

On Target

Informing Indiana About
Disability Issues

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Disability Issues

On Target is a monthly publication of the Indiana Governor's Council for People with Disabilities.

We welcome your suggestions for newsletter content and ideas concerning the actions of the Council. *On Target* is made available in accessible formats upon request.

Suellen Jackson-Boner
Executive Director

Christine Dahlberg
Associate Director

Paul Shankland

Order Disability Awareness Month materials now

Disability Awareness Month will again be celebrated this March. The theme of the 2007 campaign is "Room for Everyone." This year's poster pictures a family moving into a new neighborhood - with neighbors gathered to welcome them. A young boy with a physical disability plays in his new yard with new friends. The message communicates that everyone is welcome in the neighborhood, and that there is "room" for everyone.

A number of materials are available to help advocates statewide promote disability awareness. From more than 20 packets filled with grassroots activities, to colorful posters, stickers and bookmarks, it's easy to implement ideas for helping those with and without disabilities be more sensitive to each other. Topics range from special event planning to building awareness in classrooms. Theme-specific activity packets are also available. Advocates can order materials now by completing the order form included with this issue of "On Target."

"This year's theme, 'Room for Everyone,' truly reflects what Disability Awareness Month is all about," said Council Executive Director Suellen Jackson-Boner.

"This theme captures the community spirit of inclusion. There is indeed room for all of us and the talents we each bring to make the community a

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better place to live."

Disability Awareness Month can serve as a catalyst to engage the community in a myriad of activities to span the entire year. Awareness fairs, ADA training, essay contests and displays in schools, government agencies and businesses are just a few of the activities Disability Awareness Month has inspired.

In 2006, advocates and educators placed orders for more than 600,000 collateral materials. Almost 20,000 people were reached through grassroots special events and education programs coordinated by advocates with the help of the activity and information packets. Overall, more than 1,100 people were involved in almost 5,000 hours of planning for these activities.

To place an order, fill out the enclosed order form or visit the Council's Web site at www.in.gov/gpcpd. For more information, contact Kim Dennison at Borshoff Johnson Matthews, 47 S. Pennsylvania St., Suite 500, Indianapolis, IN 46204; (317) 631-6499 (fax); kdennison@bjmpr.com (e-mail); or (317) 631-6400 (voice).

Final IDEA regulations issued, now in effect

On Oct. 14, the final regulations from the 2004 updated IDEA laws took effect, 60 days after publication in the Federal Register. In 2004, the updated laws covered an estimated six million schoolchildren nationwide, according to the "New York Times."

The final regulations call for a significant change in testing for students with disabilities. Before these regulations became final, schools nationwide identified children with learning disabilities by comparing their scores on standardized tests to their classroom academic achievement. This was often a long process that required students to wait until third or fourth grade before they could receive special

education help.

Now, the Federal Education Department says states cannot allow schools to use this method to evaluate whether a student should receive special education. The regulations state that schools must find alternative ways to determine whether a child is eligible for special education. Another regulation requires schools to notify parents when the district begins looking into whether the child needs special education.

Many educators and advocates have applauded the new regulations. "If you talk to principals and special education directors, there is pent-up demand for better ways to serve struggling kids than waiting until they crash and burn in third and fourth grade," said James H. Wendorf, executive director of the National Center for Learning Disabilities.

For more information about the final IDEA regulations, visit www.ed.gov/policy/speced/guid/idea/idea2004.html.

Indianapolis VA hospital named Polytrauma Center

The Richard L. Roudebush VA Medical Center in Indianapolis recently announced its designation as a special Polytrauma Level 2 Center for veterans returning from Operation Enduring Freedom/Operation Iraqi Freedom. This unit specializes in rehabbing veterans who have disabilities due to time in active duty.

"The Polytrauma unit provides the specialty care the veterans need, while keeping them very close to their families," said Linda Jeffrey, public affairs officer for the Roudebush VA Medical Center. "The main rehab we help with is amputations, orthopedics and traumatic brain injury, which can lead to memory loss or having to relearn motor skills. We redid the whole unit with our patients and their families in mind.

There are family gathering rooms and kitchens. Veterans who may be in wheelchairs were considered, and all these areas are not only accessible, but tailored to them."

The Indianapolis VA Medical Center was already the referral hospital for patients coming from VA facilities in Ft. Wayne and Marion, Ind., and from nearby Danville, Ill. The hospital is known for acute inpatient medical, surgical, psychiatric, neurological and rehabilitation care, as well as both primary and specialized outpatient services. In addition to these specialized services, the hospital now features the Polytrauma unit.

There are only 22 Polytrauma units in the country like the one at Roudebush. Veterans from four Michigan VA hospitals located in Ann Arbor, Detroit, Saginaw and Battle Creek, along with the two other Indiana locations and the Illinois location, are all referred to Indianapolis if they need the care of the Polytrauma team.

The 11-bed Polytrauma unit officially opened with a ribbon-cutting celebration Aug. 18. Now veterans who seek care in the network will not have to travel as far from their families to receive the specialized services they need to rehabilitate.

More than 47,000 patients treated by the Indianapolis VA Medical Center require almost 410,000 outpatient visits and more than 7,100 inpatient episodes of care yearly.

Recent war veterans return with disabilities

As we celebrate Veterans Day (Nov. 11) and National Veterans Awareness Week (Nov. 5-11), it is important to remember the thousands of veterans from Operation Iraqi Freedom (OIF) and Operation Enduring Freedom (OEF) who have returned to the United States with injuries or disabilities.

According to May reports from the Department of Defense (DOD), 18,187 troops have been wounded during the operations. While some of these battle injuries are recoverable, many resulted in permanent disabilities such as amputations or traumatic brain injuries.

As of May, the DOD reported a total of 674 amputations in Iraq and 41 in Afghanistan. Of the 1,179 traumatic brain injuries reported in both conflicts, 96 percent were sustained in Iraq. Unfortunately, troops often sustain several injuries. As of March, of the total 1,124 Army soldiers injured in both operations, 80 percent (895) sustained a single injury, while 20 percent (229) sustained multiple injuries.

In addition to the physical injuries and disabilities experienced by current troops, VA patients from past conflicts are reporting increased mental distress. According to a February study of the Department of Veteran Affairs, mental distress among patients aged 18-44 has increased dramatically between 2000 and 2003 - when the Iraqi war began. In fact, disability-compensation cases for post-traumatic stress disorder have nearly doubled since 2003.

"As veterans return home and many join the ranks of other Americans with disabilities, there is no greater honor than to welcome them into communities that are inclusive and accessible," said Suellen Jackson-Boner, executive director of the Council. "Our task takes on new meaning as we must double our efforts to ensure full implementation of the Americans with Disabilities Act."

For more information, visit www.va.gov.

Reintegration scholarship leads to second chance

For individuals diagnosed with bipolar disorder, schizophrenia or other mental illnesses, recovery

requires one to first identify his or her goals and, then, to achieve these goals.

The process of reintegration starts with treatment and ends when the individual is once again able to lead a typical, everyday life by learning to manage his or her symptoms along with family, friends and work.

For April Taylor, a former schoolteacher, reintegration meant a major career change. After teaching for 10 years, bipolar disorder ended her career and threatened her life. It was time for a change. Today, 11 years after her diagnosis, Taylor is close to earning a culinary arts degree and eager to start her new career as a chef, all thanks to the Lilly Reintegration Scholarship.

"My life is largely a success story today thanks to treatment which has controlled the symptoms of my bipolar disorder," said Taylor. She goes on to thank Eli Lilly and Company for selecting her as one of the 54 recipients of the 2005-2006 Reintegration Scholarships. "Thank you for giving me a second chance. Thank you for giving me my life back," she said.

For eight years, the Lilly Reintegration Scholarship has been helping those with bipolar disorder, schizophrenia and other related disorders get their lives back on track by providing funding for education. Since the program's 1997 inception, approximately 700 people have benefited from the Reintegration Scholarships.

"The diagnosis of severe mental illness doesn't mean the end of one's hopes and dreams," says Ralph Aquila, M.D., director of residential services at St. Luke's/Roosevelt Hospital Center in New York and chairman of the scholarship judging panel.

Applications for 2007-2008 Lilly Reintegration Scholarships are currently available at www.reintegration.com and will be accepted until Jan.

13, 2007.

Bloomington South High School band practices inclusion

He plays the clarinet in the concert band, he's a senior in high school and he's in the marching band. His name is Jonathon Moulden, and he also has Muscular Dystrophy. Moulden has played the clarinet since middle school and wanted to join the marching band. That's when band director Robert Dubinski stepped in with an idea.

Bloomington South's band features a large percussion section. Dubinski proposed teaching Moulden the bells and cutting the "waiters" stand that the xylophone rests on. "I'm happy we had the ability to find a place for Jon," Dubinski said. "The kids love him, and he does a great job. No one sees his wheelchair. It's just Jon."

"Being in the band has been a wonderful way for Jon to be included," said Mary Anne Moulden, Jon's mother. "It was a great way for him to meet kids."

"Marching band is a really fun group, and I am so happy to be a part of it," Moulden said. "A disability isn't impossible to deal with. If you want, you can do anything."

Indiana selected for managed care initiative

With state Medicaid programs seeking better, more affordable managed health care programs for people with disabilities, the New Jersey-based Center for Health Care Strategies (CHCS) is helping states do so through the Purchasing Institute on Managed Care for People with Disabilities.

After a competitive selection process, California, Indiana, Nevada, New York, Pennsylvania and Washington were the six states selected for the 24-month program, which will assist them in designing,

implementing and evaluating managed care programs for adults with disabilities.

Two training sessions provided by the CHCS Purchasing Institute will teach participating states methods for implementing and expanding risk-based managed care programs for adults with disabilities covering a wide array of related topics, including behavioral health integration, care management and performance measurement.

"Targeting public resources to more effectively address the needs of this complex population can significantly improve health outcomes and help control costs," said Melanie Bella, vice president for policy at CHCS.

With access to an online learning network, the program will also provide a medium for participating states to share best practices, concerns, ideas and resources in order to provide more comprehensive, cost-effective managed care to people with disabilities.

For more information, visit the CHCS' Web site at www.chcs.org.

Of Note

Best Buddies offers online friendship program

E-Buddies®, one of six friendship programs offered by Best Buddies International, is an online program in which individuals with and without intellectual disabilities are matched in one-to-one e-mail friendships. To participate, participants must be at least 10 years old, have an e-mail address, and be able to send and receive e-mail at least once a week. E-Buddies is currently seeking individuals with intellectual disabilities to be matched with an e-Buddy. For more information or to fill out an application, visit www.ebuddies.org,

www.bestbuddiesindiana.org or call (317) 920-8683 (voice).

Register now for annual conference

Interested participants may still register for the 2006 Conference for People with Disabilities "Seeking New Truths; Forging New Paths." The Conference will be held Nov. 16-17 at the Westin Hotel in downtown Indianapolis. Featured speakers include Dr. Peter Blanck, one of the world's leading scholars and experts on disability law and policy, and Dr. Al Condeluci, a top consultant on human services and community issues. The deadline for advance registration is Nov. 6, but walk-ins are also welcome. For more information, contact the Council at (317) 232-7770 (voice) or visit the Council's Web site at www.in.gov/gpcpd.

Legislative committee results available soon

As the next Indiana General Assembly session approaches, many Interim Study Committees will issue their results. To review committee results that may affect you or your family, visit www.in.gov/legislative/interim/committee/index.html, which allows selection of any Interim Study Committee. Within each committee, notices, agendas and meeting minutes are posted, with results reports following the final meetings at the end of October and beginning of November.

Indiana Governor's
Council for People with Disabilities
150 West Market Street, Suite 628
Indianapolis, Indiana 46204

(317) 232-7770 voice
(317) 232-7771 TT

E-mail: GPCPD@gpcpd.org

Web site: www.state.in.us/gpcpd