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Association of Oregon Centers for Independent Living

Oregon House of Representatives Committee on Human Services and Housing Representative Alissa Keny-Guyer, Chair

March 13th, 2019

Re: HB 3122

The Association of Oregon Centers for Independent Living (AOCIL) would like to express its support for House Bill 3122, and to thank Representative Rob Nosse for his sponsorship of this important measure.

HB 3122 provides critical and overdue funding stability for peer-delivered services to people with disabilities in the State of Oregon.

Oregon's citizens with disabilities are often an after-thought within the state system. People with disabilities are low income, with a poverty rate in Oregon that is two and a half times that of the non-disability population, and are at risk of significant health disparities. People with disabilities often live in daily crisis due to chronic health conditions and a lack of sustainable housing.

Oregon's 7 Centers for Independent Living provide people with disabilities with the peer counseling, skills training, mental health support, and other vital programs and services they need to achieve their goal of living as independently as possible in their communities.

HB 3122 is urgently needed to assure stability for Independent Living programs and services in Oregon, and to support the dignity and independence of Oregon's 600,000 citizens who live with a disability.

Respectfully,

Janet Allanach

Janet Allanach Executive Director

Attachment: AOCIL White Paper: The Case for Urgently Needed Funding



Oregon's Centers for Independent Living: The Case for Urgently Needed Funding

- DHS Vocational Rehabilitation (VR) serves as the Designated State Entity (DSE) for Oregon's Independent Living Program. VR's budget request does not include an increase in funding for Oregon's Independent Living Program.
 Oregon's Legislature must assure adequate funding for Oregon's Independent Living Program.
- Oregon's State Plan for Independent Living (SPIL) developed by the Governor's State Independent Living Council (SILC) ensures the existence of appropriate planning, <u>financial</u> <u>support</u> and coordination, and other assistance to appropriately address, on a statewide and comprehensive basis, needs in the state for –

(A) The provision of independent living services in the state;

(B) The development and support of a statewide network of centers for independent living; and (C) Working relationships and collaboration between -

- (i) Centers for independent living; and
- (ii) (I) Entities carrying out programs that provide independent living services, including those serving older individuals;
 (II) Other community-based organizations that provide or coordinate the provision of housing transportation, employment information and referral.

provision of housing, transportation, employment, information and referral assistance, services, and supports for individuals with significant disabilities; and (III) Entities carrying out other programs providing services for individuals with disabilities.

Oregon's SILC does not have the ability, except by working through VR as the DSE, to communicate directly with the Governor to ensure **adequate financial allocation** is included in the Governor's budget. The DSE has not provided adequate education and advocacy for Oregon's Independent Living Program with the Governor or legislators.

- The existing funding levels (\$3,826,928 Part B, C, State General Fund (SGF) biennium) for Oregon's Independent Living Program – Centers for Independent Living (CILs) has created a state of emergency and are significantly below the required funding (\$40,621,356 Part B, C, SGF biennium¹) to ensure:
 - Mandated federal and state service standards are met and Oregonians with disabilities can access independent living services in all Oregon counties;
 - Oregon can achieve the goals and objectives set forth in the Oregon's SPIL as developed and approved by the Governor's SILC, Oregon's Centers for Independent Living, the Administration for Community Living (ACL), and Oregonians with disabilities;
 - Individuals with disabilities employed by CILs receive unbiased wages and benefits that are comparable to those received by individuals without disabilities.

¹ State Independent Living Council (SILC) (2017). State Plan for Independent Living (SPIL) for Oregon for 2017 – 2019.

Oregon's Independent Living Program

Independent living can be considered a movement, a philosophy, or specific programs. In the context of ACL, independent living programs are supported through funding authorized by the Rehabilitation Act of 1973, as amended (The Act). Title VII, chapter 1 of the Act states the current purpose of the program is to "promote a philosophy of independent living including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society."

In July 2014, the Workforce Innovation and Opportunity Act (WIOA) was signed into law, transferring the Independent Living programs, the National Institute on Disability, Independent Living, and Rehabilitation Research (NIDILRR), and the Assistive Technology programs to ACL. WIOA also included statutory changes that affect independent living programs, including the addition of new core services (transition), shifts in the process of developing and adopting state plans and changes in the functions of the SILC.

Regulatory Guidance

The Rehabilitation Act of 1973 as amended by WIOA, TITLE VII—INDEPENDENT LIVING SERVICES AND CENTERS FOR INDEPENDENT LIVING CHAPTER 1—INDIVIDUALS WITH SIGNIFICANT DISABILITIES:

PART A—GENERAL PROVISIONS SEC. 701. PURPOSE. The purpose of this chapter is to promote a philosophy of independent living, including a philosophy of consumer control, peer support, self-help, self-determination, equal access, and individual and system advocacy, in order to maximize the leadership, empowerment, independence, and productivity of individuals with disabilities, and the integration and full inclusion of individuals with disabilities into the mainstream of American society...;

(2) CENTER FOR INDEPENDENT LIVING.—The term "center for independent living" means a consumercontrolled, community-based, cross-disability, nonresidential private nonprofit agency for individuals with significant disabilities (regardless of age or income) that— (A) is designed and operated within a local community **by individuals with disabilities**; and (B) provides an array of independent living services, including, at a minimum, independent living core services as defined in section 7(17);

(3) CONSUMER CONTROL. —The term "consumer control" means, with respect to a center for independent living, that the **center vests power and authority in individuals with disabilities**, in terms of the management, staffing, decision making, operation, and provisions of services, of the center².

² 113th Congress of the United States of America (2013 – 2014). Workforce Innovation and Opportunity Act.

State and Federal Mandates for Oregon CILs

Sec. 704(a) of The Rehabilitation Act, as amended, requires the review and revision of the **State Plan for Independent Living** not less than once every three years. Under WIOA, the SPIL is jointly developed by the chairperson of the Governor's **State Independent Living Council (SILC)** and the directors of the Centers for Independent Living in the state, after receiving public input from individuals with disabilities and other stakeholders throughout the state. The SILC is an independent entity responsible to monitor, review, and evaluate the implementation of the State Plan for Independent Living. The SPIL is signed by the chair of the SILC, acting on behalf of and at the direction of the Council and at least 51 percent of the directors of the centers for independent living in the state. The State Plan for Independent Living must designate the **Designated State Entity**. The DSE is the agency that, on behalf of the state, receives, accounts for and disburses funds received under Subpart B of the Act. The SPIL is also signed by the director of the DSE. By signing the SPIL, the director of the DSE agrees to execute the responsibilities of the DSE identified in the law. The 3-year plan is submitted to and approved by the Administration for Community Living (ACL) under the federal Department of Health and Human Services.

Under these mandates, CILs are required to employ at least 51% people with disabilities and maintain boards that are also comprised of at least 51% people with disabilities, and:

- 1. Provide the following services to Oregonians with disabilities statewide:
 - Information and referrals,
 - Peer-counseling,
 - Independent living skills training,
 - Individual advocacy and systems advocacy
 - Transition services (services that facilitate transition from nursing homes and other institutions to the community, provide assistance to those at risk of entering institutions, and facilitate transition of youth to postsecondary life.
- Centers also may provide, among other services: psychological counseling, assistance in securing housing or shelter, personal assistance services, transportation referral and assistance, physical therapy, mobility training, rehabilitation technology, recreation, and other services necessary to improve the ability of individuals with significant disabilities to function independently in their family or community and/or to continue employment³.)

³ 113th Congress of the United States of America (2013 – 2014). Workforce Innovation and Opportunity Act.

Oregon's Centers for Independent Living

Oregon has 7 CILs providing five core services in 22 counties:

- Abilitree (Deschutes, Crook and Jefferson Counties);
- EOCIL (Baker, Gilliam, Grant, Harney, Malheur, Morrow, Umatilla, Union, Wallowa and Wheeler Counties);
- HASL (Jackson and Josephine Counties);
- ILR (Multnomah, Washington and Clackamas Counties);
- LILA (Lane County);
- SPOKES (Klamath and Lake Counties)
- UVDN (Douglas County)⁴.

Oregon's CILs provide limited APD – ADRC contract specific limited IL services in 14 additional counties:

- EOCIL (Hood River, Sherman and Wasco Counties);
- HASL (Curry County);
- ILR (Clatsop, Columbia, Tillamook Counties);
- LILA (Benton, Lincoln, Linn, Marion, Yamhill and Polk Counties);
- UVDN (Coos County)⁵.

⁴ State Independent Living Council (SILC) (2017). State Plan for Independent Living (SPIL) for Oregon for 2017 - 2019 (pp. 40 - 44).

⁵ The Oregon Department of Human Services Aging and People with Disabilities (2016). Oregon CILs Service Area IR/IA Numbers 2016.

Oregon Disability Statistics Snapshot

- Adults with disabilities are more likely to report food insecurity. Seventeen percent of individuals with disability report food insecurity, compared to 4% of their nondisabled peers.
- Of individuals with disabilities in Oregon, 36% are likely to have lower incomes, compared to 18% of their nondisabled peers.
- Adults living with a disability are less likely to have graduated from college. Fifteen percent of individuals with disabilities graduate from college compared to 32% for their nondisabled peers.
- Mental health issues are a major concern among people experiencing disability. CILs provide peer-to-peer counseling and mentoring, as well as evidence-based mental health programs.
- Of particular concern are youth with disabilities and mental health issues. Youth with disabilities are more likely to attempt suicide. Sixteen percent of 11th grade youth with disabilities experienced suicide attempts compared to 3% of their nondisabled peers.
- Positive youth development (PYD) is a significant protective factor for emotional well-being among youth. Youth with a disability are less likely to meet the benchmark for PYD. The PYD benchmark achievement is 35% among 11th graders with disabilities compared to 68% for their nondisabled peers.
- Five percent of students with disabilities dropped out of school in 2016; compared to just 3% of their nondisabled peers.
- Eighty-eight percent of girls and 75% of boys within the Oregon Youth Authority (OYA) have a diagnosed mental health disability. The socioeconomic cost of imprisonment, compared with CIL funding, is significantly higher.
- Twelve percent of individuals with disabilities were sexually abused during childhood, compared to 4% of their nondisabled peers.
- Thirty-six percent of individuals with disabilities were physically abused during childhood, compared to 17% of their nondisabled peers.

People with Disabilities need Oregon's Independent Living Program to be Adequately Funded