Transitioning from Residential Habilitation Centers (RHC) into Community Housing

Everyone deserves safe and healthy living situations regardless of disability status. Staying in hospitals or institutions is not what people with intellectual/developmental disabilities (IDD) want!

**Problem:**

We want to stay in the community with supports in accessible and affordable housing situations. We need legislators to increase funding for State Operated Living Alternatives (SOLA) for people with IDD and close Institutions.

People with disabilities deserve to live and get the care they need in the community. Large scale institutions give the state a sense of control. This is not what self-advocates want. Rather, we want small, individualized settings tailored to our specific needs. While larger care facilities are cost-effective, individuals living in these settings face higher chances of being abused. The cost associated with running a 50, 60, or 70 bed RHC is much higher than a smaller community placement. People with disabilities have unique needs which can be better served in small settings.

**Solution:**

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. 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.

**Ask:**

Closing the institutions is only the first step in ensuring appropriate housing options. Small scale and individualized options should be the norm. Until we realize that smaller is better, people with IDD will face more abuse and neglect from larger facilities that make decisions for them. SAIL asks the legislature to close Rainer school.

For more information:

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