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# ...linnesota State Council on Disability

# 1994 ANNUAL REPORT



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### **MISSION STATEMENT**

The mission of The Minnesota State Council on Disability (MSCOD) is to expand opportunities for all children and adults with a disability throughout Minnesota, without regard to disability, and to advocate policies and programs which will promote the independence of children and adults with disabilities and protect their right to participate fully in society.

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#### **Chair Letter**



Audrey Richardson

For the past 20 years, the Minnesota State Council on Disability has been a lead agency for all people with disabilities regardless of the disability or age at onset. The Council's role in Minnesota has been many fold, including advocating for people

with disabilities and advising the governor and legislature on issues that affect people with disabilities.

During the 1993-94 fiscal year, the Council has focused on developing a strategic plan and working toward meeting its goals. Our areas of concentration were health care, transportation, employment, education, access and legislative development.

The Council has continued its collaborative effl. forts to better serve the disability community

through workshops, legislative initiatives or support, and problem solving groups.

As an agency, the Council was, again, at the forefront in obtaining bonding dollars for school districts, libraries and state owned facilities to comply with the Americans With Disabilities Act. These achievements will continue to serve a large number of Minnesotans as baby boomers hit the senior citizen age group and increase the need for services to the disabled and a barrier-free environment.

Many challenges still lie ahead. The Minnesota State Council on Disability will continue to strive to reach its goal of maximum independence and integration for all people with disabilities when appropriate. The future of our disability community requires collaborations between private and public agencies working toward unified goals.

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### Introduction

In 1973, the Minnesota Legislature created the Minnesota State Council on Disability as the primary agency to recommend and advocate for programs and legislation that will improve the quality of life and promote the independence of people with disabilities in the state.

The Legislature issued specific responsibilities for the council to carry out its mission. The most important duties of the Council are:

- to advise the governor, legislature and state agencies on matters concerning public policy and programs, services, and facilities for people with disabilities.
- to encourage and assist in developing coordinated goals and objectives as well as coordinating programs, services and facilities for people with disabilities.

- to serve as a source of information to the public on disability issues.
- to initiate or intervene in administrative or judicial proceedings which directly affect the legal rights of people with disabilities.

The Council has 21 members appointed by the governor for a three-year term. A majority of members must be disabled or must be parents or guardians of people with disabilities. At least one member must be from each of 11 development regions in the state. Council members establish the Council's policy and annual work plan, both providing a focus for the daily work of the Council's ten full time staff positions.

Various activities help to fulfill the Council's missions:

#### 1994 Events

- provides information and referral services to people throughout the state.
- provides technical assistance to Minnesota businesses and public agencies to assure improved physical and programmatic accessibility.
- develops position statements on the delivery of services to people with disabilities through research, community involvement, and interaction with other government agencies.
- initiates and reviews legislation pertaining to disabilities and works with as many disability related organizations as possible to affect public policies.
- seeks to educate the public and policy makers on disability-related matters.



Craig Martinson (right) receives a Distinguished Service Award from Gregg Asher for his work with people who survived head injuries.

Throughout 1994, the Council devoted considerable effort toward educating the general public about the requirements of the Americans With Disabilities Act (ADA), the landmark civil rights act for people with disabilities which became law in 1990.

The Council presented training and lectures across Minnesota to state, county, township and city officials; rehabilitation counselors, building owners and managers; non-profit agencies; and other interested organizations. The primary focus of the training, however, was on employment of people with disabilities.

In January, the Council assisted in forming the new Coalition on Health Care for Persons with Disabilities. In addition, it held training on accessing the legislature.

In collaboration with Goodwill Easter Seals, technical colleges, Courage Center, Metropolitan Center for Independent Living and others, the Council provided workshops, training sessions, and conferences for employers. Approximately 4,500 people attended the ADA and Accessibility training.

The Council also held its annual Consumer Workshop in collaboration with Goodwill Easter Seals, Great Lakes Disability & Business Technical Assistance Center, and Courage Center. The workshop emphasized "Knowing Your Rights," equal employment issues explained by Liz Savage, U.S. Department of Justice. The principal speaker was Billy Golfus, a Minnesotan who coproduced and co-directed a video titled "When Billy Broke His Head and Other Tales of Wonder."

The Council developed the Outdoor Recreation Access Survey, the first in the nation, along with the Department of Natural Resources, U.S. Department of Forest Service, and the Center for Independent Living of Northeast Minnesota.

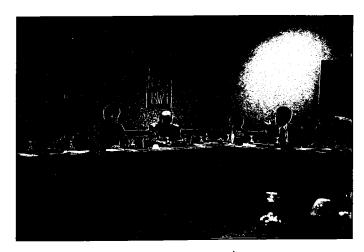
The Council has been a leader in advocating for accessibility in Minnesota's 432 school districts and succeeded in assisting the legislature and the governor in establishing \$5 million to make schools accessible.

**Council** staff members consult on a weekly basis on Metro Mobility, Minnesota Health Care, PCA, and work incentive issues with the public and advocacy organizations.

The Council's Legislative Committee reviews and monitors legislation which affects the disability community. In order to keep our constituents informed of appropriate legislative concerns, MSCOD sends "Capitol View," a special edition newspaper, to 350 organizations.

The Council again held the Minnesota Division of the National Journalism Scholarship Program in conjunction with Disabled American Veterans. In addition, it held the state recognition awards and maintained a speakers bureau throughout Minnesota. The bureau stays in contact with about 3,000 people in the state on disability issues.

The Council assisted the legislature and the governor on issues such as vulnerable adults, school district access, special education, downsizing regional treatment centers, building



Council members meet on a regular basis to discuss and resolve concerns.

codes, personal care attendants, workers' compensation, employment disincentives, rural and urban transportation, and school drop-outs.



A northern Minnesota student receives special education services for his disability. He uses a computer to complete his work.

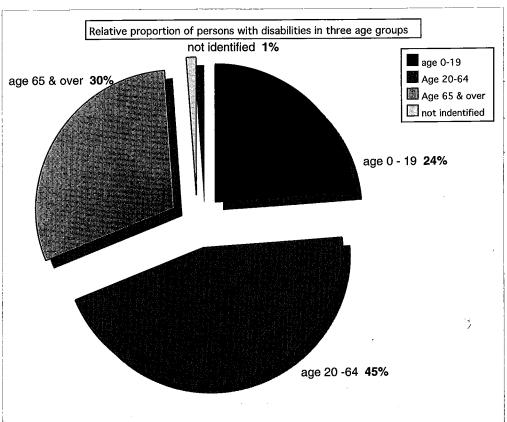
**The** Council staff has met 25 times with the four minority councils' staff on issues affecting the disability community, such as reorganization, who is disabled, violence and racism.

**Council** staff assisted the legislature and the governor to acquire funds to continue the Statewide Building Access Project.

Throughout the year, the Council has met and worked with agency representatives, governor's staff, and legislative members on transportation, health care, special education, senior disability concerns, employment cost of living adjustments, and Americans with Disabilities Act and rights issues.

## Age & Percentage

The Council's constituency is the largest minority group in Minnesota. About 20 percent of the state's population, or over 875,000 Minnesotans, have one or more functional limitations representing a wide range of disabilities. Services for people with disabilities depend to a great extent on the age of recipients. The graph below illustrates the proportions of people with disabilities in three age groups.



Certain issues or services are of particular importance to each group although there is considerable overlap.

#### Age 0 - 19 Habilitation service needs

Education
Support home based services
Physical therapy
Occupational therapy
Medical
Language development

#### Age 20 - 64 Rehabilitation service needs

Supported work
Standard employment
Developmental Achievement Centers
Medical intervention and support
Transportation
Living arrangements

#### Age 65-100 Supportive needs

Medical
Live in programs
Personal care attendants
Senior activities
Retirement funds
Nutrition sites and programs
Transportation

The Council has been given a very broad mandate and has become involved over the years in issues that affect all groups of disabilities. One of the Council's major challenges is choosing those issues which will have the greatest overall impact on people with disabilities.

## **Brian Wagner**

Brian Wagner, a native of Osakis, Minnesota, was a popular athlete in his small high school. He loved all sports, especially baseball. When Brian was 15 years old, he was diagnosed with facioscapular-humeral dystrophy. By the time he was a high school senior, he could no longer play baseball.

Brian moved on to major in Economics at St. Cloud State University. In 1978, he married Helen Ann, his wife.

But he was despondent over the progress of his illness and attempted to commit suicide in 1980. He is thankful that the attempt was unsuccessful.

In 1983, Brian and Helen Ann became parents of a daughter, Liesl Brooks. In 1992 they flew to Guatemala City to pick up their adopted son, sixyear-old Josue. The family lives in Alexandria, Minnesota. Brian has been office manager at Community Memorial Home in Osakis for the past six years. In addition he is a deacon at his church and volunteers as an advisor to various community accessibility committees in Douglas County where he lives. Brian also keeps busy with his children's school and scout activities.



Brian Wagner

In 1989, then governor Rudy Perpich appointed him to the Minnesota State Council on Disability. He has served on the education, access, and finance committees and various task forces.

Brian said that his biggest disappointment came this summer--the baseball strike.

# **Issues & Concerns**

MSCOD continually seeks to increase standards of living for people with disabilities through education, enforcing improvements in the delivery of services, influencing public policies which have a positive effect on people with disabilities, and providing support for significant issues affecting people with disabilities. Among the important concerns of the Council for 1994 and beyond:

- Employment of people with disabilities is less than 30 percent and of people with severe disabilities is less than ten percent.
- Personal care attendant wages must be increased, especially in rural Minnesota. An increase in wages will affect managed care planning for many people with disabilities.
- Schools are not required to physically evacuate students with disabilities when conducting fire drills.

- Many county services for people with disabilities lack funds and service space which create a backlog of cases and long waiting periods.
- Mental health service delivery for people with disabilities in outstate Minnesota, who have moderate to severe mental health needs, is limited.
- Children with disabilities, as well as children of color, have very high school drop-out rates.
- The quality of special education programs in Minnesota schools varies considerably, even for students with similar disabilities, because of funds, teaching staff and the districts' commitments to educating students with disabilities. Many parents don't know their rights and, as a result, are poor advocates for their children.
- Teachers, paraprofessionals, and other educators require more basic training and skills updat-

### Issues & Concerns

ing to work with students with disabilities. Many professionals have never encountered people with disabilities.

- More accessible housing must be made available to people with disabilities in Minnesota. Fifty percent of the 875,000 people with disabilities are 21 years old or younger and have adequate housing, but the remaining 50 percent have limited or no accessible housing. Bathrooms and kitchens have the most limited accessibility.
- Home health care needs must be more available to people with disabilities. Many medical insurance companies and Title XIX services are not available through the home health care plan, and these services are now under review.
- Children of color with disabilities are under represented in the service delivery system. Better testing methods and information about various services must be available to serve children of color.
- Approximately 2,000 medically fragile and technology dependent students lack the support services required in their daily lives. In addition, high

lead concentrations in paint and automobile exhaust, dense populations, and inner city environment increase the risk of developing disabilities in children living in the city.

• Access to public buildings, private businesses and housing is a critical issue to the disability community and continues to be a high priority for the Minnesota State Council on Disability. Although some progress has been made with the passage of state and federal legislation, the need for a more accessible, integrated environment continues to grow as the disability population increases and our society ages.



Ellen and Ken Richter (right) wait to receive their award for Employer of the Year. Gregg Asher recognized their business for creating a completely accessible environment for people with disabilities.

# **Program Organization**

The Minnesota State Council on Disability has four program areas:

- 1. Advocacy The Council serves as an advocate for people with disabilities in physical and programmatic access, employment, education, transportation, health care and human services, housing, and policies pertaining to people with disabilities. The Council is the major advocate in Minnesota for architectural accessibility.
- **2. Public policy -** The Council researches, develops and advocates programs and policies which serve the needs of people with disabilities.

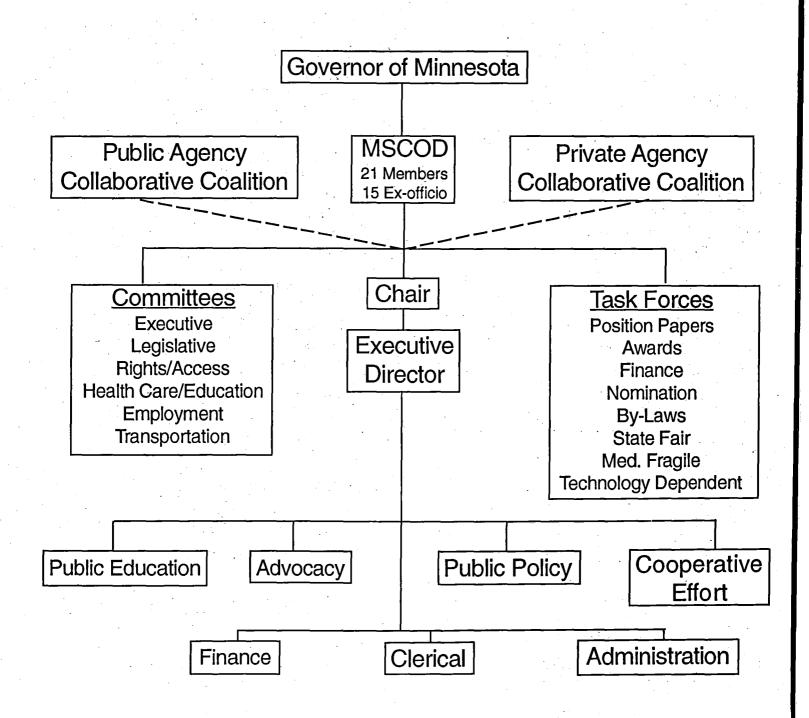
It advises and assists the governor, state agencies, the legislature, and the public on policy and the administration of programs, services and facilities for people with disabilities.

**3. Public education -** The Council is a source of information on services, programs and legislation for people with disabilities. The public has access to the Council's information and referral service, Americans With Disabilities Act training, disability awareness training, public forums, workshops, newsletters, building access survey, outdoor recreation survey, an attitude questionniare, and other publications.

# **Program Organization**

4. Cooperative efforts with community organizations - The Council gathers and shares information through networking with disability-related organizations and agencies and

through public forums, then works to achieve a consensus on relevant issues with the disability community.



# Statistical Report

The following is advanced data for 1994 which has not been confirmed for Minnesota:

#### Who are the 48.9 million people with disabilities (Minnesota - 875,000)

•		
	<u>federal</u>	<u>Minnesota</u>
• under age 15	6%	6%
• age 15 - 64	60%	60%
• age 21 - 64	56%	56%
• 65 and over	34%	34%
• men	22.9 million	408,800
• women	26.0 million	464,200
<ul> <li>people with severe disabilities</li> </ul>	24.1 million	430,300
- men	9.9 million	176,700
- women	14.2 million	253.500
Byethn	ic groups age 15-64	,
• Blacks	4.1 million	6,700
Asian and Pacific Islander	515,000	5,100
Hispanic origin	2.4 million	3,700
White, not Hispanic origin	22.6 million	304,300
<ul> <li>American Indian, Eskimo, Aleut</li> </ul>	285,000	3,400
Whatistheempl	oyment status (age 21 - 64)?	
• total	108.7 million	1.9 million
<ul> <li>people with disabilities</li> </ul>	14.3 million	250,000

• total	108.7 million	1.9 million
<ul><li>people with disabilities</li></ul>	14.3 million	250,000
- men	7.9 million	138,100
- women	6.4 million	111,900
<ul> <li>people with severe disabilities</li> </ul>	2.9 million	50,700
* men	1.3 million	22,700
* women	1.6 million	28,000

#### What is the health care insurance coverage (age 15-64)?

<ul> <li>people without a disability</li> </ul>		135.6 million
- private insurance		80%
<ul> <li>government plan coverage</li> </ul>		5,2%
- no coverage		14.8%
<ul> <li>people with a disability</li> </ul>		16.3 million
- private insurance		74.1%
<ul> <li>government plan coverage</li> </ul>		7.2%
- no coverage		18.7%
<ul> <li>people with a severe disability</li> </ul>		13.2 million
- private insurance		48.1%
- government plan coverage		36.2%
- no coverage	8	15.7%

# Statistical Report

Over 27 million people age 15 and over reported having a limitation in a physical or daily living activity which creates a disability.

#### What are the leading causes of disability and their impact?

	<u>federal</u>	<u>Minnesota</u>
<ul><li>arthritis/rheumatism</li></ul>	7.2 million	128,500
back/spinal problems	5.7 million	101,800
• heart	4.6 million	82,100
<ul><li>lung/respiratory</li></ul>	2.8 million	50,000
high blood pressure	2.2 million	39,300
<ul> <li>stiffness or deformity of the foot, leg, hand</li> </ul>	2.0 million	35,700
• diabetes	1.6 million	28,600

#### Individuals age 15 and over reported the following:

<ul><li>used a wheelchair</li><li>men</li><li>women</li></ul>	1.5 million 919,000 575,000	26,800 16,400 10,300
<ul> <li>used a cane, walker, or crutches (six months or longer)</li> </ul>	4.0 million	71,400
<ul> <li>when wearing corrective lenses:</li> <li>had difficulty seeing words or letters in newsprint</li> <li>could not see words or letters in newsprint</li> </ul>	8.1 million 1.6 million	144,600 28,600
• had difficulty hearing a normal conversation	10 million	178,500
could not hear what was said in a normal conversation	924,000	16,500
mental or emotional illness	6.9 million	123,200



Lt. Gov. Joanelle Dyrstad (center) congratulated the 1994 winners of the Journalism and Poster Scholarship program co-sponsored by MSCOD. Students are (left to right) Andrew Thiele, Ashley Davies, Rebecca McCammon, and Jennifer Hietala.

## **Survey Data**

In January, 1994, the National Organization on Disability commissioned Louis Harris, a national polling firm, to conduct the most comprehensive survey of people with disabilities. This survey updates the 1986 Harris survey which influenced passage of the Americans With Disabilities Act of 1990 (ADA).

Following are some of the survey results. The new survey shows that people with disabilities are not participating fully in society.

- They are poorer.
- They are less educated.
- They are more likely to be unemployed.
- They socialize less.
- They go out to shop, entertain, worship and participate in sports less than people without disabilities.

Significantly, a majority of Americans with disabilities state that they feel a sense of identity with others who have a disability. Fifty four percent feel a higher comfort level with others who have a disability compared to 40 percent in the 1986 survey. This may set a trend for future mainstream and inclusion supporters.

Those with disabilities also say they want to become full contributors and participants in American life.

- They have fought for enactment and effective implementation of the ADA.
  - They have founded advocacy organizations.
  - They have won greater acceptance by the public.
- They have posted gains in education. The survey showed 54 percent of adults with disabilities stated some alarming data:

- Forty percent of people with disabilities live in households with incomes of \$15,000 or less compared with 18 percent of Americans without disabilities.
- Ten percent of people with disabilities have household incomes of \$50,000 compared with 22 percent of people without disabilities.
- Of the adults with disabilities surveyed, 64 percent say their conditions prevent them from getting around, attending events, and socializing as much as people without disabilities.
- Only 47 percent of people with disabilities believe that others treat them as equals as opposed to feeling sorry for them or being embarrassed by them.
- Fully 86 percent of adults with disabilities consider their faith important to them. Yet 39 percent of them never visit a church compared with 22 percent of adults without disabilities.
- Only 35 percent of people with disabilities are satisfied with their lives in general compared with 55 percent of people without disabilities. While 48 percent believe the quality of their lives will improve, 36 percent think it will get worse.
- Large numbers of people with disabilities mentioned the following problems as major issues in their lives:
- inadequate health insurance (26%)
- inadequate work opportunities (21%)
- inadequate transportation (14%)
- High school completion rate for people with disabilities changed from four percent to 25

percent since 1986. However, a California firm maintains that up to 19 years of age, people with disabilities experience a 35 to 45 percent school dropout rate.

- "Not working is the true definition of disability." Only 31 percent of people with disabilities work; in 1986 33 percent worked. Substantial problems discourage the employment of those surveyed who want to work:
- physical barriers which prevent them from working effectively (24%)
- job discrimination because of their disability (30%)
- unfavorable attitudes in the workplace, most often from supervisors and co-workers who don't think they can do the job (33%)
- don't have the skills, education or training to get full time jobs (38%)
- lack of accessible transportation to get to work (28%)
- -those not working say they would lose income or insurance coverage if they took a full time job (57%)

The survey showed a strong sense that things have improved for people with disabilities and that things will continue to improve. Sixty percent say that in general, things have changed

for the better over the last ten years. Improvements have been seen in access to public facilities, public transportation, attitudes toward all disabilities, and the portrayal of people with disabilities in the media and advertising. But 15 percent say that conditions have gotten worse.

Has the Civil Rights legislation helped the Americans With Disabilities Act of 1990? Awareness of ADA by people with disabilities increased from 29 percent in 1986 to 40 percent in 1990. Thirty five percent of adults with disabilities feel the ADA will make their lives better.

For 1994 and beyond, these are critical issues for people with disabilities:

- Substantial increase in employment is needed.
- Changes are needed in the work environment and in the attitudes of employers and coworkers.
- Change the attitude and motivation of people with disabilities. Make them aware that more assertiveness leads to more work.
- Increase use of computers and other special equipment which employees with disabilities need to perform their jobs.
- Change the national attitude to accepting people with disabilities as equals.

# Income for Unemployed

The Commissioner of Social Security has directed an active strategy to raise the employment of current and potential SSA disability beneficiaries in order to increase their economic self-sufficiency and decrease their dependence on public benefits.

As currently structured, SSA's disability programs are seen as obstacles to President Bill Clinton's goals for people with disabilities to be able to move from dependence to independence, from paternalism to empowerment, and from exclusion to inclusion. The programs also may be obstacles to achieving the equal opportunity and full participation goals of the Americans with Disabilities Act.

Some of the many barriers that Social Security beneficiaries face in their attempts to become independent are directly related to the Social Security benefit system:

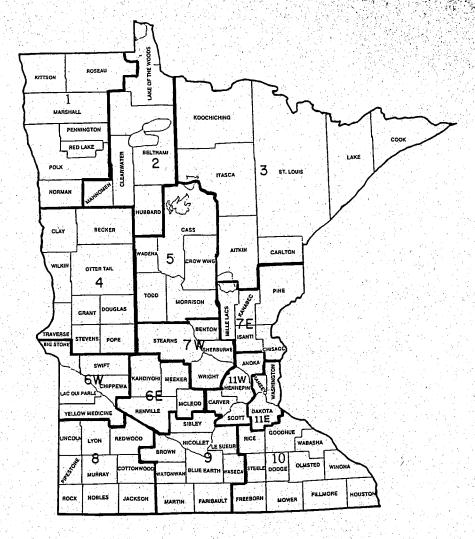
- 1. The security of regular monthly payments is a compelling incentive to stay on public benefit rolls in contrast to the insecurity of lost benefits, medical coverage and unstable employment prospects.
- 2. Receiving benefits sometimes has a damaging effect on people with disabilities, leaving them poor and dependent.
- 3. Young people dependent upon public benefits are unlikely to develop job skills, gain employment, and leave the benefits as adults.
- 4. Benefit programs, as they have evolved, are complex and difficult to understand for people who want to work. The programs also are difficult for SSA to administer.

#### **Committees**

The staff and members of the Minnesota State Council on Disability serve on a variety of committees which promote the rights of people with disabilities and provide more life options for them.

Access Review Board Advisory on Inclusive Educational Program Americans With Disabilities Act, Statewide Steering Committe Career Connections Advisory Caregiver Support Project Task Force Coalition of Health Care Issues for Persons with Disabilities **CORE-DOER Human Relations Project** Courage Center Public Policy Committee Department of Education Desegregation Committee **DOER-ADA Review Project** Governor's Affirmative Action Activity Long Term Care Campaign Mental Retardation and Related Conditions Advisory Committee Minneapolis Access Committee Minnesota Department of Transportation 16(b)(2) Review Committee Minnesota for Affordable Health Care Minnesota State Minority council National Council on Disability President's Committee on Employment of People with Disabilities Special Education Coalition State Transition Interagency Committee Statewide Affirmative Action Committee Title XIX Citizens Advisory Committee Transit Access Advisory Committee

## Minnesota Development Regions



#### 1994 Council Members

Audrey Richardson, Chair Region 2, Bemidji

Shulamit Adler Region 11, St. Louis Park

> Gregg Asher Region 9, Mankato

Sharon Behrens Region 11, Burnsville

Romelle Cable
Region 7, Lindstrom

Patricia Hadder Region 6, Willmar

Marjorie Hammargren Region 9, Kilkenny Michele Kyler Region 1, Crookston

Kathy LeMay Region 11, Mendota Heights

> Mark Netzinger Region 7, Cambridge

Stanton Opdahl Region 11, Roseville

Kathy Rupprecht Region 10, Lewiston

Charlie Smith Region 11, Minneapolis

Charles Spencer Region 5, Brainerd

Diane Storm
Region 7, Lindstrom

Brian Wagner Region 4, Alexandria

Gary Weber Region 11, St. Paul

Teri Welcher Region 11, St. Louis Park

> Lloyd White Region 8, Marshall

Joan Willshire, Vice Chair Region 11, Minneapolis