Respect and Appreciation for All

by Jake Jacobs

The month of March is nationally recognized as Developmental Disability Awareness Month. The idea behind this is to have all of us be more aware of our fellow citizens who have some degree of intellectual or developmental disability. I for one would like to someday do away with this awareness month. Why do we need to commemorate something that should be ingrained in every civilized nation of the world? Every day of the year we should be naturally accepting persons with developmental disabilities, just as we are of the weather, the person standing next to us in line at the market, or a child playing in the park. Why? Because more and more people with developmental disabilities are part of our communities and our social fabric.

The number of persons alive with a developmental disability grows every year. This is the result of a number of factors: diagnostic capabilities have improved, such as with Autism Spectrum Disorders. Better health care is being provided, both to children and adults, thus increasing the lifespan of individuals. And despite best efforts in pre-natal care, intellectual and developmental disabilities are increasingly common, affecting around 1 in 6 children in the United States; and these disabilities last a lifetime.

The number of persons with a developmental disability living in our communities grows every year. States across the nation are closing large segregated institutions and moving people into our communities, where over 70 national studies have shown that they do far better there than sequestered from view and isolated from society. In just the past few years the Missouri Department of Mental Health—Developmental Disability Division has moved 730 people from state-run facilities to live in homes and apartments throughout Missouri.

The past few years has also seen a national initiative to remove the “R” word (retarded) from our vocabulary; but there are other words just as negative that have been used to describe persons with disabilities. The words imbecile, moron, and idiot were once used as clinical descriptions of persons with disabilities. We still use words like client, consumer, and special needs, labels that only serve to separate and isolate people who just have different abilities. If you stop and think about it, we all have different levels of disabilities; for example I have to wear eyeglasses because of my visual disability.

The bottom line is that all of us have disabilities and abilities to one extent or another. Singling out one month a year to draw attention to persons with developmental disabilities may be something we have to do at this stage in our culture. But I am hopeful that one day we do not need to do that, and that all people regardless of their abilities in life will be respected and appreciated by each of us.
Change is Good!

Stories of Success for Community Inclusion

The Missouri Planning Council for Developmental Disabilities embarked upon this project in an effort to educate Missouri’s citizens about the opportunities that community inclusion can offer individuals with developmental disabilities. The Council believes ALL people with disabilities can be successfully served in the community with appropriate and individualized supports. It is the deepest hope of the Council that these stories will offer vision and hope to the many families and self-advocates who are considering a life in the community for themselves or their family member. The Council expresses appreciation to the self-advocates, family members, providers, and direct care staff who graciously agreed to participate in these success stories and a special thank you to Bobbi Linkemer, Writer, who tirelessly interviewed and compiled these stories. Eitas has reprinted, with permission from MPCDD, excerpts from one of these stories for our readers to emphasize “Change is Good!”. For pictures and more stories or information contact the Missouri Planning Council at (800) 500-7878 or www.mpcdds.com.

“Kelly is part of the Community”

Kelly, loves coffee and soda. Drinking a Pepsi at a big, round table in a brightly lit kitchen, she looks like any young woman entertaining guest in her home. “And it is her home,” says Carol Snow, Director of Future Care, a privately owned provider of independent supported living residences. Every home is totally individualized to meet the needs of the consumers who live there.

Kelly has lived at this residence less than a year, but she adjusted with surprising ease to the move from Bellefontaine because she was visited by Future Care many times before she moved and they got an idea of her needs and her routine. When she saw her new house, she walked right in and made herself at home.

Kelly’s parents had kept Kelly at home until she was eight. “Doctors kept telling us we were going to have to institutionalize her,” says her mother, but I took her everywhere. We had her in a state school, and they insisted she needed 24-hour supervision. One day, I was fixing supper, and my back was turned. She ran past me and out the screen door. From then on, every time she was out of my sight, I was in a panic.

“It broke my heart to place her. It was the hardest thing I ever did. I felt like I had abandoned her.” The only thing available was a place called Wood Haven in Columbia. Kelly, recalls Tony. Her skills deteriorated, and they told us she was becoming uncontrollable. They released her.” The family had few choices. Despite their initial reluctance, they chose Bellefontaine. Kelly was there for 20 years.

Then the family heard that Bellefontaine was closing. The family was devastated by the news. They heard things about Bellefontaine on the news and stories about what could happen if they moved her into the community. They didn’t know what to believe. The first house they saw was a two-story, they knew that wouldn’t work for Kelly. “Then God stepped in and found Future Care for us.” “We looked at this house and had a good feeling about it. It just all came together.”

In the short time she has been living there, Kelly has become part of the community. “At church, at the center where they go swimming, at the beauty shop...they all know Kelly,” says her mother. “She has changed a lot-become very independent. At Bellefontaine, everything in the kitchen was locked up. Here, the kitchen is hers, and she can just go to the refrigerator and take out whatever she wants. She can go anywhere in the house she wants to go.”

There are other changes, as well. With one-on-one attention, Kelly’s personal grooming and self-care have improved. She has regained abilities she had lost over time. She loves her room, which family and members of her staff painted and filled with stuffed toys and brightly colored pictures. There is no question that Kelly feels at home.
**Accounting**

Matthew Gibbs has joined eitas’ elite Accounting Department consisting of:

- Earlene Clayton—Fiscal Manager
- Karen Lane—Accounts Payable and Receivable Specialist
- Erin Bole—Payroll and Billing Specialist
- Mr. Gibbs will have the title of Payroll and Fixed Assets Specialist

**Intake and Information**

Malinda Barnett, Intake and Information Lead will now have support with the growing demands placed on this department. Cheryl Carlin, Support Coordinator has been selected from interviews to join Malinda in the Intake and Information department.

Cheryl will leave her Support Coordinator responsibilities and the individuals she has supported will be reassigned.

This department determines eligibility for all eitas services. This department also directs people with questions to the correct resource and keeps the eitas Resource Directory on our web site up to date.

**Quality Assurance**

To assure that eitas is meeting all Medicaid requirements correctly a new department was created and called “Quality Assurance”. The person selected to this new department is Kristen Yates, former Senior Support Coordinator.

Kristen has been with eitas since the formation of the first Support Coordinator team in 2008 and is well qualified to fill this position. One aspect of Kristen’s new responsibilities will be to work with the Accounting and Service Coordinator departments to ensure logging and billing accuracy.

**Records Department**

James Ferreter has joined Brenda Schmidt. Records Department Lead in the eitas Records Department. The Records Department has the responsibility of filing records for all individuals supported by eitas. Records are kept electronically as well as hard copies.
Join Us on Saturday, March 30, 2013 for the Second Annual

Ability 5K Run, Walk & Roll Event

There is still time register for the second annual Ability 5K Run, Walk & Roll event will be held on Saturday, March 30th at Swope Park in Kansas City, Missouri at the Bandstand off Starlight Drive.

Race Day Timeline:

- 6:30am: Race Day Registration
- 8:00am: 5K Run/1 Mile Walk
- 8:15am: 1 Mile Roll Begins
- 8:50am: Tot Trot*
- 9:15am: Awards Ceremony

*The Tot Trot is free to youngsters 10 years old and under

Bring your family and friends to enjoy a morning filled with lots of activities and fun.

This event is dedicated to the loving memory of Michael Haseltine, former Deputy Director for Developmental Disability Services of Jackson County—eitas and his dedication and support for the people we serve. In memory of Michael eitas created a scholarship fund. Proceeds from this event will go to the Michael Haseltine Scholarship Fund and be used to assist college students whose major study focuses on working in the developmental disability field and to the individuals supported by eitas pursuing a higher education. If you have questions about the second annual Ability 5K Run, Walk & Roll event please email 5krunwalkroll@eitas.org

2013 Camp Scholarships

Developmental Disability Services of Jackson County ~ eitas is offering camp scholarships for 2013. Funds are limited and scholarships will be granted on a first come, first serve basis. Scholarships are limited to $100.00 per person.

To be considered for a camp scholarship:

- You must be at least 16 years of age, a person with a developmental disability, a resident of Jackson County and registered at the camp of your choice.

For more information and/or to get an application contact Kathleen at kganaden@eitas.org or call (816) 363-2000. The deadline for 2013 Camp Scholarship applications is May 15, 2013 or earlier if all funding for scholarships has been exhausted before that date.

Empowering Individuals Through Advocacy & Support
March is Disability Awareness Month

DISABLE THE LABEL

BE A PART OF DISABILITY AWARENESS 2013

Defining people only by their disabilities can be hurtful and limiting. See others for who they really are and you’ll learn a lot about true character. People with disabilities should have the right to the same experiences, choices, and control over their lives as everyone else.

Mayors throughout Jackson County have been addressed requesting that they support eitas with a proclamation honoring the month and the contributions organizations such as eitas have made locally and state-wide. The theme for this year’s awareness month is “Respect for All” and is aimed at every community accepting and respecting all individuals regardless of their level of abilities.

12th Annual Disability Rights Legislative Day

April 9th, 2013

Missouri State Capitol—Jefferson City, MO

This year, the theme is ACCESS FOR ALL

April 9, 2013 is Disability Rights Legislative Day! The event brings together Missourians with disabilities, family members and those who care about them to the Capitol to hear from legislators and to talk with legislators about issues impacting lives each and every day. For more information you can contact Cathy Brown: cathybrown@dcil.org or Becky Dickey: badrld@centurylink.netc.
We Believe in

**PEOPLE FIRST LANGUAGE**

*If thought corrupts language, language can also corrupt thought.  George Orwell*

We recognize that the greatest barriers facing individuals with disabilities are old, disrespectful attitudes and perceptions. So we vow to adopt new ways of thinking and talking about disability.

We believe people with disabilities are people, first—they are not their labels.

We believe a disability label cannot be used to define a person’s character, value or potential. A label is simply a medical diagnosis that’s a socioeconomic passport to services.

We no longer talk about what’s “wrong” with an individual who has a disability, because like gender, ethnicity, and other traits, disability is simply a natural part of being human. They are not broken—like a “disabled vehicle.”

We recognize that a person’s so-called “problems” can be more accurately and respectfully described as “needs” or “uses” (such as “needs assistance” or “uses a wheelchair”). We also believe people with disabilities do not have “special needs”—their needs are perfectly normal for them. The “special needs” label generates pity and can lead to social isolation and physical segregation.

We believe **PEOPLE FIRST LANGUAGE** is not “political correctness,” but something more important: good manners, respect, and The Golden Rule.

We believe words matter. A person’s self-image and self-esteem are influenced by the language used about him or her. So we no longer use harmful or prejudicial words about people who have conditions that are called disabilities.

We believe people with disabilities are more like people without disabilities than different.

We vow to focus on an individual’s strengths, abilities, interests, hopes, and dreams, because these are more important than any diagnosis. And during the few times it’s relevant to mention a person’s disability, we will use **PEOPLE FIRST LANGUAGE**.

### Examples of People First Language

**Say—**

- People with disabilities.
- He has a cognitive disability
- He has autism.
- He has Down syndrome.
- She has a learning disability/difference.
- He has a physical disability.
- She’s of short stature/she’s a little person.
- He has a mental health diagnosis/condition.
- She uses a wheelchair/mobility chair.
- He receives special ed services.
- She has a developmental delay.
- Children without disabilities.
- He communicates with his eyes/device/etc.
- Customer.
- Congenital disability.
- Brain injury.
- Accessible parking, hotel room, etc.
- She needs...or she uses...

**Instead of--**

- The handicapped or disabled.
- He’s mentally retarded.
- She’s autistic.
- He’s Down’s/a Down’s kid.
- She’s learning disabled.
- He’s a quad/para/crippled.
- She’s a dwarf/midget.
- He’s emotionally disturbed/mentally ill.
- She’s wheelchair bound/confined to/in a wheelchair
- He’s in special ed/a “sped” kid.
- She’s developmentally delayed.
- Normal/healthy/regular children.
- He’s non-verbal.
- Client, consumer, recipient, etc.
- Birth defect.
- Brain damaged.
- Handicapped parking, hotel room, etc.
- She has a problem with...