is still regarded as unique in society at large. The institutionalization and segregation of people with developmental disabilities, although uncommon today, was pretty much a national norm for much of the 20th century in the United States. The most significant changes in the way people with developmental disabilities access services and supports occurred in the last 25 years, following the passage of the national special education legislation, Education of the Handicapped Act (now IDEA: the Individuals with Disabilities Education Act) in 1975.

Medicaid waivers for home and community-based services began only in the 1980’s.

A small percent of individuals with developmental disabilities have also participated in the mainstream workforce, with or without vocational rehabilitation services.

However, the concept of persons with developmental disabilities whose accommodation needs include integrated employment services is still emerging, and models of this practice are not well known or widespread in the private sector.

The National Organization on Disability reported in 2000 that only 8% of adults with very severe disabilities are employed. (www.nod.org/content.cfm)

Since passage of the Americans with Disabilities Act and subsequent litigation related to workplace accommodations, some employers may even be fearful of hiring persons with developmental disabilities. In actuality, most of the employment-related ADA litigation has not pertained to persons with developmental disabilities.

Next Steps

On the national level, many resources related to integrated employment exist, and statistical information is increasingly available.

Research and demonstration projects in this field have been ongoing for more than twenty years.

The number of people with developmental disabilities who survive into adulthood has increased greatly during this time, including people with severe and complex disabling conditions. The new generation of people with developmental disabilities, those who have grown up at home with their families, attended public schools, and participated in community life, expect to join the workforce as adults.

Unfortunately, it seems that we are still paying the price for the long legacy of institutionalization and segregation of people with disabilities in our society.

As early as 1988, Bellamy, Rhodes, Mank and Albin stressed in their work: ***“Supported Employment- A Community Implementation Guide”***, stressed that supported employment would not succeed at the community level if it was merely added to existing day treatment and workshop programs, instead of replacing them.

In many instances, this appears to be what has indeed transpired. In Illinois, large state institutions still exist, and many community organizations still operate programs that “add on” limited supported employment opportunities, while still maintaining traditional day activity and workshop programs for the majority of the people they serve.

Much work remains to be done in Illinois to foster collaboration and system change.

Individuals with developmental disabilities need to be seen as customers. They have the ability to make decisions and choices regarding where they will work, live, and spend the dollars allocated for the services and supports they need. As Illinois is aggressively working to get more Medicaid funds into the developmental disabilities system, individuals who are eligible for Medicaid services will have a “choice” of services as well as the portability of funding.

People need informed consumer choices, a single point of entry and incentives for adult community providers to provide integrated employment opportunities.

Specialized training opportunities for service coordinators, transition coordinators, case managers, QMRPs (qualified mental retardation professionals), consumer and family leaders, advocates, and employers should be developed, focusing on promoting “doing” integrated employment. Training should also be held on understanding transition planning, the Ticket to Work, One Stop Shops, Medicaid buy-ins, and coordinating developmental disability services with rehabilitation services.

The new legislation requiring data collection regarding people with developmental disabilities in Illinois, should address issues such as participation in rehabilitation services, employment outcomes, and SSI status.

Other divisions of DHS dealing with job training and employment issues (such as TANF) should be required to document the numbers of persons with developmental disabilities whom they serve, and to collaborate with DHS/DDD on their behalf.

The Department of Public Aid (IDPA) should be required to maintain the numbers of Medicaid recipients who have developmental disabilities and also get Supplemental Security Income (SSI).

Only by tracking participants across programs and departments will more accurate statistics for the numbers of adults with developmental disabilities in Illinois be developed. Having more accurate statistics should serve as a catalyst for system change, towards integrated employment and integrated lives for adults with developmental disabilities in Illinois.

The development of specialized technical assistance teams available to do “hands on” consultations and trainings for consumers and providers getting started in integrated work should be piloted and evaluated. Peer mentoring initiatives for employers should be promoted, and integrated employment practicums offered in schools of business administration.

As we strive to reform the existing system, we should also commit resources to pre-service education for the community leaders of tomorrow in business-related fields as well as in human services.

In short, many challenges remain for us to address in Illinois. Integrated employment is a part of having an “integrated life” for adults with developmental disabilities.

We need to find new ways to ensure that all residents of Illinois, including people with developmental disabilities, can participate in the workforce in order to strengthen our economy and our communities.

RECOMMENDATIONS

The following is a summary of The Arc's recommendations for promoting integrated employment and self-employment for people with developmental disabilities in Illinois:

- 1. The state budget should plan for funding integrated employment services for students with developmental disabilities exiting the special education system.**
- 2. Financial incentives for integrated employment opportunities should be developed for adult community service providers.**
- 3. Pilot self-employment initiatives should be implemented in every special education district in the state.**
- 4. Funding for integrated employment services must be portable and flexible as the needs of the individual change.**
- 5. A network of independent fiscal intermediaries needs to be developed. Fiscal intermediaries should be able to contract directly with waiver recipients to manage their funds and pay directly for supports needed for employment and community living.**
- 6. All state agencies and entities contracting with state agencies must meet minimum standards (quotas) regarding the percent of employees with developmental disabilities hired by them (with or without supports).**
- 7. Work with the Illinois State Board of Education (ISBE) to implement hands-on integrated employment experiences prior to graduation/school exit for all students with IEP's who have developmental disabilities.**
- 8. Each student should have the opportunity to experience at least 3 (three) different real work experiences per year, for the last three years of school enrollment, for a total of 9 (nine) different work experiences prior to graduation/school exit.**
- 9. Work with ISBE to include on transition plans that are part of student's IEP's (from age 14 on) an indication as to whether or not the student has a developmental disability-regardless of the student's special education classification, collect data on this, and refer students to DHS/DDD for collaboration.**
- 10. Recommend that DHS/DRS identify all current and new clients who have developmental disabilities and share this data with DHS/DDD.**
- 11. Recommend that DRS and DDD- within DHS- work collaboratively to support clients with developmental disabilities and provide all needed supports.**
- 12. Recommend that the University of Illinois at Chicago, Division of Specialized Care for Children, identify all of their clients who have developmental disabilities, both in the Core Program and in the Home Care Waiver which they administer, and work collaboratively with IDPA, DHS/DRS and DHS/DDD on their transition planning, including opportunities for integrated employment with appropriate supports.**
- 13. Recommend that service coordinators employed by Pre-Admission Screening Agents participate in yearly in-service training on integrated employment and self-employment.**
- 14. Recommend that Pre-Admission Screening agents offer integrated employment opportunities and self-employment opportunities to clients seeking services and work with them to coordinate needed supports.**
- 15. Develop "seed money" for micro-grants and/or low-interest loans for consumers wishing to be self-employed for start up costs, including supports.**

16. Develop opportunities for persons with developmental disabilities and their friends/families to start cooperative living and housing arrangements (co-housing), with jobs both on-site and in the community.
17. Recommend that all departments of the Department of Human Services identify their clients with developmental disabilities and inform them about integrated employment opportunities (for example, persons seeking TANF services).
18. Recommend that DHS/DRS identify all participants in the Medicaid Home and Community Based Waivers, which they administer (the Home Service waiver, Brain Injury Waiver and AIDS Waiver) to see if they have developmental disabilities as well, and to work collaboratively with DHS/DDD to assure them access to integrated employment opportunities.
19. Recommend that the approximately 8,000 people with developmental disabilities now being served in Day Training (DT) programs have the choice to redirect the resources allocated to them to employment opportunities, including self-employment.
20. Recommend that students with IEP's who are employed during their transition years in "work-study" arrangements have all state and federal taxes matched by their employers and deducted from their paychecks. By having sufficient quarters of employed status "deemed" by Social Security, this can enable people with developmental disabilities to access SSDI and Medicare.
21. Recommend to DSCC and IDPA that transition age youth covered by the Home Care waiver for medically fragile/technology dependent children be able to utilize their nursing coverage while they are working in the community and/or in self-employment.
22. Recommend to DHS/DRS and IDPA that youth and adults covered by the Home Services waiver be able to utilize their "home health" coverage (personal assistants, CNAs and LPNs) while they are working in the community and/or self-employment. Allocate sufficient hours for each client to cover both his or her in-home and work-related needs.
23. Funding formulas for integrated employment should be extended for individuals with developmental disabilities based upon individual need.

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Appendix

What is a Developmental Disability?

The federal government uses the following definition of developmental disability. However states are not mandated to adopt this definition, and Illinois has not done so.

A developmental disability is a mental or physical impairment or combination of mental and physical impairments; is manifested before the person attains age 22; is likely to continue indefinitely; results in substantial functional limitations in three or more of the following areas of major life activity: self-care, receptive and expressive language, learning, mobility, self-direction, capacity of independent living, economic self-sufficiency; and reflects the person's needs for a combination and sequence of special, interdisciplinary, or generic care treatments of services which are of lifelong or extended duration and are individually planned and coordinated.

www.academyhealth.org/publications/glossary-healthcare.htm

What is the Illinois definition of developmental disability?

In Illinois, persons are considered to have a developmental disability if they have one or more of the following conditions, manifested before age 22:

1. Mental retardation
2. Cerebral palsy
3. Epilepsy
4. Autism

To further complicate matters, a variety of terms are sometimes used, both in the literature and in everyday conversation, in discussions concerning people with developmental disabilities and service delivery provisions, as outlined below:

It is important to keep in mind these subtle and sometimes imprecise semantic differences when reviewing literature on integrated employment and developmental disabilities, as well as in conversations with consumers, families, providers and other professionals.

Term	Federal definition	Illinois-specific	Comments
Developmental Disability (DD)	Person with limitations of 3 or more life areas, commencing before age 22 <ol style="list-style-type: none"> 1. Mobility 2. Communication 3. Self-care 4. Learning 5. Self-direction 6. Independent living 7. Economic self-sufficiency 	Person with one or more of the following conditions (commencing before age 22): <ol style="list-style-type: none"> 1. Mental retardation (MR) 2. Autism 3. Epilepsy 4. Cerebral palsy (CP) 	Often used as synonymous with mental retardation, but is not necessary the same, often shortened to "DD"
Developmental delay	Under IDEA, can be used as special ed eligibility	ISBE allows as special ed eligibility category for	Sometimes used as synonym for developmental disability and/or MR

	classification for children up to their 9 th birthday	children under 9 who do not currently have other special-ed eligible condition	(usually in lay language)
Significant disability	No statutory definition	No statutory definition	Sometimes used to describe persons with severe mental retardation and/or multiple disabilities
Severe disability	<ol style="list-style-type: none"> 1. Under IDEA, used to define level of disability and determine services and supports 2. Used by Social Security Administration in determining eligibility 	Special ed classification (mild, moderate, severe, profound)- used to drive level of services and supports offered. Term can be applied to any disabling condition, not exclusive to developmental disabilities (e.g.- severe hearing impairment, severe emotional disturbance &c)	Sometimes used to describe persons with severe mental retardation and/or multiple disabilities
Learning difficulty	No statutory definition	No statutory definition	Used as synonym for mental retardation in British English
Learning disability	Disabling condition eligible for special education services, one of the most prevalent disabilities among children with IEP's nationwide	One of the disabling conditions eligible for special education services according to Illinois School Code	Sometimes used a synonym for MR in British English
Severely disabled	Meeting Social Security Administration eligibility guidelines for SSI recipients, based upon severity of disabling condition	Determination made by Disability Determination Services within DHS/Office of Rehabilitation Services	
Cognitive impairment	Disabling condition eligible for special education services under IDEA	Disabling condition eligible for special ed services under Illinois School Code, commonly used as synonym for mental retardation	Usually refers to mental retardation/intellectual disability, sometimes refers to impaired cognitive functioning caused by traumatic brain injury (TBI), or illness