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The Disabilities Rights Center is dedicated to eliminating barriers to the full and equal enjoyment of civil and other legal rights for people with disabilities.

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INSTITUTE ON DISABILITY/UCED University of New Hampshire Concord Center, Unit 14 10 Ferry Street, Concord, NH 03301

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WELCOMING AND ACCESSIBLE COMMUNITIES



Welcome to the Summer Issue of the Rap Sheet and the beginning of our second year. Fifteen years ago Congress passed the Americans with **Disabilities** Act in the belief that all Americans, including those with disabilities, should be able to fully participate in the lives of their communities. In this issue we look at how people across NH are working together not only to improve accessibility, but to ensure that all members of their community are welcome and included.

The Littleton Model Community Project: Building a Community with Opportunities for Everyone Nicole LaPointe, Town of Littleton, Project Manager (nlapointe@nchin.org)

In 2002, the Town of Littleton, NH made a commitment to its residents with disabilities and those over 65. With support from a federal Real Choices-Model Community grant, Littleton is increasing access to commerce, employment, recreation, and social activities for all citizens. The Model Community initiative, whose mission is to "build a community with opportunities for everyone," was spurred by the U.S. Supreme Court case, Olmstead v. L.C. In this case the Court found that keeping people with disabilities in institutions when they are able and willing to live in the community is a form of discrimination under the Americans with Disabilities Act (ADA). In partnership with residents, service organizations and associations, the Town of Littleton is working to support the rights of people with disabilities to live in their own communities.

Model Community is a different sort of community development project than the traditional 'bricks and mortar' improvement that the Town of Littleton has successfully engaged in over the last decade. Littleton's municipal leadership saw this as an opportunity to focus on the human and social development in their community. The Model Community Advisory Council was created to guide this work. The Council includes civic and business leaders, social service providers, senior citizens, and individuals with disabilities. The Council's work is shaped by the passions and energy of its membership.

Home to about 5,800 people, Littleton serves as an economic and service hub for NH's North Country. Residents in this rural area face social isolation, high rates of chronic illness and disability, low wages, and limited job opportunities. Small businesses provide most local jobs, and these employers struggle to provide health insurance to their workers. In Grafton County, the population over 65 years of age is growing more rapidly than the state or national average, and is expected to triple

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SUSAN COVERT, EDITOR

(Cover story continued)

by 2025. The rate of disability among Littleton residents over 65 also is currently higher than both state and national averages. Given these demographics, the Town of Littleton identified community accessibility as a priority issue for their community.

In the Model Community work we drew upon the principles of developing social capital, that is the more connected community residents are to one another, the greater the health, vitality, and prosperity of the community. The Model Community Project recognizes that every person has gifts, and that it is in all of our best interest to provide opportunities for people to share their gifts with the community. Adopting this approach has a ripple effect. For example, as I become aware of my gifts, my confidence grows. I am able to reach farther, take greater personal risks, and grow. Being valued by others in my community increases my confidence and my ability to contribute. The net benefit for the community is that the more people contribute their individual creativity, energy, and labor, the greater the community's sense of pride and the more people are drawn to community involvement.

The Model Community Advisory Council identified the obstacles that keep people from sharing their gifts in the community. These can be actual physical barriers, a lack of transportation, physical inaccessibility and social barriers, stereotypes about disability, prejudice, or ignorance. Removing these obstacles is the focus of our work. While we have made significant progress in the last three years, this work must continue if we are to realize our goal of full community participation for everyone. Fortunately, Littleton now has a strong network of people who will carry this work forward. Community leaders who are working for the Town of Littleton, Littleton Main Street, Inc., The North Country Health Consortium, and TechLink NH have committed their organizations to increasing community accessibility.

Accessibility means different things to different people, and the Littleton Model Community Project embraces all the definitions. Whether a person uses a wheelchair, is on crutches because of a broken leg, has an arm full of packages, or has three toddlers in tow, life is easier when you live in an accessible community. The Model Community advocates for and demonstrates the use of Universal Design to overcome the barriers in our community. We also advocate for the acceptance and inclusion of all community members. All of us deserve to be treated with dignity, to have choices, and to be welcomed.

For more information, visit us on the web at www.GoLittleton.com/ModelCommunity.

MAKING THE ADA WORK FOR YOU

Cindy Robertson, Esq., Disabilities Rights Center

Have you ever been unable to get into a restaurant or other public building because of the front stairs, or found yourself unable to use the restroom because you use a wheelchair or have other mobility difficulties? Or perhaps you have been unable to get your employer to provide you with an interpreter at monthly staff meetings and now your job performance is being affected. These are all examples of ADA (Americans with Disability Act) violations, but the question is, what do you do?

Employment

The ADA is divided into three primary titles or sections. Title I covers private employment situations. In order for the ADA to apply, there must be at least 15 or more employees in the company. Title I prohibits an employer from discriminating against a person with a disability who meets the job-related requirements and who can perform the "essential functions" of the job either with or without a reasonable accommodation. Employers are required to provide a reasonable accommodation once an individual's physical or mental limitations are known. It is up to you to request the reasonable accommodation if you need one.

Such accommodations can range from providing interpreters and other assistive technology to installing ramps or modifying bathrooms. The large majority of "reasonable accommodations" are very inexpensive and readily done. However, an employer cannot be required to provide an accommodation that would cause an "undue hardship." An undue hardship is one that would be very difficult or very expensive, for example requiring a small business to install an elevator at a very high cost could be considered an undue hardship.

If a reasonable accommodation is requested but the employer refuses to provide it, you can file a complaint with the EEOC (Equal Employment Opportunity Commission) within 180 days of when the discrimination occurred. The EEOC will then conduct an independent investigation into your complaint. The EEOC can make several findings including resolving the complaint or issuing a "right to sue" letter; this letter gives you the right to file a lawsuit in court against the employer. You can recover monetary damages as well as have the EEOC or the court order the provision of a reasonable accommodation.

Government and Other Public Entities

Title II of the ADA covers public entities such as state and local government, schools, and county jails. Most of the requirements of Title II are based on section 504 of the Rehabilitation Act of 1973 which prohibits discrimination on the basis of a disability in federally assisted programs or activities. The primary goal of the ADA is to integrate individuals with disabilities and provide them with an equally effective opportunity to participate in the public service or benefit.

As under Title I, the public entity is required to provide a reasonable modification to its program when requested. For example, if a town welfare application is too difficult for you to understand because of a mental disability, the town may be required to either make the form simpler or provide you with individualized help to complete the form.

The public entity is not required to provide a reasonable modification, however, if such modification would "fundamentally alter" the nature of the service or program or if it would be a financial burden. For example, the town is not required to change the architectural structure of a building if it can simply hold its meeting in another location that is accessible.

3.

If you request a reasonable modification and it is refused, you can file a complaint with the appropriate Federal agency within 180 days of when the discrimination occurred or bring a lawsuit in Federal court. You can recover money damages under Title II for intentional discrimination as well as get the Federal agency or court to order the public entity to modify its program in accordance with the ADA.

Public Accommodations: Stores, Restaurants, Theatres ...

Finally, Title III of the ADA covers places of public accommodations such as hotels, restaurants, and grocery stores. As with the previous two titles, a public place must make a reasonable accommodation if necessary unless such accommodation would fundamentally alter the goods or services offered or be an undue burden. For example, the local movie theatre must provide an auxiliary listening device to you if you are deaf or hard of hearing and request one, but a small business does not have to modify its entranceway if the cost of doing so would essentially put it out of business.

If you feel you have been discriminated against by a place of public accommodation, you can file a complaint with the U.S. Department of Justice or bring a civil action in court. The Department of Justice and/or the court can only order the business to provide the reasonable accommodation; it cannot give you money damages under Title III.

We always encourage self-advocacy as the first course of action. Make sure you have specifically requested whatever accommodation you need. If this request is refused, ask to speak to someone in authority and discuss the situation with that person. If you are still not satisfied, then you should consider taking further action depending on your particular situation, including contacting the Disabilities Rights Center for assistance.



We dedicate this issue of the Rap Sheet to Joseph Bauer who died March 28, 2005. A graduate of the Institute on Disability's first Leadership class, Joe cared passionately about providing opportunities and choices for individuals with disabilities. He worked with the Institute to develop supported employment opportunities, was a founder of the Manchester chapter of the ARC, and played an integral part in the passage of NH's 1989 Family Support Legislation. He later served on the Family Support Council for the greater Manchester area. With his generous spirit and quiet leadership, Joe Bauer made NH a better place for our citizens with disabilities.

Accessible Shopping at Hannaford

Carl Sartori has nothing but praise for the Hannaford grocery store on Bicentennial Drive in Manchester. "It's one of the most accessible stores I've ever shopped in," he says. Store manager Kathy Malone knows her customers have different needs and is committed to making shopping at Hannaford a good experience for everyone. Guided by the ADA and observations of what their shoppers need, Hannaford has made changes to ensure that their store is accessible. Kathy listened carefully to Carl's suggestions on how to improve accessibility for him and other customers who use wheelchairs. The store's produce bins and meat coolers are low enough for Carl to reach from his chair. At the check out counter, the credit card machine can be taken off the stand for easier access and the pull-out check writing tables are at just the right height. Counters, cooler doors, and the video drop slot are all accessible. Carl asked Kathy if she could find a grocery cart that he can use. Kathy tracked down a cart that has wheels that move independently and Velcro straps that can be attached to a wheelchair. The cart has turned out to be popular not only for customers who use wheelchairs, but for any shopper who has trouble bending down. Thank you Kathy for making Hannaford a store that is welcoming to all its customers, including those who need accommodations.

Carl notes that his shopping experience at Hannaford is not typical; for example, the Mall of New Hampshire and most malls have common problems with access. Sure, you can get in the front door, but narrow aisles and high counters make shopping from a wheel-chair a difficult venture. Carl estimates that two out of three stores at the Mall of New Hampshire are not fully accessible. Most changes, like making sure there is adequate space between clothing racks, would cost little or nothing to implement. In 2003 the Disabilities Rights Center settled a lawsuit with Filene's, the Mall's anchor store, to make it more accessible; unfortunately adequate accessibility continues to be a significant problem at most of the Mall's stores.



Julia Freeman-Woolpert

Hannaford Store Manager Kathy Malone and satisfied customer, Carl Sartori



Using the Side Door

When Peter Giovagnoli's mother passed away last year, the wake was held at Phaneuf's Funeral Home in Manchester, which has an inaccessible front entrance. Peter and several other mourners had to use the "handicapped entrance," a locked rear door which leads to the garage where the hearses bring in the bodies. Using this entrance, mourners pass right by the open door to the cremation room. Peter said that on his way out of the funeral home a stretcher with a body bag was being rolled in, "I was scared. It made me feel like a corpse." The men's room at the funeral home also is not accessible. When this was pointed out, a worker at the funeral home suggested, "He can use the women's room, it's much better." Access to both the front entrance and the bathroom would be easy to fix.

Julia Freeman-Woolpert

The funeral bome's "handicapped" access shares space with a bearse

Seniors Count! in Manchester

Bernie Seifert, LICSW Senior Services – Easter Seals NH

Manchester, New Hampshire is home to many seniors who are in poor health and socially isolated. Manchester is not unique, across America frail seniors live quietly and invisibly within the midst of their communities. In order to continue living in their own homes, older Americans often need additional supports and resources. Without this adequate support, frail seniors are at risk of losing their independence and being admitted to nursing facilities.

There are over one thousand frail seniors living in Manchester. According to statistics from the City of Manchester, 30% of inner city seniors have no vehicle, 12% have no phone, and 26% live below the poverty line. Approximately 50% of Manchester residents who are 65 years and older live alone, placing them at high risk for accidents, depression, and isolation. While there are services available to meet seniors' basic needs, many elders do not know where to turn for help.

This is where Seniors Count! kicks in. In October 2001, Easter Seals NH brought together representatives from Manchester's health and human services organizations, along with other community leaders, to discuss the needs of the city's frail senior population. The Seniors Count! Task Force was formed to address the unmet needs of older adults in the Queen City. The Task Force has three goals:

To raise community awareness of the problems seniors face;

- To work collectively to ensure coordination of services and to eliminate gaps in services, and;
- To leverage resources to generate sustainable support.

The following stories of two Manchester seniors illustrate how Seniors Count! is helping meet the needs of older adults who wish to remain in their own homes.

Getting There From Here

Mr. R is a 74 year-old man whose multiple medical conditions have resulted in some mild cognitive impairment. After a brief hospitalization last year he was admitted to a nursing home. Against the advice of his doctor and the medical staff at the nursing home, Mr. R checked himself out of the facility and returned to his apartment. Mr. R lives on his own with support from Medicaid's Home and Community Based Care Program, daily help from a home health aid and weekly visits from a nurse.

For years, Mr. R managed his finances by walking to his bank on the third of each month, withdrawing his Social Security money, walking to the local grocery store to pay his utility bill, and then returning home with the rent money for his landlord. Over time it has become increasingly difficult for Mr. R to use this system for paying his bills. His local grocery store eliminated the utility bill payment service and Mr. R's failing health has made it nearly impossible for him to make his monthly walk to the bank and the store. Although a checking account would enable him to pay his bills and rent with checks, Mr. R has never managed a checking account and with his current cognitive issues, he didn't feel comfortable starting now. The struggle to pay his bills grew worse with each month; the telephone and gas companies notified him that his service would be discontinued due to lack of payment and his landlord threatened to evict him.

The Seniors Count! social worker stepped in to help Mr. R with his monthly bill payments. Each month she drives him to the bank so he can withdraw his money, then drives him to a larger grocery store a few miles away where utility payment service is still provided. The social worker also accompanies Mr. R to his medical appointments; taking notes so both Mr. R and his in-home caregivers have a written record of health care updates, prescription changes, and other recommendations from his medical providers.

Mr. R is pleased that he is still in his own home, living with his cat. He recently commented, "I convinced the doctor that I can be at home even with all my medical problems. But it's not the medical problems that almost made me lose my home. It's that I couldn't get to the bank and to the store, which are just down the street! And for that I almost had to go into a nursing home!"

Staying Warm

Mrs. B is an 89 year-old widow who lives alone. She has no children and all of her relatives live far away. Last winter, Mrs. B's hot water tank and part of her furnace needed replacing. With a very limited income, Mrs. B could not afford to have the work done. Seniors Count! coordinated community effort to help Mrs. B. The NH Bureau of Elderly and Adult Services was able to provide some emergency funding, though this was not nearly enough to cover the cost for the repairs. Seniors Count! contacted a private oil company who agreed to provide the needed furnace parts and labor at a reduced rate. Finally, Flex Funding, a Senior Count program, was used to cover the balance of the costs. The results - Mrs.

B was able to remain in her own home, exactly where she wanted to be, with heat and hot water!

These stories are only two examples of how the Manchester community is working to help older adults get the supports and resources that they need to remain in their community living in their own homes. With help from Seniors Count! many of Manchester's frail elders have been able to avoid moving to a nursing facility, a living arrangement that is much more costly and often less desirable than being supported in their own homes and neighborhoods. No, Manchester is not unique in having a large number of frail and isolated seniors in their community; it is unique, however, in offering a community approach to address the needs of these at-risk elders.

For more information about Seniors Count contact the Manchester Region ServiceLink Program at 603-644-2240.

(Seniors Count is part of the Community Partnerships for Older Adults national program of the Robert Wood Johnson Foundation.)



EasyLiving Homes are coming to New Hampshire Carol Stamatakis, JD NH Developmental Disabilities Council

EasyLiving Home* is the nation's first voluntary certification program for new housing built with certain basic accessibility features. The program originated in Georgia where it has been very successful with over 30 homebuilders and 227 homes registered as of April 2004. The National Endowment for the Arts (NEA) is leading an effort to replicate this program nationwide and funded a national summit for interested states. In September the NH Developmental Disabilities Council sent three individuals to attend the summit in Atlanta and to tour EasyLiving Homes. The group was impressed with what they saw_{*i*} the DD Council applied and was accepted as one of the first affiliates of the EasyLiving Home Program.

The EasyLiving Home Program is a collaborative effort of the building industry, disability groups, and nonprofit organizations interested in housing. The program educates both the building industry and the general public about the economic and societal value of incorporating Universal design features into private homes. Homebuilders who wish to participate in the program receive technical support, referrals, publicity, and the right to use the EasyLiving logo in marketing their homes. An important goal of the program is to build public recognition of the EasyLiving name and logo as the symbol of accessible, livable housing that would be requested by potential homebuyers and offered by builders.



The features of an EasyLiving Home add convenience for those living in the home and enable the owner to welcome all friends, family, and visitors regardless of age or physical ability. This accessibility can be accomplished without sacrificing style or adding substantial construction costs. The typical added cost of incorporating EasyLiving features is under \$100 for homes built on concrete slabs and \$300 -\$600 for homes with basements. EasyLiving Home certification enhances both the initial and resale value of a home, and can be achieved for practically any home regardless of price range, architecture, or the surrounding terrain.

(Continued on next page)

EasyLiving Certified Home

Every EasyLiving Home incorporates three important features:

A step-free entrance into the central living area of the home

Wider doorways – a minimum of 32 inches of clear passage space - for every interior passage door on the main floor, including the bathroom, and the exterior door that provides the step-free entrance

A bedroom, kitchen, entertainment area, and a full bathroom with sufficient maneuvering space for a wheelchair all located on the main floor.

The EasyLiving Home is marketed and promoted as a desirable home for everyone, rather than a specialty home for seniors or people with disabilities. In fact, many EasyLiving homeowners do not have disabilities, but appreciate the features that make it easier to move in furniture or heavy loads, bring a baby carriage in and out of the house, or to invite a friend who has a mobility impairment to visit. In addition, the homes' spacious feel and enhanced natural light are aesthetically pleasing to many buyers.

To replicate the EasyLiving Home Program in NH, the Developmental Disabilities Council awarded a grant to Granite State Independent Living. A coalition of organizations that have a history of promoting accessible housing in NH has been brought together to guide the project, coalition members include the Governor's Commission on Disability, the NH Developmental Disabilities Council, the NH Housing Finance Authority, AARP-NH, and the Homebuilders and Remodelers Association of NH. The Coalition will provide technical assistance to NH homebuilders and will educate builders and homebuyers about the value of accessible housing.

Karl McKinster of Warrenstreet Architects, who attended the replication summit in Georgia, has agreed to donate his expertise to the project. According to Mr. McKinster, "I think what they're doing is great. Everyone should be building homes this way across the United States. Architects can easily design these principles into their plans."

The National Association on Homebuilders is sponsor of the CAPS ("Certified Aging in Place Specialists") Program that certifies builders and other professionals who have been trained in accessibility features and the needs of older adults. Dianne Beaton, of Secondwind Water Systems in Manchester, has been certified through the National Association and has volunteered to work with NH's EasyLiving Home Program. She anticipates that the CAPS Program will provide training for NH homebuilders that will go beyond the minimum accessibility features of EasyLiving Homes.

It is expected that the availability of accessible housing will increase as builders recognize the economic benefits of meeting America's growing demand for homes with accessibility features. Universal Design features, such as those incorporated into EasyLiving Homes, accommodate diversity in ability and address the changing housing needs as people age or experience transitions in their lives.

Photographs of EasyLiving Homes and information about the program and Universal Design in home construction can be found at: www.easylivinghome.org and www.concretechange.org . The project manager in NH is Patricia Vincent-Piet at Granite State Independent Living, 228-9680.

* The EasyLiving Home certification mark is a registered trademark of the Statewide Independent Living Council of Georgia, Inc.

Under One Roof Project

Andrea Gilbert, Project Director

A couple of years ago my friend, Kathy Manfre, and I were working out at our local gym and talking about her 13 year old daughter Emily who was a student in the middle school. Kathy said she wished that Emily was more involved in community activities and had places to go after school and on weekends. Kathy said she knew other children and adults in our community who also had trouble making friends and finding things to do. At the time, I was working with a group that was planning a new community resource center for Peterborough and the eastern Monadnock Region. Our mission was to bring people at the edges of our community into its center-to embrace diversity and create a community resource center that provided programs, services, and community building activities. As a former teacher of the deaf and early intervention worker, I knew that people with disabilities and their families who were accustomed to "specialized services," would need support to become better connected to their communities.

As I worked with our planning group to develop the resource center, I kept in mind the conversations I had with Kathy about friendships and community involvement for individuals with disabilities. Our planning group received resources to help tackle this issue when Gordon Allen, a member of our community and Executive Director of the DD Council, learned that the federal Administration on Developmental Disabilities was funding projects to support people with developmental disabilities to participate in their communities. In July 2003, the Institute on Disability and The Family Center of Greater Peterborough successfully submitted a one-year planning proposal for the Under One Roof Project. Those participating in this planning effort included parents who have children with disabilities, adults with disabilities, community members, and representatives from town recreation departments, school districts, family resource centers, and other social service

organizations in our region. We identified two important goals for the Center. First, we wanted our family members, friends, and neighbors with disabilities to be involved in all aspects of community life. Second, we wished to change people's attitudes about disabilities and create communities that are welcoming and accepting of all their members.

The Under One Roof Project has received federal funding for five years and has found a home in the new River Center: A Place for Community Resources and Connections in downtown Peterborough. Our neighbors in the Center include: The Family Center, Southern NH Services, the Hillsborough County Community Action Program, the Monadnock Area Transitional Shelter office; and MAPS – a mental health counseling program. Senior exercise programs, karate classes, a nursing mothers group, and occasional music programs use the Center's The Monadnock Community Community Space. Hospital soon will be offering health education clinics. The services that will be provided by the Under One Roof Project will be available to all members of the community. Those of us whose organizations are housed in the River Center are working together to change our own attitudes about disability, to model inclusive behavior, and to build relationships both inside the Center and in the greater community.

The work of the Under One Roof Project extends far beyond the walls of the River Center; we work with individuals and families in the 15 towns in the eastern Monadnock region. The project employs two Bridge Builders, Molly Hajjar who focuses on expanding recreational opportunities for people in our region and Billy Horton who helps young people in the region who are making the transition from school to adulthood and adults seeking more satisfying work opportunities. Both Molly and Billy help individuals and their families and friends make community connections and find recreational and employment opportunities that match their interests and skills. These Bridge Builders are our ambassadors for Under One Roof; they are going to The Mill Farm, a community supported farm, in Hancock; attending Chamber of Commerce meetings in Peterborough; visiting the library in Jaffrey; talking with the people who run Crotched Mountain Ski and Ride, our local ski area; and finding out what is happening at the Harris Conservation Center. Wherever they go they are looking for friendly people who can help open their doors wide and welcome all community members to come inside.

Contributing to His Community

When Ethan, a ConVal high school freshman, wanted to become more involved in his community, he and his family met with Under One Roof's transition and employment bridge builder, Billy Horton. Billy helped Ethan who enjoys being with people and likes to be useful find a job at the Peterborough recycling center. His boss is pleased to have Ethan helping out, "Ethan is very nice, smart, and easy to get along with. We enjoy his company, he knows a lot of people, and talks to many of the people who come to the Center."

Ethan also was interested in helping out at his town's fire department. Billy met with Steve Hobbs, the head of the Peterborough Fire Department's Explorers Program; the Explorers have welcomed Ethan and are supporting him to participate in their training program.

10.



Ethan suits up for the Fire Department's Explorers Program.

Need a Ride?

Jocelyn Gallant, an outspoken advocate from Salem, is concerned about the lack of public transportation in NH. Like many people with disabilities, Jocelyn doesn't drive. She takes a taxi to get to and from work; the \$15 per day cab fare takes a significant bite out of her paycheck. Without public transportation, it is extremely difficult for people who don't drive - including many seniors, people with limited incomes, and people with disabilities - to be fully included in their communities. Lack of accessible, affordable transportation prevents many people from finding and holding a job. Shopping, restaurants, health care, movies, town meetings, Old Home Day; all are out of reach. Jocelyn recently testified at the NH Senate in favor of a bill to establish a Regional Transportation System in the Salem-Derry area; the bill passed the legislature and will be signed into law. Better public transportation will benefit all of NH; not only would communities be more physically accessible, public transportation also would expand the available workforce, decrease air pollution, promote tourism, and improve the quality of life for many Granite Staters.

Julia Freeman-Woolpert

SOCIAL INCLUSION AND MENTAL ILLNESS

Ken Jue, Chief Executive Officer Monadnonck Family Services

Fear of someone with a mental illness is still a major problem within our communities. The media continues to use distorted, hurtful images to portray mental illness. Recently, I watched a television crime show which included a scene in a forensic psychiatric unit, every individual in the unit was demonstrating frightening behaviors.

In our society, people who suffer from mental illness, along with their families, are marginalized. Even individuals and organizations providing mental health services may find that communities marginalize them as well. We have to decide that this marginalized existence is no longer acceptable.

If the situation is to change, we need to face the challenge of how to help our communities become accepting and supportive places for everyone. A community's mental health system, even when organized as a rational and effective "system of care," cannot be comprised of only mental health professionals. There must be a role for community members and organizations. Most communities are not comfortable accepting responsibility for supporting individuals with mental illness. While there are a variety of reason why this is so, the major reason is that communities do not know what support to provide or how to provide it; they do not see themselves as having the capacity to deal with mental illness.

It would be ideal if our communities were routinely welcoming and accepting of someone with a mental illness. It would be ideal if each person with a severe mental illness felt that their community was treating them as a "desirable citizen" and offered opportunities for a productive, quality life. It would be wonderful if all sectors of the community schools, healthcare, businesses, recreational programs were accepting of a person with a severe mental illness. Unfortunately, this is not yet the case and will not come about without considerable effort.

We must begin accepting the responsibility of helping our communities develop the capacity for full social inclusion. We need to better understand the different networks in our communities and learn more about how they are organized and how they work. We need to know who the key players are, how decisions are made, and who has clout and resources. Then, we need to go to where these community members spend their time and establish relationships with them. Connecting with a key person or organization may not be immediately possible, but we can begin to make connections with others who can help create a bridge to those with power and influence.

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We can join or help form community partnerships and alliances and leverage resources for the benefit of those with mental illnesses. Armed with what we learn about our communities, we can work with individuals, families, and caring community members to develop strategic plans with realistic goals, timelines, and strategies for making our communities more open and accepting. Having a concrete, detailed plan will help us measure our progress; it is important to document successes and to make adjustments when things are not working.

Individuals and organizations need to see the benefits of working for community acceptance and inclusion. If people can see what's in it for them, they may well join in. Self-interest is not necessarily a bad thing, it just "is." If we recognize this as an aspect of human nature and appeal to it, self-interest can be a valuable tool in helping us attain our goals.

For full social inclusion to happen we must work to create an environment where the odds are not so tipped against those with mental illness. We need to lead by example. We need to be more welcoming and inclusive ourselves. We need to enter into the lives of our communities and not be content with operating on the margins. If we expect to achieve real gains in social inclusion, we must be in our communities every day working to enlighten people about mental illness and helping to build the capacities of the community to accept

12. the capacities of the community to acc and value all its members.

Opening College Doors Wider with Universal Course Design Kirsten Behling, MA Institute on Disability

"I am struck by the fact that, in the body of work that describes students with disabilities in postsecondary education, there is a substantial focus and reliance on accommodating the "disability," the things that are "wrong" within the student, but little or nothing on ways in which college faculty can adjust the ways in which they teach to better reach the increasingly diverse student body." – College Graduate and Self-Advocate with Disabilities

College offers all students exciting opportunities including meeting new friends, living independently, exploring current interests, and paving the road toward a future career.

Many of today's college students are returning after years in the workforce, some do not speak fluent English, many are not fully prepared for the course work, and some have a disability. The diversity of this student body forces the realization that no two students learn alike. Some students learn best through lecture, others do extremely well with visual stimulation (graphics, video, demonstrations), while others excel with hands-on learning (lab classes, internships, experiments). To ensure that the highest quality education is available to all students, college faculty are strongly encouraged to vary their instructional methods.

For the past six years, Equity and Excellence in Higher Education, a project of the University of NH/ Institute on Disability and the University of Massachusetts Boston/Institute for Community Inclusion, funded by the US Department of Education, has worked with seven colleges and universities throughout New England. The project has assisted faculty to diversify their instructional methods by implementing the principles of Universal Design into their courses.

Universal Design is a concept originally developed by architects. Recognizing that retrofitting ramps to buildings was expensive and unattractive, architects began implementing universal access strategies into the original blueprints of a building. Unexpectedly, creating accessible buildings benefited everyone, all people, including those with disabilities, were using the ramps. Ramps made life easier for parents pushing strollers, shoppers with grocery carts, bicyclers, people pulling luggage, and those with physical disabilities.

Another application of the Universal Design principle is the use of

closed captioning. Closed captioning was originally developed as an accommodation for the deaf and hard of hearing to increase their access to television programs. However, many people without hearing impairments use this feature including couples when one person is trying to sleep and the other is watching television, and people in bars, gyms, and airports.

Universal Design for Learning is a concept developed by the Center for Applied Special Technology (CAST). CAST took the built-in flexibility inherent in Universal Design and applied it to elementary and secondary instruction. The resulting flexible instructional methods promote learning for all students, not just those with disabilities.

Equity and Excellence in Higher Education developed another conceptual framework, Universal Course Design, to support the full inclusion of students with disabilities in college courses. Universal Course Design emphasizes the importance of providing flexibility in the design of college courses, resources, instruction, and assessment.

Universal Course Design follows the premise that rather than provide an accommodation for one student, the instructor should ingrain that accommodation into the blueprint of the course so that all students, including those with a disability, have greater access to the information. Recently, a chemistry professor at the NH Technical Institute had a different student volunteer each class period to take notes for the entire class. The professor then combined his notes with those of the student and posted them on his class website, making them available to all students. The presence of a note-taker in his chemistry class freed all students from having to take notes and pay attention at the same time. By posting the notes on his website, students could manipulate the information in a manner that worked best for them. They were able to view the notes in large font, and highlight, print, or add their own comments. This simple strategy was originally designed as an accommodation for one student, however, the professor recognized that it also would help others in a class whose students had a wide diversity of learning styles. The student with the disability who originally required this accommodation no longer had to seek the accommodation from the school's Disability Support Office. More importantly, the entire class benefited from this simple strategy.

Faculty who have implemented Universal Course Design have noticed that all learners are much more engaged in the material being taught. Varying the style of instruction - using guest speakers, case study analysis, hands-on learning in the computer lab, and small group work - gives all students greater access to information. In addition flexible course assessment - providing students with the option of writing a paper, giving a presentation, or interviewing an expert in the field – increases the ability of students to demonstrate what they have learned. For many students the most significant benefit of Universal Course Design is greater personal interest in learning.

A student at the University of Southern Maine recalled a Universal Course Designed strategy that worked well for him:

"One thing I loved that one teacher did was when he took us to the computer lab and interviewed us, had us type our responses, and then he read them all. Later when we did certain assignments he incorporated our interests in the lesson so that each one of us could understand the lesson on a personal level."

A student at Fitchburg State College recalled a Universal Course Designed strategy that her professor included in the course:

"I think they do a great, great job giving us notes abead of time. I really, appreciated getting those notes abead of time and then I would use those notes to follow along in the discussion, so I wasn't missing anything when I was trying to take notes. Also when she used the overhead (projection) it would just reinforce her point, I really appreciated having those notes."

News You Can Use

Medicare recipients who use wheelchairs or scooters - This is for you

The Centers for Medicare and Medicaid Services (CMS) have issued new guidelines that use a function-based criteria for determining the medical necessity of wheelchairs and scooters. This should increase what CMS will cover and improve access for people who need a chair but do not meet the "bed or chair confined" standard. However, there are still problems with overly restrictive criteria requiring that a person need the device in the home. The CMS memo that explains the new guidelines can be found here: www.cms.hhs.gov/mcd/viewdecisionmemo.asp?id=1 43

Secondary Education Transition - New Cool Website

Check out this new interactive website, The Youthhood, from the National Center on Secondary Education And Transition at www.youthhood.org. It is designed "to help youth set goals and plan for the future. Although the site addresses youth directly, it is intended to be used in classrooms, community programs, or any other settings where adults work with youth. The Youthhood includes information, interactive activities, and a wealth of other tools to help youth connect their future goals to their academic learning." A quick glance says it looks like a lot of fun!

Changes to Special Education Rules Go into Effect July 1, 2005.

There are a number of changes to the rules concerning evaluations, IEP objectives and progress reports, discipline, dispute resolution procedures, and surrogate parents. Do you know how they will affect your children? You can find links to more information on the DRC website at www.drcnh.org/Issue%20Areas/Education.htm.

NAMI-NH Bienestar Mental Health Program has a new Consumer Resource Guide for the Hispanic population of Nashua. It can be downloaded from the NAMI-NH website at www.naminh.org.

Detour on the Way to Drivers' Ed

Like most 16 year olds, Paul Deschenes was excited about getting his driver's license. He had been successfully practicing behind the wheel with his parents and was looking forward to taking drivers' ed at TSR Driving School in Keene. (The school district contracts with TSR to teach drivers' education to their students.) On the TSR application Paul's mother, Shelley Viles, noted that her son might need some accommodations because he has Asperger's Syndrome. Shortly after submitting the application, the owner of TSR called the family to say that Paul would not be allowed to take the class and that because of his disability Paul would never be a safe driver. The company came to this conclusion without ever having met with Paul and in spite of Keene High School's recommendation that Paul participate in driver's education. TSR's decision to exclude Paul was made solely on the basis of the label "Asperger's Syndrome," Paul's abilities were never taken into account.

When Shelly Viles talked with the school district administrators about Paul's situation, they agreed that the company was being discriminatory and tried to convince TSR to accept Paul's application. Shelly also contacted the Parent Information Center, the Disabilities Rights Center, and filed a complaint with the Office of Civil Rights. Finally, with intervention by the NH Department of Education, TSR agreed to enroll Paul in their course. However, given all that had happened, the possibility of TSR establishing a good teaching relationship with Paul seemed remote at best. Fortunately, Rep. Tim Robertson, at that time a member of the Keene School Board, looked into the matter for the family and made a connection with the Cheshire Driving School. Cheshire gladly accepted Paul into their drivers' ed program. Paul is now halfway through the course; he had the second highest score in the class on his first test and is well on his way to becoming a licensed driver.



A Class Act

Portsmouth teenager, Michael McCray Nowak has always loved acting. For the past year Michael has received formal training through the NH Theatre Project (NHTP) - Youth Theatre Arts Workshop. As posted on its website (www.nhtheatreproject.org) the NHTP is "dedicated to community building by using theatre and the performing arts to enhance traditional education and support the individual and collective human spirit." Executive Director Genevieve Achile and Instructor Sofia Piel welcomed Michael into a group of already seasoned young thespians and paired him with twenty-four year old Clara Coussement, an acting intern. For the company's winter performance, Michael dressed all in black, stood alone on stage and from memory recited a poem. As the final performance of the spring session approaches, Michael is practicing his lines for a scene from Lord of the Rings. Michael, who has Down syndrome and has limited hearing, will be playing the character Gollum.

Laurie McCray

Michael McCray Nowak performs with the NH Theatre Project

Coming Soon from the DRC: The Rolling Gourmet Your Guide to New Hampshire Restaurant Accessibility

Going out to eat? Wondering if you can get in the door or use the facilities once you are in? Need a Braille or large font menu or want to make sure your guide dog will not be given a hassle?

It's been fifteen years since passage of the federal Americans with Disabilities Act. You would think by now most restaurants would be accessible. Sadly, this is not the case. If you use a wheelchair, dining out is not as simple as finding an appealing restaurant in the phone book and then rolling on down. You may arrive only to find you can't get in the front door, or that the floor plan is so crowded you can't easily get to a table, or that the restrooms aren't accessible (always a must if you plan on having a few beers).

Even if you call ahead, a restaurant may claim it's accessible when it isn't. Picture this scene: You make a reservation and all sounds fine. You get there and as you are pondering the step-up entrance, the Maitre D' says to your dining companion, "It's just a little step, can't he walk just a few feet?"

Lots of folks who use wheelchairs end up eating out at the same accessible places again and again, or just staying home with takeout. That's hardly fair.

Never Fear! The DRC has a plan. We have developed an interactive guide to restaurant accessibility that will look at:

- parking
- getting into the restaurant
- ▶ inside access
- restroom access
- accommodations
- overall experience

You can rate restaurants and look through the online guide to find out what

other restaurants have been rated. While the ratings will focus mainly on physical access, there is room for comments about friendliness and other accommodations. We hope this will not only be a guide for accessible dining, but also serve as encouragement for restaurants to become more accessible. Take a moment to fill out the DRC Restaurant Rating form in this issue of the Rap Sheet.

The Rolling Gourmet is on the web at: http://www.drcnh.org/restaurant.htm Julia Freeman-Woolpert



DRC staffers, Cindy, Sar<mark>ab, and James</mark> check out Concord restaurant, 55 Degrees.

NAME OF RESTAURANT:	BELOW AVERAGE	AVERAGE	ABOVE AVERAGE	COMMENTS
LOCATION:				
 PARKING Is there well-marked accessible parking (including access aisles) at or close to the restaurant? 	NO!	Somewhat inconvenient	Fully Accessible	
 GETTING INTO THE RESTAURANT Can you easily enter the restaurant in a wheelchair using the same entrance as everyone else? How easy was it? 	l could not get in!	Inconvenient or a separate entrance	Fully Accessible	
 INSIDE ACCESS Can you maneuver around using your chair, cane, crutches, etc. easily? (e.g. Are there inaccessible areas? Are tables accessible? Can you sit up close?) 	l could not get around	Inconvenient but do-able	Fully Accessible	
 RESTROOM ACCESS Are both men's and women's rooms accessible? (e.g. can you get into the bathroom, move around comfortably, use the facilities? Are there grab bars?) 	l could not use the facilities	Inconvenient but do-able	Fully Accessible	
 ACCOMMODATIONS If you asked for a specific accommodation (e.g. large font or Braille menu, read the menu to you, welcome your guide dog), was it provided? 	Not Accommo- dating	Minor problems	Fully Accommo- dating	
 OVERALL EXPERIENCE Did you enjoy your dining experience? Was the food and service good? Did the server treat you with respect? 	NO!	It was OK	YES!	
Optional:	Email			
Your name:Address:	Phone		ations do y	/ou use?

Rate the accessibility of --New Hampshire's restaurants!

Take this rating form with you when you go out to eat, then mail or fax it back to the Disabilities Rights Center with your

ratings and comments. OR you can go online, enter your ratings, and find accessible restaurants. http://www.drcnh.org/restaurant

The NH Developmental Disabilities Council Seeks New Members

The NH State Council on Developmental Disabilities is looking for individuals with developmental disabilities or their parents who are interested in serving on the State Council. Members apply for Council membership and if accepted are appointed by the Governor. Applicants must be strongly committed to the Council's mission of "dignity, full rights of citizenship, equal opportunities, and full participation" for all NH citizens with developmental disabilities. The Council does not provide direct services, but focuses on improving policies, plans, and practices. To achieve its mission the Council develops and implements a Five Year Plan that includes over 30 projects to strengthen the voice citizens with disabilities, increase the capacity and effectiveness of the services and supports, and improve public awareness about how people with disabilities can be a part of and contribute to their communities.

The Council meets six times per year on Thursdays from 2:00-4:00 PM and members serve on at least one committee (which meet 6-12 times per year). Council members are also expected to serve as ambassadors for the Council in their communities and on task forces. Council members are appointed to three-year terms for a maximum of two terms. They receive no salary but are reimbursed for their Council expenses including meetings and conferences.

For more information or to get an application, please contact Bonnie Addario at 603-271-3236 or baddario@dhhs.state.nh.us.

Resources

The Department of Justice has Americans with Disabilities Act (ADA) informational materials online and available by mail. www.usdoj.gov/crt/ada/adahom1.htm; Contact the ADA Information Line 800-514-0301 (voice); 800-514-0383 (TTY)

ADA Basic Building Blocks, an online course with CEUs available from Georgia Tech Professional Education can be found at www.adabasics.org/

Access-Able Travel Source, Providing Worldwide Access Information: www.access-able.com/

"Community For All" Toolkit: Resources to strengthen community living, www.thechp.syr.edu/toolkit/index.html.html

The Centers for Medicare and Medicaid Services has a resource page on the ADA and Olmstead related information. www.cms.hhs.gov/olmstead/olmslink.asp

The Inclusion Research Institute: The IRI's mission is to research, develop, and disseminate innovations that enable persons of all ages, including individuals with disabilities or other disadvantages, to be independent, productive, and included in schools, communities, and places of employment. www.inclusionresearch.org/

You may also fill out the Council's survey on line by going to http://www.drcnh.org/ddcsurvey.htm.

NH Developmental Disabilities Council Survey

Please take a moment to complete the following survey for the NH Developmental Disabilities Council. The Council develops a State Plan every five years to establish specific goals, objectives and strategies to address the most important issues affecting people with developmental disabilities in NH. The Council will use the information gained through this survey to develop its new Five Year Plan, which will be completed in August of 2006, and will be in effect from October 1, 2006 through September 30, 2011. For purposes of this survey, a "developmental disability" includes any physical or intellectual disability acquired before age 22 that substantially limits a person's major life activities.

1. We would like your opinion as to what areas the Council should focus its efforts on over the next few years. Please rank the following from "most important" to "least important" for people with developmental disabilities. The most important area should be ranked "1."

- ____ Employment
- ____ Community supports
- _____ Education and early intervention
- ____ Housing
- ____ Recreation
- ____ Health
- ____ Transportation
- ____ Childcare

_____ Quality assurance (People are free from abuse, neglect and exploitation and their rights are respected.)

2. In the last 2 years, what needs, activities, and interests have been most important to you, your family member, clients or other person (s) in your life with a disability?

3. In the last 2 years, have you had access to the supports that allowed you to meet your needs or the needs of your family member, clients, or other person(s) with a disability? Yes___No ____

4. In the last 2 years, have you or your family member, clients, or other person(s) with a disability been able to pursue the activities and interests that are important to you or to them? Yes____No ____

5. What or who has made it possible for you or the person(s) in your life with a disability to meet those needs or to do those activities?

6. In your community, what have been the major barriers for you, your family member or other people with disabilities? (Please attach additional pages if necessary.)

7. Is there anything you would like to add that might help us make NH a better place for people with developmental disabilities? (Please attach additional pages if necessary.)

Tell us about yourself! (Optional)

- ___ I am a person who has a disability.
- If so, did you have your disability before you were 22 years old? Yes ___ No ___
- ____ My son or daughter has a developmental disability.
- ____ I work with people with disabilities, or for an agency that serves people with disabilities. If so, what type of work do you do?

Other interests/ involvement you have with people with disabilities:

County where you live (or where you work if you are a service provider): ____

Do you live or serve people in a rural area?

How did you get this survey?

Please return this survey by September 1, 2005 to: NH Developmental Disabilities Council, The Walker Building, 21 South Fruit Street, Suite 22, Concord, NH 03301. Tel: (603) 271-3236

18.



INSTITUTE ON DISABILITY/UCED UNIVERSITY OF NEW HAMPSHIRE

GOOD EDUCATION FOR ALL FALL SYMPOSIUM

October 27, 2005 Sheraton Nashua Hotel 9:00 am – 3:00 pm

KEYNOTE: SUPPORTING ALL STUDENTS AND TEACHERS IN INCLUSIVE CLASSES

- How is No Child Left Behind affecting educators who recognize the importance of educating all students in general education classes in their neighborhood schools?
- What has been the impact of Alternate Assessment alignment with grade-level content expectations?
- How are we succeeding and struggling with the most recent advances in inclusive education?

Workshops:

- Practical Approaches for Understanding and Supporting the Learning Needs of Children with Autism in a Typical Classroom Setting
- Reaching Every Student: Positive Behavioral Interventions and Supports at the High School Level
- Enlarge Your "Toolbox!" Literacy Instruction for Students with Disabilities
- The Role of the Classroom Assistant in General Education Classrooms: Promoting Independence
- Rev To Incorporate Universal Design Strategies into your Classroom

Please call or visit our website for more information:

Institute on Disability/UCED The Concord Center, 10 Ferry Street Concord, NH 03301 603-228-2084

