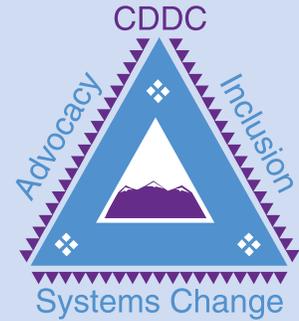


BETWEEN THE LINES



COLORADO DEVELOPMENTAL DISABILITIES COUNCIL

Fall 2011

TASH Resolution on Choice and Community Living

Whereas, most people with disabilities live lives far different from other Americans who enjoy the right to live where they want and with whom they want, and

Whereas, people with disabilities, especially those people with more significant disabilities, do not enjoy those rights to choice, even if they live in the “community,” and

Whereas, people with disabilities enter the community service system referred to agencies where, if accepted, they move into a house or apartment where a vacancy exists among a group of other people receiving services from that agency without the freedom to live elsewhere and with others of their choosing, and

Whereas, this system exists as designed by those who manage the system, not people with disabilities or their allies, and

Whereas, agencies around the country are proving person centered and individualized supports are a better alternative, and

Whereas, person centered and individualized supports honor the rights of people with disabilities to choose, and “The findings document consistent benefits of residential support provided in very small settings—with choices of where and with whom to live,” and

Whereas, people with disabilities choosing where and with whom they live generally means, like other Americans, they will choose to live near

family, friends, where they work or where they go to school, existing social networks are maintained rather than disrupted, and

Whereas, agencies providing person centered and individualized supports do so by finding and organizing other supports not paid for by the state DD system thus offering their supports at no greater costs than the current congregate-based system, and

Whereas, sufficient examples exist of person centered and individualized support’s ability to assist people, including those with more severe disabilities, to own or rent homes of their while also making possible superior outcomes,

Therefore Be it Resolved that TASH, an international disability rights organization, calls on state and federal governments to institute policies and practices that provide explicit information in an effective manner to people with developmental disabilities explaining their rights to live where they choose and with whomever they choose and that afford citizens with disabilities the opportunity to live and receive individualized support in typical and socially valued homes of their own.

Adopted September 2011



United Nations Convention on the Rights of Persons with Disabilities: Update

As a result of the passage of the United Nations Convention on the Rights of Persons with Disabilities, December 3 every year is International Day of People with Disability. The Convention entered into force on May 3, 2008, after the Convention received its 20th ratification. The U.S. was not among the countries signing onto the Convention until July 2009. Ambassador Susan Rice, who signed the Convention, said that the United States was “very pleased to join 141 other countries that have signed this convention in pursuit of a more just world.”

Since the signing, President Obama has submitted the Convention to the Senate for ratification, and has appointed Judy Heumann as the Special Advisor on International Disability Rights at the US Department of State. Efforts in the United Nations to recognize the rights of people with disabilities began in 1976, when the General Assembly proclaimed 1981 as the International Year of Disabled Persons, and designated December 3 as an international day of recognition. December 3 continues to be a day of recognition around the world.

United Nations Enable is the official website of the Secretariat for the Convention on the Rights of Persons with Disabilities (SCRPD) in the Department of Economic and Social Affairs (DESA) at the United Nations Secretariat. The website provides public information on topics related to disability and the work of the United Nations for persons with disabilities. (<http://www.un.org/disabilities/default.asp?id=17>)





Colorado Developmental Disabilities Council
1120 Lincoln Street, Suite 706
Denver, Colorado 80207
(720) 941-0176
cddpc.email@state.co.us
www.coddc.org

Council Members:

Individuals:

Katherine Carol—Denver
Jesus Castillo—Northglenn
Ed George—Denver
Penny Gonnella—Denver
Katie Grange—Snowmass Village
Betty Henderson—Westminster
Christine Herron,
Chairperson—Centennial
Michael Hoover—Boulder
Lisa Kramer—Littleton
Stephanie Lynch—Boulder
Mike McCarty—Boulder
Carol Meredith—Highlands Ranch
Karie Valdez—Alamosa
Karen von Phul—Denver

Agency & Organization Representatives:

The Honorable Irene Aguilar
Colorado Senate
Colorado General Assembly

Shirley Babler
Department of Public Health & Environment, Maternal & Child Health

Todd Coffey
Department of Human Services, Older Americans Act

Susan Fager
Pacer Center
Non-profit Organization

Mary Anne Harvey
The Legal Center, Protection & Advocacy Organization

Scott LeRoy
Department of Human Services, Rehabilitation Act

Thom Miller
Department of Human Services, Title XIX Social Security Act

Corry Robinson
JFK Partners, University Center for Excellence

Ed Steinberg
Department of Education, Individuals with Disabilities Education Act

Council Staff:

Marcia Tewell
Executive Director

Marna Ares
Planner/Newsletter Editor

Mackenzie Helton
Fiscal Manager

Julie Farrar
Policy Analyst

Lionel Llewellyn
Administrative Assistant

The Alliance for Full Participation



The Alliance for Full Participation (AFP) is a formal partnership of leading developmental disabilities organizations, including Developmental Disabilities Councils, with a common vision—to create a better and more fulfilling quality of life for people with developmental disabilities. It is hoped that through the diversity of its many voices, AFP members will collectively reach this goal. AFP supports a network of state teams, dedicated to promoting full participation for people with developmental disabilities.

AFP's Definition of Employment

Individuals with developmental disabilities want to work in integrated settings along with their co-workers who do not have disabilities. They want to work for the same wages, benefits, and opportunities to advance in their careers, and contribute to society, and move out of poverty. To obtain equal access to employment, education must make transition from school to work a priority rather than an add-on, and adult service providers must work to remove barriers and support individuals in real jobs for real pay.

Despite the passage of the Americans with Disabilities Act, the unemployment rate for people with developmental disabilities has remained distressingly low. AFP's challenge goal is the first of its kind since 1980. When achieved it will make a significant difference in the lives of people with developmental disabilities.

Real Jobs—It's Everyone's Business: Alliance for Full Participation Summit

On November 17-19, 2011, AFP will hold its national conference that seeks to find solutions to the challenges facing those who seek to increase integrated

employment for people with developmental disabilities. Summit 2.0 Real Jobs—It's Everyone's Business will be a highly interactive convening of the leaders of the developmental disabilities community to address the challenges and barriers facing increasing integrated employment for people with developmental disabilities. The Summit will be held at the Gaylord National Harbor, just outside of Washington, DC. For more information: <http://www.allianceforfullparticipation.org/summit-2011>

Plenary sessions will feature local, state and national leaders exploring new ways of thinking about employment and provide new insights and inspiration on how to achieve AFP's goal of doubling integrated employment for people with developmental disabilities by the year 2015.

Breakout topics include information on implementing best practices, leading systems change, understanding innovations, and working with employers and communities. Breakout sessions will provide plenty of opportunity for questions and conversation and will feature perspectives of self-advocates, employers, policy leaders, researchers and service providers.

The Interactive Town Hall presentation will be a challenging and frank look at what is needed to make integrated employment a reality for all, including discussions of sub-minimum wage, Employment First policies, integrated and group employment and the barriers that keep us from reaching our goals. Attendees will have the chance to voice opinions, ask questions, and vote on the topics discussed.

At the closing session of the Summit, attendees will commit, collectively and individually, to the actions that they will take to make AFP's goal of doubling integrated employment for people with developmental disabilities a reality by 2015.

(Disclaimer)

The views expressed by authors in Between the Lines, the quarterly newsletter of the Colorado Developmental Disabilities Council, are not necessarily those of the Council, its individual members or the staff. Letters to the Editor are encouraged, as are requests for correction of factual information. Please direct such to the newsletter editor at marna.ares@state.co.us.



Sister Act Section



The Legal Center Files ADA Complaint Because the Douglas County School District's Private School Voucher Program Discriminates Against Students with Disabilities

By Randy Chapman

This summer The Legal Center for People with Disabilities and Older People filed a complaint with the United States Department of Justice against the Douglas County School District (DCSD) for violating Section 504 of the Rehabilitation Act and Title II of the Americans with Disabilities Act in denying equal access to students with disabilities to the school district's Choice Scholarship Program and public charter school the Choice Scholarship School.

The DCSD has discriminated against students with disabilities by offering vouchers, called "scholarships," for private schools that provide only limited services (if any) for students with disabilities. The DCSD's publicly funded Choice Scholarship Program excludes children with disabilities, beyond those who have few needs for education supports, from equally participating in the Choice Scholarship Program. Moreover, in order to implement the Choice Scholarship Program, DCSD has created a public charter school, the Choice Scholarship School. The public Choice Scholarship School provides only limited services to students with disabilities, does not provide special education services, and only serves students with what they consider mild disabilities. Thus, students with disabilities do not have equal access to the benefits of the Choice Scholarship School nor to the Choice Scholarship Program.



In order to participate in the Choice Scholarship Program/Choice Scholarship School, parents of students with disabilities must forgo needed accommodations and support services for their children. Moreover, despite the fact that the Choice Scholarship Program/Choice Scholarship School is a public charter school, the Choice Scholarship Program/Choice Scholarship School will treat students who need special education supports as parentally placed private school children under the Individuals with Disabilities Education Act (IDEA). As parentally placed private school children, these students will only have access to limited services and will not be offered individualized services through an individualized education program (IEP). On the other hand, parents of students without disabilities who wish to participate in the Choice Scholarship Program/Choice Scholarship School are not asked to forgo any of their children's rights. Thus, parents of students with disabilities do not have the same choice to participate in this program. This violates section 504 of the Rehabilitation Act and Title II of the Americans with Disabilities Act (ADA).

The Legal Center believes that choice is important. We believe, however, that all families, including those with children with disabilities, should have access to that choice.

Developing a Unified Understanding and Consistent Practices in Care Coordination:

Colorado's Care Coordination Community-of-Practice
Sarah Hoover, M. Ed., Director of Community Education
JFK Partners, University of Colorado School of Medicine
September, 2011



In Colorado and nationally, it is recognized that care coordination is needed to improve the quality of services, supports and experiences of people who have varying levels of needs. Yet there has been a lack of consensus on the functions, competencies, desired outcomes, and even the definition of care coordination. The Colorado Care Coordination Community-of-Practice aims to build this consensus in Colorado.

Efforts are occurring across disciplines within Colorado state government and in counties and communities across the state to improve services for children, youth and families. State-managed children and youth programs and local-level services providers in the areas of child welfare, medical and health care, behavioral and mental health, developmental disabilities, home visitation, child care and education, juvenile justice, and substance abuse prevention are making progress toward instituting approaches to care and services that are:

- ▶ child/youth-centered and family-focused, with the needs of the child, youth and family dictating the types and mix of services provided;
- ▶ community-based, with the locus of services as well as management and decision-making responsibility resting at the community level;
- ▶ inclusive of family and youth as partners with professionals at all levels of assessment, services, and care; and
- ▶ collaborative between providers, agencies, schools, and community resources in order to increase access to an array of services and supports for children, youth, and families.

The Colorado Care Coordination Community-of-Practice, an ad hoc cross-agency committee with representatives from the Colorado Department of Public Health and Environment, Family Voices Colorado, and JFK Partners/University of Colorado School of Medicine, and substantial input from other family, community and state stakeholders, convenes monthly to offer a definition, values, functions and outcomes of care coordination in hopes that it be accepted across all sources of such service, and provide care coordination guidance and resources for those involved with care coordination throughout Colorado serving children, youth and their families.

The goals of the Community-of-Practice are:

1. To develop a definition of care coordination, and to identify the functions and outcomes of care coordination;

2. To offer guidance and a framework for Colorado regarding care coordination through the Care Coordination Plan; and
3. To be a resource to collaborative conversations among entities providing care coordination

To date, three resources have been developed to help our state move forward in consistent and functional coordination of care for children, youth and families.

4. A proposed definition, functions, and outcomes of care coordination;
5. A Care Coordination Plan to describe the principles, values and essential qualities of care coordination, which outlines recommendations for families, providers, and systems-level agencies on how to increase the efficiency with which care coordination services are received and provided; and
6. A Care Coordination Toolkit developed as an accompanying document to the Care Coordination Plan, which is primarily intended for care coordinators and providers of services who are beginning to build, or want to evaluate their capacity to provide care coordination.

Recommendations for system-level agreement on the definition and expected functions of care coordination have been developed and this work is part of Goal 2 Objective 1 of the Colorado State Plan for Prevention Intervention and Treatment Services for Children and Youth, 2010-2013 (<http://tinyurl.com/PLC-State-Plan>).

Current work of the Community-of-Practice includes anticipated collaboration with Colorado's implementation of health care reform through The Accountable Care Collaborative, a new Medicaid program to improve client health, coordinate care and reduce costs.

Through this innovative work, the Care Coordination Community-of-Practice hopes to develop a statewide recognition of common elements of care coordination, acceptance of a shared definition of care coordination, and state and community infrastructures that support professional development, quality assurance, and positive consumer outcomes with care coordination.

For information on this initiative, please contact: Sarah Hoover, Director of Community Education

JFK Partners/University of Colorado School of Medicine sarah.hoover@ucdenver.edu
303/724-7635



Sustainability

7. Can be easily replicated on a local, regional, or national basis so as to have broad impact and sustainability
8. Is built to last as evidenced by factors such as continuing financial support, legislative backing, or integration into an established course of instruction.

For further information, visit: <http://www.treas.gov>.

Hallmark Asset-Building Activities and Programs

Economic assets are resources that promote financial self-sufficiency, community participation, and quality of life. Research has demonstrated that asset ownership enhances community status and well-being, influences the opportunity for future gain and the ability to transfer wealth between generations, and is associated with better health.⁴ Yet, income preservation, savings, and asset development have not been traditionally associated with employment policies for people with disabilities.

To date, public asset-building programs and policies that have effectively moved individuals and families from poverty to economic self-sufficiency have not been part of a comprehensive asset pathways strategy. Instead, a disconnected range of services and programs have been made available to assist individuals in building and protecting assets. Good public policy requires the establishment of a comprehensive array of services that address financial literacy, provide easier access to mainstream financial advice, and offer opportunities for savings, investment, and long-term wealth accumulation.

McCulloch developed a visual representation of this continuum of asset-building opportunities.⁵ Figure 1 displays the types of policies, programs, and initiatives that states can establish as they develop a successful, comprehensive package of asset development approaches for low-income people with disabilities. Each step reflects the underlying need for continuing financial literacy education and greater access to stable employment opportunities that increase income.

Step One: Strategies that Create Access to Mainstream Financial Services

Most working Americans understand the importance of having a safe and affordable place to deposit their paychecks, pay their bills, save for “rainy day” emergencies, and prepare for retirement. An established relationship with a financial services organization is crucial—whether it is a bank, community development financial industry organization, or credit union. Yet, as many as 22 million U.S. families—most of them earning less than \$25,000 per year—are **unbanked**, meaning they lack any basic checking or savings account.⁶ Additionally, the Center for Financial Services Innovation estimates the **underbanked**⁷ at over 40 million households (106 million individuals).⁸

For most people today, personal financial management typically begins with savings and checking accounts, which are, more often

than not, tied to an electronic debit card. From a consumer standpoint, bank accounts are an effective vehicle to safeguard funds and to save and build assets. Too often, however, low-income individuals and families choose to use non-traditional financial services such as check cashers, rapid anticipation loan businesses, and payday lenders. Research conducted by the Center for Responsible Lending indicates that payday lenders and similar services often result in the borrower paying 400% in annual interest rates.⁹ Connecting low-income populations and individuals with disabilities to more mainstream financial instruments is a vital first step for better asset building.



Community Development Financial Organizations (CDFIs)

Over 750 organizations nationwide have been designated by the U.S. Department of Treasury as Community Development Financial Organizations. The unique nature of a CDFI is its focus on community outreach and addressing the financial needs of low-income and underserved communities and populations. A number of community development banks and credit unions have created financial programs directed toward the needs of people with disabilities. Since many of these organizations are mission driven, their programs are more flexible to meet the individual needs of certain populations rather than a “one-size-fits-all” as found in many larger financial institutions.

CheckSpring Community Corporation (CCC), located in the Bronx, **New York**, opened in 2007 with a mission to provide financial services to unbanked populations. CCC’s goal is to create a new model of banking that combines check cashing and savings within a low-income population currently un-served by traditional financial institutions. Its purpose is to help unbanked populations to gain financial relationships and build assets by providing an alternative to sub-prime lenders and check-cashing outlets. CCC also offers check-cashing and banking services for people with disabilities. (<http://www.checkspring.com>)

Veridian Credit Union in **Iowa** became the first financial institution in the nation to act as a fiscal agent on behalf of its members with disabilities. Veridian has a long history of providing innovative and affordable financial services to members with the greatest need. Through the Iowa Able Foundation Partnership, Veridian provides low-cost loans to members with disabilities to purchase assistive technology to improve individual independence or increase home-based or self-employment opportunities. (<http://www.veridiancu.org>)



Figure 1. Continuum of Asset-Building Opportunities, Poverty to Economic Security



Step Two: Strategies that Create Savings Opportunities

The current economic downturn has highlighted consumers’ heavy reliance on credit and the failure of many American families to maintain savings accounts as part of their personal assets. Having adequate savings can have a critical impact on one’s quality of life and well-being. Savings provide adequate support into retirement, serve as a safety net in the face of an unexpected income loss or expense, and can be used as collateral to leverage large purchases such as a house, investing in a small business, or accessing higher education.

Since the implementation of the Personal Responsibility and Work Opportunity Reconciliation Act of 1996 and the subsequent downturn in the national economy, a variety of strategies have been developed to enhance savings opportunities for low-income people, including passage of the Assets for Independence Act (AFI) that created the Individual Development Account (IDA) program.

IDAs are matched savings accounts designed to help low-income workers plan for and reach specific asset building goals. In an IDA

program, an eligible individual signs an agreement with a participating agency to save earned income for a specific purpose. The participant’s savings are placed into a separate bank account and matched with program funds. Federally funded IDAs promote savings for any one of three targeted asset building goals: home ownership, small business start-up, and postsecondary education. To be eligible for an IDA, an individual must be working and must be eligible for Temporary Assistance for Needy Families or the Earned Income Tax Credit (EITC), or have household income below 200% of the Federal Poverty Level. Eligible individuals or families must also have a net worth of no more than \$10,000, excluding their primary residence and one motor vehicle.

Many low-income workers with a disability are simply unaware of the benefits of an IDA, although individuals with disabilities who are working part or full time and are eligible for EITC would also be eligible for an IDA. To remain eligible for Supplemental Security Income (SSI) and Medicaid, there are strict resource limits. Federally funded IDAs, however, are exempt from being counted as an asset. In addition, Social Security Disability Insurance (SSDI) beneficiaries have no limits on the amount of money they can save or resources they can acquire. An IDA could be

established for an SSI or SSDI beneficiary that saves income for a specific asset building goal and have the added benefit of matching dollars to the dollars being saved from earned income. The IDA, under these circumstances, actually helps preserve eligibility for SSI benefits.

To increase savings opportunities for people with disabilities, the Office of Community Services in the U.S. Department of Health and Human Services is collaborating with the federal Administration on Developmental Disabilities to sponsor the AFI Family Support 360 IDA's Initiative, whereby training and technical assistance will be offered to AFI grantees nationwide, to enhance services for people with disabilities. To learn more about AFI state projects and opportunities for persons with disabilities to establish IDAs, the Office of Community Services offers a AFI Project Locator organized by state and local areas at <http://www.acf.hhs.gov/assetbuilding/states.html>.

Another program that encourages savings is the New Jersey-based Success of Saving (SOS) financial literacy program, established by Allies, Inc., a community rehabilitation provider with the support of the New Jersey Council on Development Disabilities. SOS empowers individuals with disabilities economically by teaching them how to budget and save earned income in a personal savings account. The program encourages saving through a combination of interactive coursework, trips to local banks, and setting a savings goal. Deposits made by program participants are matched by the SOS program. When participants have saved \$500 of their earned income, it is matched by \$1,000 toward the realization of their goal, upon completion of financial education classes.

Finally, workers with disabilities can also take advantage of two programs especially related to the disability population—Special Needs Trusts and the Plan for Achieving Self Support. Both initiatives provide opportunities to expand asset development through savings and protect against losing much needed public benefits during the transition period to asset development.

Special Needs Trusts vs. Pooled Special Needs Trusts

Parents of children with disabilities often face years of expensive care for their children. Financial planners often help parents provide for children with disabilities when the parents are no longer alive to provide care through

Special Needs Trusts

While **Special Needs Trusts** are a useful financial tool for parents with resources, a Special Needs Trust may be administered by a relative or friend who is appointed as trustee, which may entail little or no cost to the Trust, while a **Pooled Special Needs Trust** entails fees that must be paid out of Trust funds. However, Pooled Special Needs Trusts provide a way for individuals with disabilities to join a pooled trust and establish a sub-account for their sole benefit as a means to receive financial support for expenses not covered by other benefit programs. Funds are used for expenses not already covered by SSI or Medicaid. Funds held in trust do not affect eligibility for SSI or Medicaid. Key elements of Pooled Special Needs Trusts include:

1. A nonprofit organization as the trustee with fiduciary responsibility over the trust,
2. The trust combines the funds of multiple people with disabilities,
3. The beneficiary often receives the value of the trust in the event of beneficiary death, and
4. Funds cannot be used to cover housing expenses already covered by SSI.

Normally, a trust will be considered an available asset whenever someone applies for a means-tested public assistance program such as SSI or Medicaid. Special Needs Trusts provide an exception to the asset rule that is often applied to trust funds. A properly administered Special Needs Trust is not counted as an available asset and disbursements from the trust are not counted as income under the rules that apply to SSI and Medicaid. One of the major distinctions between Special Needs Trusts and Pooled Trusts is the federal requirement that Pooled Trusts must be established and administered by a nonprofit organization.

For more information on Special Needs Trusts and Pooled Trusts, the Center for Special Needs Trust Administration, Inc. (<http://www.sntcenter.org>) provides information on the types of Pooled Trusts operating in various states. For more on this initiative, the Disability Rights Washington organization has published an overview on this model, available at: <http://www.disabilityrightswa.org/2009-publication-pdf/guardianships/FY1%20Special%20Needs%20Trust%20Web.pdf>.

Some examples of Pooled Special Needs Trusts that expand quality of life and asset development for people with disabilities include:

1. Shared Horizons serving people with disabilities in Maryland and the District of Columbia (<http://www.shared-horizons.org>).
2. Enhanced Life Options serving New Hampshire (<http://www.elonh.org>).

Plan for Achieving Self Support (PASS)

A PASS is a way to use countable income to fund a vocational goal. Normally, countable income such as wages would reduce an SSI payment. Instead, in exchange for promising to set aside countable income to use for an approved and specified goal, the Social Security Administration will maintain or increase the SSI payment, to provide support for living expenses while the PASS is active. SSI beneficiaries may set resources aside in the PASS, as well as income. PASS applicants must use resources or income other than SSI income to pay for the goods and services they need to meet the goal. Placing resources in a PASS can enable individuals to save more without losing SSI eligibility, or to initially qualify for SSI if their resources would otherwise be too high for SSI.

Allowable PASS expenses can include costs related to education that will make an individual more employable, or the cost of purchasing a car that will be used as transportation for work, among other expenses.

and micro-business development as well as homeownership programs and trusts. In the area of asset building, working to develop complementary public policies that help a wide range of people (e.g., low-to-moderate-income, individuals with disabilities, welfare recipients) that are also integrated with employment strategies is important to developing a long-term, universal, and sustainable system of services.¹³

Third, it is important to **educate service providers and people with disabilities and their families about available asset development programs**, including tax preparation, tax filing, and federal and state tax credits. Too often, local benefits counselors focus exclusively on how workers with disabilities can protect their benefits. While this is indeed an important service in the short term, training counselors should also help workers with disabilities work toward long-term financial independence in order to reduce dependency on public benefits, understand their long-term financial needs, as well as how to access the innovative strategies mentioned in this brief. It is also important to adopt a process that routinely educates and trains frontline workforce professionals and benefits counselors about the availability of asset development programs and how to access them. Supporting long-term employment is another key element in any comprehensive statewide asset development strategy.

Finally, **integrating asset development strategies in tandem with employer marketing and outreach initiatives** will also most likely yield a more sustainable result. Employer-sponsored asset development opportunities include promoting the use of electronic debit cards in lieu of paper payroll checks, creating pretax savings deductions for homeownership, and offering financial literacy education as part of the employee benefits package. These employer initiatives have the effect of reinforcing publicly sponsored strategies and other local efforts to help people with disabilities achieve economic self-sufficiency and employment.

Useful Resources

A great deal of information on asset development and asset building is available. Outlined below are some helpful sources to learn more about asset-building and development strategies for people with disabilities.

U.S. Department of Labor/Office of Disability Employment Policy, <http://www.dol.gov/odep>
National Disability Institute, <http://www.ndi-inc.org>
World Institute on Disability, <http://www.wid.org>
Institute on Assets and Social Policy, <http://www.iasp.brandeis.edu>

Financial Literacy Programs
FDIC - Money Smart, toll-free: 1(877) ASKFDIC, TTY: 1(800) 925-4618, <http://www.fdic.gov/consumers/consumer/moneysmart/>

America Saves, (202) 387-6121, <http://www.americasaves.org/>
Success of Saving, program in New Jersey for individuals with significant disabilities, <http://www.alliesnj.org>

IDA and EITC Programs
IRS, marketing and outreach to individuals with disabilities through community partnerships nationwide, <http://www.irs.gov/individuals/article/0,,id=226960,00.html>
TAXfacts+ Campaign/Real Economic Impact Tour, <http://www.reitour.org>
National Research and Training Center on Psychiatric Disability, University of Illinois at Chicago, <http://www.cmhsrp.uic.edu/nrtc/>

Cooperative and Shared Equity Homeownership Housing Associations and Cooperatives, <http://thechp.syr.edu/hcoops.htm>
Guidebook to Consumer Controlled Housing: Developed for Minnesotans with Developmental Disabilities, <http://rtc.umn.edu/guide/>

Understanding Public Benefits

Medicaid Buy-In for Working People with Disabilities, <http://www.ssa.gov/disability/research/wi/buyin.htm>
State Resource Guide for Medicaid Buy-in Programs, <http://disability.law.uiowa.edu/lhpdcrtc/mig/>

Understanding General Asset Development Strategies for People with Disabilities National Consortium for Health Systems Development, <http://www.nchsd.org>
Asset-Building Background Brief on Understanding Asset-Building Strategies for People with Disabilities—Background for Medicaid Infrastructure Grants, <http://www.nchsd.org/libraryfiles/AssetDevelopment/AssetBuildingPolicyBrief072506.pdf>
Asset Development for People with Disabilities: A Conceptual Framework, <http://www.nchsd.org/libraryfiles/AssetDevelopment/Asset%20Development%20Paper%20July07.pdf>

Finding Funding
A Guide to Federal Sources for Asset-Building Initiatives, http://www.financeproject.org/publications/FindingFunding_AssetBuildingInitiatives.pdf

Endnotes

1. National Disability Institute for the U.S. Department of Labor. *Creating a Roadmap Out of Poverty for Americans with Disabilities*, 2009.
2. Stapleton, D., O'Day, B., Livemore, G., and Imparato, A. *Dismantling the Poverty Trap: Disability Policy for the 21st Century*. Rehabilitation and Research Training Center for Economic Research on Employment Policy for Persons with Disabilities, Cornell University, 2005.
3. Center for Working Families. *CWF EarnBenefits Evaluation/Learning Paper*, 2005.
4. Center for Community Economic Development. *Wealth in Sight: A Strategy for Improving Assets for Delaware's Residents. Final Report*, 2008.
5. McCulloch, H. *Building Assets While Building Communities*. Walter and Elise Haas Fund, 2006.
6. U.S. General Accounting Office. *Electronic Transfers: Use by Federal Payment Recipients has Increased but Obstacles to Greater Participation Remain*. Washington, D.C.: U.S. General Accounting Office, 2002.
7. For the purposes of this brief, **underbanked** is defined as "may have current checking account and/or current savings account if individual made one or more non-bank financial transactions in the past 30 days." **Unbanked** is defined as "no current checking account and no current savings account."
8. Center for Financial Services Innovation. *The CFSI Underbanked Consumer Study. Underbanked Consumer Overview and Market Segments: Fact Sheet*, 2008.
9. King, U., Parrish, L., and Tanik, O. (2006) *Financial Quicksand: Payday Lending Sinks Borrowers in Debt with \$4.2 Billion in Predatory Fees Every Year*. Center for Responsible Lending, 2006.
10. Mathematica Policy Research. Retrieved July 1, 2008 from <http://www.mathematica-mpr.com/publications/PDFs/WWDMassachusetts.pdf>.
11. The Finance Project and the American Public Human Services Association. *Finding Funding: A Guide to Federal Sources for Asset Building Initiatives*, 2009.
12. National Council on Disability. *The State of 21st Century Financial Incentives for Americans with Disabilities*, 2008.
13. Edwards, K. *The State Assets Policy Project: Studying the Effectiveness of State-Level Asset Building Policies and State Asset-Building Policy Coalitions*. Powerpoint presentation, Center for Workers with Disabilities/American Public Human Services Association meeting, May 14-15, 2007.

About the Authors

Candace Baldwin is a Senior Policy Advisor at NCB Capital Impact. Baldwin provides technical assistance in the areas of affordable real estate development and long-term service policy to support communities, states, and the federal government in the development of adequate long-term supports options, systems, and infrastructure to expand access to community-based innovations for the elderly and people with disabilities.

Megan O'Neil is an independent asset-building consultant who provides technical assistance and training to poverty reduction authorities about disability issues, and develops curricula to meet the needs of people with disabilities. During her tenure as the Project Manager at the World Institute on Disability, she produced the EQUITY e-newsletter and presented training programs to the disability and asset-building community. She received the prestigious 2006 American Association of People with Disabilities Paul Hearne Award, recognizing emerging leaders in the disability community. Previously, she was the National Institute on Disability and Rehabilitation Research Scholar at the National Center for the Dissemination of Disability Research.

Reprinted with permission from the John J. Heldrich Center for Workforce Development and the Kessler Foundation. [Disability and Work: Research Brief](#), May 2011.



Community Calculations

Number of charter schools in the U.S. in the 2000–2001 school year: 1,993

Number of charter schools in the U.S. in the 2008–2009 school year: 1,433,116
(http://nces.ed.gov/programs/digest/d10/tables/dt10_100.asp)

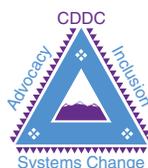
Median asking sales price for vacant for sale units in second quarter 2011: \$138,400

Median asking sales price for vacant for sale units in third quarter 2007: >\$200,000
(<http://www.census.gov/hhes/www/housing/hvs/qtr211/files/q211press.pdf>)

Federal agency that has overseen the Community Development Block Grant program since its inception in 1974: HUD (Housing and Urban Development)
(http://portal.hud.gov/hudportal/HUD?src=/program_offices/comm_planning/communitydevelopment/programs)

Year TASH was founded: 1975
(<http://tash.org>)

Year the Community Development Financial Institutions (CDFI) Fund was established: 1994
(http://www.cdfifund.gov/what_we_do/programs_id.asp?programid=7)



**Colorado Developmental
Disabilities Council**
1120 Lincoln Street, Suite 706
Denver, Colorado 80203

