March 2021: Developmental Disabilities Awareness Month

What is a Developmental Disability?
RCW 71.1 “Developmental disability” means a disability attributable to intellectual disability, cerebral palsy, epilepsy, autism, or another neurological or other condition of an individual found by the secretary to be closely related to an intellectual disability or to require treatment similar to that required for individuals with intellectual disabilities, which disability originates before the individual attains age eighteen, which has continued or can be expected to continue indefinitely, and which constitutes a substantial limitation to the individual.

How many people have a Developmental Disability?
Approximately 1.58% of the general population is estimated to have an Intellectual and/or Developmental Disability (I/DD). In Washington State, this means that about 177,000 children and adults may have this diagnosis.

What services support people with DD?
The current caseload of the Developmental Disabilities Administration (DDA) is approximately 49,300. Currently, almost 15,000 of those clients are still waiting for services because of lack of funding. This is because all other services are Caseload Forecast, but DDA services are not. DDA is the only agency who has a long waiting list to be served.

90% of people with developmental disabilities live with their families. Some live in their own homes, with support to be as independent as possible. People with DD do not want to live in Residential Habilitation Centers (RHC), our state institutions. In the 1970s, more than 4,000 people lived in RHCs, now there are about 500 people still residing there, though many of them want to move out, but can’t, because of lack of housing and providers in the community. People with DD don’t want to be shut away from society.

How does COVID-19 affect people with DD?
People with developmental disabilities are at disproportionately high risk of experiencing COVID-related health complications and death. Those ages 18-74 are 150% to 200% more likely to die after contracting COVID than the general population. The increased risk is even more pronounced for specific disability groups. For example, people with Down Syndrome are five times more likely to be hospitalized and ten times more likely to die after contracting COVID than the general population. Additionally, people with disabilities from Black, Immigrant and People of Color communities experience even greater risk due to existing structural health inequities and the compounding intersection of race and disability.

Turn Awareness into Action!
We need legislators to recognize that people with DD can be fully included, productive members in our communities. They have jobs and pay taxes and want to live in their local communities right alongside you. Your job is to make sure the supports are there for them to do so!

- Caseload Forecast Developmental Disabilities Administration services
- Do not fund Residential Habilitation Centers (RHC) or large congregate $120 million nursing facilities
- Provide $10 million in the Housing Trust Fund Developmental Disabilities Set-aside
- Advocate for people with DD to be a higher priority for the COVID vaccine

Please share the importance of DD services with fellow legislators!

Contact The Arc of Washington for more information (888) 754-8798
March is Disability Awareness Month!!!

March is Developmental Disabilities Awareness month. In 1987, President Ronald Reagan made a public proclamation - dedicating the month to increasing public awareness of the needs and potential of Americans with developmental disabilities. The goal is the same today and also focuses on the importance of inclusion and living life side-by-side. Our theme this year is “Zooming in On People With Disabilities!”

Housing
We want to be housed and served in the community! The best option is to use State Operated Living Alternatives which allows a caregiver to live with 2 or 3 clients. This allows the caregiver to spend more time with individual clients so the client and caregiver can develop a more personalized relationship. We also have adult family homes. It is not the size of a facility that classifies whether someone is in an institution. Rather, we need to consider if the caregiver or client holds most of the authority. Whenever caregivers carry most of the authority, advocates need to recognize the institutional nature of the setting.

Employment
Washington should protect and enforce Employment First policies. Real employment in the community should be the first and preferred outcome for everyone. Washington should establish policies within our state that promote competitive integrated employment at or above minimum wage for people with all disabilities. Investing in supported employment services is good for Washington. It will help people with intellectual and developmental disabilities (I/DD) get and keep jobs in the community and be contributing members of society.

Community Services
During the pandemic, many people with DD who have Community Inclusion or Community Engagement in their DDA plan, lost their services because the agencies providing the services can’t get paid by the Centers for Medicare and Medicaid using virtual services, it has to be in person. We do not want these supports to just disappear after the pandemic.

Transportation
An investment in transportation now will be beneficial in the future. The pandemic will not last forever. When this ends, people with disabilities will have just as much of a desire to go places as the anyone. We cannot switch transportation services on and off easily since revenue and service are loosely associated with one another. If we don’t act now, we will not have transportation services when we need them the most. As every decision is intertwined with other factors we must assist those who have sacrificed their livelihood during this pandemic. This starts by maintaining funding for accessible transportation so we can use them when the time comes for us to go places again.

Prepared by Self Advocates in Leadership (SAIL)