



# POSITION STATEMENT ON HABILITATION CENTERS

(May 21, 2010)

The Missouri Planning Council for Developmental Disabilities is committed to assisting communities in their efforts to include all people in every aspect of life and assuring that people with developmental disabilities make informed choices about where they live, work, play and worship. We support implementation of the Olmstead Decision to make living in the community a viable option for all people with developmental disabilities.

## **Position:**

- The Council believes that all people with developmental disabilities belong in and can be supported successfully in the community. We must make every effort to ensure that appropriate community supports exist to ensure the health and safety of our fellow citizens who need supports.
- We believe serving people in the community results in the highest possible quality of life for our fellow citizens who have a developmental disability.
- We believe policy should be driven by best practice and the needs and desires of the individuals with developmental disabilities served.
- We believe Missouri needs to close institutions and congregate campuses and instead provide all services to people with developmental disabilities in the community with the supports they need to live, work, play and worship with their fellow citizens.

## **Recommendations:**

It is the recommendation of the Council that the State of Missouri take the following actions:

- Develop a plan for transition for each individual remaining in our State's institutions and congregate state-owned Wavier campuses. This plan should be driven by the individual and family, respond to their needs and desires and give them maximum choice and control.
- Expand community safety nets including a community-based system of crisis prevention and intervention.
- Halt residential placements in our current institutions and congregate campuses.

- Provide training and encourage development of knowledge and skills for staff working in institutions that will allow them to assist in transitioning individuals to the community and in putting the proper community supports in place.

## **Trends:**

The trend toward institutional closure, fueled by philosophical shifts, demand for community services, quality enhancement, and best practice, has steadily taken hold. From 1960 to 2008, there were a total of 186 large state-run facilities closed. There are now 10 states with no large state-run facilities.

Missouri has followed suit and slowly but steadily decreased the once-outsized census at our state institutions. From 1999 to 2009, Missouri reduced the number of people living in institutions by approximately 42 percent. Missouri now supports most people with developmental disabilities in the community; however, we continue to invest in institutions and congregated campuses to house several hundred people with developmental disabilities.

Missouri has recently transitioned some state-run ICF/MR institutions to congregate waived group home campuses. We know from research that these types of settings, or “cluster housing” as they are sometimes referred to, do not result in the quality of life that community living does. “An analysis of the characteristics of the disability cluster model shows that many fundamental human needs are less likely to be met than in individualized housing, and in many cases the needs are likely to be increased. In addition many of the inherent characteristics will lead to harm of individuals in the service.” (Walker, 2007)

## **Quality of Life:**

In 2007, the Council commissioned Dr. James Conroy of the Center for Outcome Analysis, Havertown PA, to study the quality of life of individuals who transitioned from Bellefontaine Habilitation Center (BHC) to community settings or other institutions as well as a few individuals who remained in BHC. The report involved face-to-face visits in mid-2007 with 41 people living at BHC in 2005. Additionally, to increase reliability of the findings, Missouri’s results were compared to that of the other states. Dr. Conroy reported that, *“The great preponderance of indications from the data lead to the conclusion that the movement of people from BHC to community homes had strongly positive outcomes.”*

The families and guardians of those who moved from the institution to the community were also surveyed, and the families of those who moved to small community homes in regular neighborhoods appear to see the biggest positive changes. They believe their relatives are much better off and are most impressed with the increased happiness and freedom among their relatives.

The Missouri findings were compared to data from several other large-scale studies using the exact same instruments. Researchers found that the results obtained in other states are compellingly similar to those found in this study. This heightens the confidence in the Missouri work, and confirms the strongly positive outcomes for those who moved to the

community. Dr. Conroy and his research team encouraged Missouri, as well as society in general, to weigh the public costs of institutions in making decisions about services and supports for people with developmental disabilities in the future.

**Law:**

The Developmental Disabilities Assistance and Bill of Rights Act of 2000 (P.L. 106-402) states that:

*“disability is a natural part of the human experience that does not diminish the right of individuals with developmental disabilities to live independently, to exert control and choice over their own lives, and to fully participate in and contribute to their communities through full integration and inclusion in the economic, political, social, cultural and educational mainstream of United States society;”*

Further, the United States Supreme Court ruled in the matter of *L.C. v. Olmstead*, that people with disabilities have a right to receive services in the most integrated setting appropriate if: (1) the person with a disability so consents, (2) the person’s treatment team agrees that the person would benefit from treatment in this setting, and (3) such treatment does not unduly affect the State’s ability to provide treatment to other people with a disability. This ruling applies to people with disabilities who (1) currently reside in state-operated and/or funded habilitation centers, nursing homes and psychiatric hospitals, and (2) people with disabilities who are at risk of being placed in such facilities.

**The highest court in the land has stated that it is unconstitutional to segregate people because they have a disability.**

Walker, R. L. (2007, November) *Cluster Housing: What is its likely impact?* Paper presented at the 42<sup>nd</sup> Annual Conference of the Australian Society for the Study of Intellectual Disability, Fremantle, Australia.