



Community Conversations

Olmstead Implementation Office

Prepared by ACET, Inc.

December 2024

Table of Contents

Executive Summary	4
--------------------------------	---

1.0 Introduction	5
-------------------------------	---

1.1 Olmstead Plan Overview	5
----------------------------------	---

1.2 Diversity of Community Partners and Participants	5
--	---

1.3 Structure and Community Access to Conversations	7
---	---

1.4 Facilitation and Language Access	7
--	---

1.5 Questions and Materials Provided	7
--	---

1.6 Summary of Presentations	8
------------------------------------	---

1.7 Economic Development Regions Represented	9
--	---

1.8 Counties and Tribal Nations Represented	10
---	----

2.0 Conversation Themes	11
--------------------------------------	----

2.1 Question: What does integration for people with disabilities mean to you?	11
---	----

2.2 Question: What does having meaningful choice mean to you?	13
---	----

2.3 Topic: Accessibility	15
--------------------------------	----

2.4 Topic: Community Engagement and Representation	16
--	----

2.5 Topic: Education	17
----------------------------	----

2.6 Topic: Employment	18
-----------------------------	----

2.7 Topic: Health and Health Care	19
---	----

2.8 Topic: Housing	20
--------------------------	----

Table of Contents

2.9	Topic: Rights and Freedom from Abuse and Neglect	21
-----	--	----

2.10	Topic: Social Awareness and Community Life	22
------	--	----

2.11	Topic: State Services	23
------	-----------------------------	----

2.12	Topic: Transportation	26
------	-----------------------------	----

3.0 Participants Demographics..... 27

3.1	Disability	28
-----	------------------	----

3.2	Age	29
-----	-----------	----

3.3	Gender	30
-----	--------------	----

3.4	Race and/or Ethnicity	31
-----	-----------------------------	----

3.5	Military Status	32
-----	-----------------------	----

3.6	Location	33
-----	----------------	----

3.7	Settings	35
-----	----------------	----

4.0 Lessons Learned 36

5.0 Appendix A, B and C..... 39

5.1	Appendix A - Theme Summaries and Examples	39
-----	---	----

Question: What does integration for people with disabilities mean to you?	40
---	----

Question: What does having meaningful choice mean to you?	43
---	----

Accessibility	46
---------------------	----

Community Engagement and Representation	50
---	----

Education	52
-----------------	----

Employment.....	55
-----------------	----

Health and Health Care.....	58
-----------------------------	----

Housing.....	60
--------------	----

Rights and Freedom from Abuse and Neglect	64
---	----

Social Awareness and Community Life	66
---	----

State Services	69
----------------------	----

Transportation	77
----------------------	----

5.2	Appendix B - Community Partner Descriptions	78
-----	---	----

5.3	Appendix C - Demographic Questionnaire	82
-----	--	----

Executive Summary

This report presents findings from small community conversations, held to assist in the creation of the next Minnesota Olmstead Plan. The Olmstead Plan aims to ensure that Minnesotans with disabilities live full, integrated lives in their chosen communities. It addresses many areas including individual choice, person-centered planning, housing, education, employment, transportation, and more.

The community conversations provided an opportunity for people with disabilities, and in some cases their support persons, to share their experiences, stories, and ideas around integration, inclusion, and choice in Minnesota. The conversations reached a diverse group of people with disabilities and were primarily facilitated by community partners who helped to ensure that the conversations were accessible and inclusive. Approximately two-thirds of participants (61.5%) were Black, Indigenous, or people of color. Conversations took place in 10 counties statewide, with adult participants representing a wide range of ages from 18 to 65+ from various rural, urban, and suburban communities. Most participants had experience in a setting segregated by disability.

This report shares key themes that came from the conversations, including participants' desires to experience:

- More integration, inclusion, and meaningful choice in Minnesota,
- More accessibility throughout state systems and community life, including in Greater Minnesota,
- More direct involvement by people with disabilities in shaping the state systems that affect them,
- Improved integration and inclusion of students with disabilities in education,
- Reduced barriers to competitive, integrated employment,
- More access to quality education, employment, health care, services, and assistive technology, among other areas,
- More housing choices that are accessible and available to people with disabilities,
- Increased respect and enforcement of rights and freedom from abuse and neglect,
- More action to address how ableism, racism, xenophobia, homophobia, and other forms of exclusion intersect,
- Improvements in government services, programs, and procedures that affect people with disabilities, which are often complex, inefficient, and difficult to navigate,
- More access to culturally specific activities and supports, and
- More transportation infrastructure and options for people with disabilities.

The report also highlights the importance of community engagement and representation in the planning process to develop Minnesota's next Olmstead Plan. Throughout the conversations, participants asked that the input they provided lead to improvements in their lives, stressing the time to act is now. This report provides more detail on their urgent call for change, including the engagement of people with disabilities and their support persons to ensure that the Olmstead Plan is responsive to their desires, wants, and needs.

1. Introduction

This report shares findings from small community conversations. These conversations were held to assist in the creation of the next Minnesota Olmstead Plan. The goal of these conversations was to learn from people with disabilities and their support persons. The conversations were about people's experiences, stories, and ideas around integration, inclusion, and choice for Minnesotans with disabilities.

The Olmstead Plan aims to ensure that disabled Minnesotans live full, integrated lives in their chosen communities. The Olmstead Plan covers many topics including individual choice, person-centered planning, housing, education, employment, transportation, and more. The Plan helps state agencies set and meet goals to improve the quality of life for Minnesotans with disabilities.

The Olmstead Implementation Office (OIO) works to engage the community around the Olmstead Plan. OIO contracted with ACET Inc. to conduct these small community conversations and write this report of findings from the conversations.

ACET Inc. is a woman- and minority-owned small business, specializing in providing culturally tailored services and solutions designed to meet the unique needs of our clients, programs, community, and stakeholders. ACET is experienced in conducting high-quality evaluation, technical assistance, research coordination, and event facilitation.

1.1 Olmstead Plan Overview

The "Olmstead Plan" is named after an important 1999 Supreme Court case called *Olmstead v. L.C.* Olmstead is the last name of someone involved in the case. In this case, the United States Supreme Court said states couldn't keep people with disabilities from living, working or interacting with people who don't have disabilities without a valid reason under the Americans with Disabilities Act (ADA). These small community conversations allow the State of Minnesota to learn more about how state agencies are doing in fulfilling the mission of Olmstead.

ACET Inc. and community partners collaborated to host 90-minute small community conversations with an average of 15 participants per conversation. In total, there were 20 conversations and a total of 304 conversation participants.

1.2 Diversity of Community Partners and Participants

ACET worked with a community partner for each small community conversation. The community partner helped ACET plan and host the conversations. By working with community partners, ACET was better able to reach diverse community members and carry out effective conversations.

The project aimed to connect with communities representing a diverse range of identities and experiences, including diversity in:

- disability types,
- geographies,
- rural and urban experiences,
- community members of tribal nations,
- races and ethnicities,
- ages,
- genders,
- sexual orientations,
- languages,
- cultures,
- military service, and
- experiences in settings where people with disabilities are segregated from people who are not disabled.

ACET approached and selected community partners to recruit and connect with a diverse group of people with disabilities across Minnesota. In total, ACET reached out to 135 organizations, with 79 of the organizations located in the seven-county metro area and 56 organizations located in Greater Minnesota. Demographic information was collected at the community conversations to better understand who was present at each conversation.

In total, 304 people engaged with community partners to learn about the Olmstead Plan and participate in the small community conversations. Participants included people with visible and invisible disabilities, including physical disabilities, sensory disabilities, intellectual disabilities, developmental disabilities, and mental illness, as well as people who are blind, Deaf, or Deafblind, along with others. A wide range of racial, ethnic, and cultural identities were represented throughout small community conversations. More information on the identities of who participated in the conversations is found later in this report.

In total, ACET partnered with 23 community partners. 16 of the community partners are located in the seven-county metro area, and 7 are located in Greater Minnesota. The community partners included in this project were:

- Advocating Change Together
- Bethel University's BUILD Program
- Bois Forte Band of Chippewa
- CloseKnit
- Compassion Chapel
- Confederation of Somali Community
- Cultural Diversity Resources
- Fahan
- Faribault Deaf Club
- HACER
- Itasca Life Options
- Minnesota Brain Injury Alliance
- MSS
- OutFront Minnesota
- SEWA-AIFW
- The Arc Minnesota
- The Remember Project
- Touchstone Mental Health
- Union Gospel Mission Twin Cities
- Community members from a seven-county metro area based rare disease support group and a Special Olympics team.

Rural, urban, suburban, and other communities, as well as tribal nations, took part in the small community conversations. The conversations took place in Anoka, Blue Earth, Clay, Hennepin, Hubbard, Itasca, Ramsey, Rice, Saint Louis, and Stearns Counties.

1.3 Structure and Community Access to Conversations

Small community conversations took place between August 20 and October 20. Conversations were held at times the community partner deemed best for the community, which included weekends, weekdays, and evenings. All conversations were held in person, except for one virtual conversation.

ACET worked with community partners to provide accessible spaces, child care, meals or snacks, and transportation for participants as needed. All participants were compensated with a gift card. Community members could request reasonable accommodations during the registration process before the conversations. ACET worked with the community partners to provide any needed accommodations before and during the conversations.

At the beginning of each small community conversation, ACET provided an introduction outlining the Olmstead Plan and goals of the conversation. Participants were then divided into smaller groups of no more than 8 people to give ample time for sharing feedback.

ACET consulted with each community partner to determine if OIO's participation in small community conversations would support the goals of the conversation. As a result, staff from the Olmstead Implementation Office attended many of the conversations.

1.4 Facilitation and Language Access

The community partners each worked with ACET to determine the best method of facilitation for their small community conversation. Facilitators were often from the community partner. ACET and the University of Minnesota's Institute on Community Integration (ICI) also facilitated conversations. All facilitators were trained by ACET in facilitation strategies to support participant engagement and ensure their familiarity with the content focus for the small community conversations.

ACET also worked with community partners to provide language access. Conversations and breakout groups took place in English, Spanish, Hmong, Somali, Kurdish, and American Sign Language (ASL).

1.5 Questions and Materials Provided

At each conversation, participants were provided materials, including:

- Registration forms (for those who did not register online)
- Consent forms
- Olmstead Plan overview documents
- Fliers about the conversations

These documents were translated into additional languages as needed.

ACET developed procedures and protocols for each conversation, which were culturally tailored as needed, in partnership with the community partner. Those included protocols for facilitation, notetaking, administrative support, reporting abuse and neglect, and on-site staff.

Each breakout group discussed the following (or similar) questions, as time permitted:

- What does integration for people with disabilities mean to you?
- What does having meaningful choice mean to you?
- Tell us a story about a time you felt included or excluded, because of or related to disability. What helped you feel included? If you felt excluded, what would have made the situation better?
- What would you like to be different five years from now in the areas of choice and integration in Minnesota? What would need to change to get us there?
- When it comes to choice and integration, what do you think is going well in Minnesota or what would you like to continue?
- What are the greatest opportunities to advance integration and choice for people with disabilities in Minnesota?

The initial drafts of these questions were created by OIO, working with an advisory group of people with disabilities and an advisory group of state staff. Participants were also asked to answer optional demographic questions. The demographic questionnaire is included in the appendix of this document.

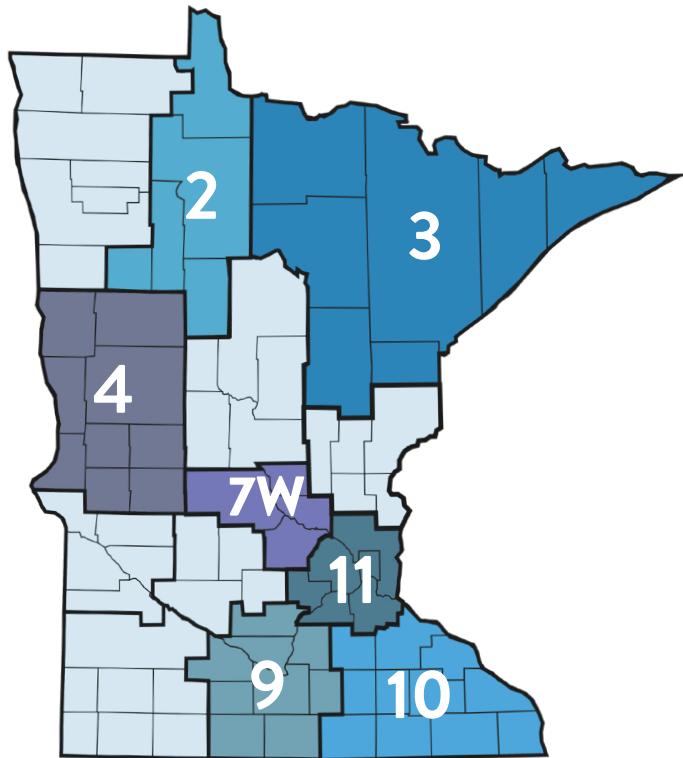
1.6 Summary of Presentations

Minnesota's Olmstead Plan is overseen by two bodies: the Olmstead Subcabinet and the Leadership Forum. Both are made up of 12 state agencies and the Metropolitan Council. Subcabinet members include commissioners and other leaders of these agencies, who work together to create and ensure the state follows the Minnesota Olmstead Plan. The Subcabinet agencies also conduct work through the Leadership Forum, which is made up of other state agency leaders. ACET presented at the Leadership Forum meeting on June 18, 2024 about the project, project goals, and implementation plans. ACET presented similar information at the Olmstead Subcabinet meeting on July 23, 2024. ACET presented drafts of this report to the Leadership Forum on November 20, 2024 and the Subcabinet on December 16, 2024.

1.7 Economic Development Regions Represented

Economic Development Regions (EDRs) in which Small Community Conversations were held

- Minnesota recognizes that a “one-size-fits-all” approach to economic development isn’t effective. To address the diverse needs and opportunities across the state, Minnesota is divided into 13 distinct economic development regions.



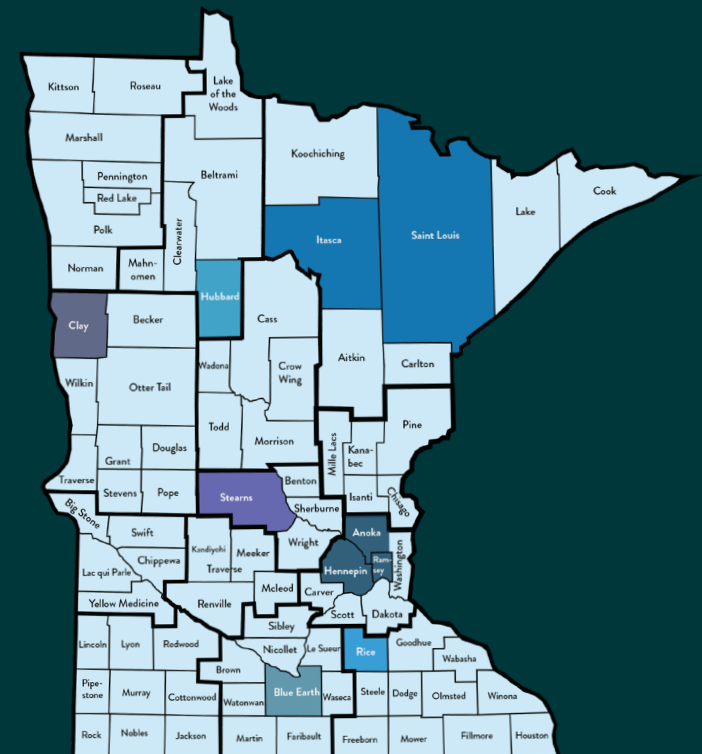
- This map highlights the EDRs where small community conversations were held. This includes 2, 3, 4, 7W, 9, 10, and 11.

1.8 Which Minnesota County or Tribal Nation or community do you live in?

The below graph represents the Minnesota counties in which small community conversations were held.

This includes Anoka, Blue Earth, Clay, Hennepin, Hubbard, Itasca, Ramsey, Rice, Saint Louis, and Stearns County.

The Bois Forte Band of Chippewa hosted conversations within Saint Louis and Koochiching Counties.



2.0 Conversation Questions And Themes

“Being able to tell your story is so important.”





2.1 Question: What does integration mean to you?

Inclusion is an important aspect of integration, and needs to be widely used and understood.

Accessibility is necessary for integration. This includes accommodations, infrastructure, and organizational practices.

People want to be treated with dignity. This includes all interactions in public, private, and family settings. Broad education about the needs, supports, and perspectives of people with disabilities can help make that a reality.

Integration involves people with disabilities spending time with people who don't have disabilities, whether it's in education, living environment, work, or other aspects of community life.

Integration means having the same rights, freedoms, and opportunities as those without disabilities, including the autonomy to choose how they engage with others and live within their chosen communities.

People want to be included, supported, not be treated or referred to as "less than," and be taken into account in planning and early decision making about the community.

Integration means there is not discrimination.

“Access before integration...you cannot integrate into anything without access.”

“Integration means the ability to participate with what's going on around you.”

“Much more like equity, where everyone has...access to the tools that are out there.”



“Acceptance is a big piece of it, because you can't integrate something without accepting what it is.”

“The people with disabilities should be the ones who decide how and what they want to integrate with...It doesn't necessarily mean they have to do things that everybody else does.”

Integration includes genuine understanding and acceptance, to include recognition and valuing the needs and experiences of people with disabilities.

Integration means people have the right to work and share ideas with you, and you should respect their ideas.

Integration means having the opportunity to fully belong and participate in all aspects of society, without physical, social, and/or systemic limitations or barriers.

Integration is the experience of being welcomed and supported to engage with a diverse range of people in public settings.

Integration must include having needed supports and reasonable accommodations.

Integration means getting the disability community involved in decisions.

“Integration is a two-way process involving disabled people and those without disabilities.”

“The action or process of combining two or more things in an effective way.”

“Living in harmony.”

“Inclusion in all areas of life.”

“...quality matters. I see a lot of inclusion initiatives that don't give folks access to the same quality of participation or activities or choice, the same quality of choice that they would be able to pursue if they were not using disability services.”

More insights and participant quotes on this question are available in Appendix A on page 40.



“People coming together and people falling apart is not integration. When they are coming together as a team, it's integration.”

“To be active in the community and take on a good life role.”



2.2 Question: What does having a meaningful choice mean to you?

People with disabilities want meaningful choices in areas including:

- Ability to make mistakes and learn
- Clothing
- Education
- Employment
- Family and other close relationships
- Finances
- Food
- Health Care
- Housing
- Public services
- Recreational activities
- Religious activities
- Spending time and/or living with others
- Transportation
- Where to go and spend time, and when to do so

Meaningful choice means having autonomy and self-determination, enabling people with disabilities to exercise control over their lives and make informed decisions with appropriate support.

Meaningful choice for people with disabilities extends beyond individual autonomy. It requires systemic and policy changes that create genuine opportunities for independence and full participation in society.

Poverty restricts choice in many areas, and having a disability increases the chances of being in poverty.

“Choice means being able to pick from various options when you make decisions about your life.”

“It means a lot to have a choice. It makes you confident.”

“Knowing all my options.”

“Having the choice to do what I want, when I want.”



“To be able to make a choice and have the person that you make the choice with respect your wishes.”

“Choice to me means freedom to choose. I’m beyond freedom so – I’m holding onto what little freedom I’ve got left, whether it’s the way I dress, or the way I carry my bag, little choices.”

Lack of information is a significant barrier to choice. Without overarching and complete information and support to access that information in easy-to-understand formats, the opportunity to make informed choices is significantly hindered. For example:

- People need language access to obtain information.
- People without Internet access may have more difficulty getting information.
- People with certain disabilities, such as brain injuries, may not be able to access or use computers to access information.

Limited choice is not choice.

- Giving people limited options, like one or two choices of where to live, is not true choice.
- Choice should be more than “simple yes-no choices.”
- But part of any choice is being able to say “no.”
- Giving the people a choice without the ability to experience that choice and see if they like it, or understand other options, is not real choice.

Guardianship may restrict choice and should only exist when necessary. The guardianship process should recognize that even if people might not be able to make all decisions, they can make some decisions.

Some participants expressed that while they want a supportive structure and help when making choices, they still want to be the one actively making choices. For example, caregivers might provide various options to choose from and say, “We can try it and if it doesn’t work, we’ll do something else.”

Some service or housing providers restrict choice.

“When you live in poverty, in a neighborhood that’s not your choice, in a home you wouldn’t choose, that’s nothing I’m choosing.”

“Letting people make their own choices, instead of being told you “must do this” or choosing for them.”

“Your choice should be a like and dislike, what you like is your choice, and what you dislike is not your choice.”

More insights and participant quotes on this question are available in Appendix A on page 43.



“Usually it isn’t a choice. You usually have either do this or that.”

“People with disabilities don’t get very much choice at all.”



2.3 Topic: Accessibility

Lack of accessibility is a major barrier for inclusion and choice.

Many buildings are not physically accessible.

Accessible restrooms are important for community integration.

Improvements are necessary for disability parking.

Accessibility can require ASL interpreters.

Creating accessible communities involves a wide range of other accessibility measures.

People with disabilities want more access to assistive technology.

Lack of access or accommodations could lead to dangerous or life threatening situations.

"At a wedding venue and it had 20 or some—20 or 30 or 40 steps, I can't remember. But it was upstairs, and I looked up and I couldn't go into the wedding."

"Being able to freely get to the polls and vote, not worrying about your sidewalk being all jacked up because you're trying to get out to vote and your sidewalk is all—being able to have access to the same services and privileges that other people have..."

"And I got to park five blocks away and I have a[n]...injury from slip and fall last winter, and now I have to walk across this—it's like a icy river, so I can't do that."

More insights and participant quotes on this topic are available in Appendix A on page 46.



"...everything has a door to get into, and if there isn't anyone leading you to that door...then you can't get in."



2.4 Topic: Community Engagement and Representation

Using co-creation models, where people with disabilities are explicitly involved in developing strategies and solutions, within state systems would improve integration, choice, and inclusion for people with disabilities.

Minnesota government entities' community engagement needs to be accessible, equitable, and ongoing.

People with disabilities should be involved in designing all systems that affect them. It is crucial to amplify the involvement of people with disabilities in decision-making processes.

Policymakers and state staff must engage directly with the experiences of people with disabilities.

Improved state systems and supports can foster inclusive systems for hiring disabled individuals that prioritize understanding and support through all stages of the hiring process.

Ensure people with disabilities can participate in civic and electoral processes, including Deaf, Deafblind, and hard of hearing people.

Disability justice is the goal, which would require significant changes to many state systems.

People with disabilities want to be included in an impactful way in the Olmstead planning process. The next Olmstead Plan should effectively shape state systems that affect disabled people.

“I wish we had the space and the resources just to build things for ourselves.”

More insights and participant quotes on this topic are available in Appendix A on page 50.



“I think people don’t realize at the higher levels what it’s like to live in some of these places, or to experience some of these things. You don’t know what challenges we face, what strengths we have. They might have a completely different picture [from] what is actually going on.”



2.5 Topic: Education

K-12 schools need to improve integration and inclusion of students with disabilities, in academic and extracurricular settings.

Parents need better information and support to engage with their children's education.

Students, teachers, and other school staff need more training about disability, in ways that promote integration rather than "otherizing."

Minnesota needs to increase funding and staffing for special education.

Schools and transition programs should better prepare students with disabilities for life after high school.

Minnesota colleges and universities should be accessible to and inclusive of people with disabilities.

Ensure child care, early childhood education, and summer camp programs are inclusive of children with disabilities.

"So there was a lot of things [Name] had wanted to be part of in school and it was either they didn't have—wouldn't let her participate or they would offer things that they had separate for only people with disabilities."

"They always kick us to the side because that's how I felt when I was in school."

"So when I was in transition, I only did it for a year because I didn't really learn too much about living on my own and stuff, and I feel like there could have been a little bit more of that—learning how to live on your own and having them teach you."

More insights and participant quotes on this topic are available in Appendix A on page 52.



"When you feel heard, it creates self-acceptance, and education is always good because you learn more and learn how to [move] forward."



2.6 Topic: Employment

Jobs should match the experience and interests of people with disabilities.

Stigma, discrimination, and ableism are barriers to competitive, integrated employment.

Having too high an income can be a barrier to receiving necessary services, and in turn is a significant barrier to finding and sustaining employment.

The State of Minnesota should offer more incentives to encourage businesses to hire people with disabilities.

People with disabilities want more information on where they can find jobs that might fit their skills and accommodate their needs.

Some participants did not support subminimum wage, where a person with a disability is paid less than minimum wage. Many participants shared general comments about the need for more job supports and services across Minnesota.

Participants who identified as veterans indicated that access to essential support services related to employment resources brings stability and hope amid economic changes.

"When you're disabled, your income is capped in order for you to receive some necessary services. I have [an] autoimmune disease, and the treatments are obscenely expensive... I have to have this medication. I cannot function without it, I can't do a job."

"If you're on the system, there's no choice in what kind of job you have that—again, that's a financial thing. If you make too much money, you get kicked off the program."

"...every[one should have the] right to apply for jobs, regardless of their disability, regardless of if they need reasonable accommodations to fulfill that job. Same thing with housing. Accommodations to go into public services should be accessible."

More insights and participant quotes on this topic are available in Appendix A on page 55.



"...when kids graduate from high school and they enter the workforce, the choice is usually, do you want to clean here or do you want to clean here? That's the job choice."



2.7 Topic: Health and Health Care

People with disabilities want access to quality health care.

Doctors and other health care providers need to believe the experiences and concerns of their patients with disabilities and treat them with respect.

Insurance coverage must be available, comprehensive, and affordable.

The risk of suicide must be better addressed.

Continuity and choice of care is important. People with disabilities described the negative impact of discontinuity of care on their financial, physical, and social-emotional well being.

Culturally competent and responsive care must be provided.

Access to mental health care is an area that needs more attention for people with disabilities. This care needs to take into account the diverse intersectionality that comes with identity, geographical location, and other socio-economic factors, including being a person with a disability.

"...when I have a new service provider come to my house or I go meet them or we're on the phone together and they stumble over words in my support plan, and I can tell that they're seeing the word neurodivergent for the first time, or that this is their first time meeting someone who uses multiple sets of pronouns, or they don't know what DID [Dissociative Identity Disorder] stands for. That's really a big violation to have to, on the spot, explain those things to someone who's being sent into my home to do mental health support, to do anything really."

More insights and participant quotes on this topic are available in Appendix A on page 58.



"So a big picture of integration would be the ability to get the medical care, one, that is continuity of care. So you have—you've developed over the years, the doctors that you like, that work with you, that understand when you're talking about understanding."

"It's hard to feel integrated when you don't have health care, health care that you can afford."



2.8 Topic: Housing

People with disabilities want more housing choices.

Finding housing that is both affordable and accessible is extremely difficult.

Housing with more capacity (i.e., larger accessible units) would encourage community living.

Some participants want more options for independent housing, in clean and safe neighborhoods, with supports that provide real choice.

Some people with disabilities end up in nursing homes, group homes, or other facilities when they do not want to live in those settings.

People in group homes or other facilities may have limited choice or ability to be integrated into the community.

Retaliation, evictions, and being denied admission to housing are all barriers to stable housing.

Participants want more state funding for housing programs, like rental assistance and housing vouchers, and easier access to programs.

"I would like to see the neighborhoods where they have different housing for different people. It doesn't matter who, for people with disabilities and people with whatever, and be able to live in any community they wanted to and not feel discriminated against."

"And a healthy place to live as well, because something that's funded isn't necessarily clean or habitable, so a healthy place to live and that kind of thing as well."

"They don't get to choose who they want to live with, where they want to live, what they want to do, or how they want to spend their day when they're in a facility."

More insights and participant quotes on this topic are available in Appendix A on page 60.



"I've been disabled for 13 years, I've never gotten any kind of housing assistance, and I've have had supportive housing for six years, I've never once had any housing support. I've moved 12, 13 times, I never had any assistance, never had it."



2.9 Topic: Rights and Freedom from Abuse and Neglect

People with disabilities must be free from abuse and neglect.

Train law enforcement in disability awareness, etiquette, and safe interactions.

Enforcement of rights is needed but can be difficult to obtain.

It is essential to create a more person-centered culture that promotes and honors self-advocacy and empowers people with disabilities to take control of their own lives. This will help achieve choice and integration in Minnesota.

Advocacy from support persons and allies can be important to upholding the rights of people with disabilities.

Resolving issues and conflicts within state and provider systems can be challenging for people with disabilities. Better and clearer steps to issue resolution, as well as support when doing so, are needed.

"If my landlord wouldn't have tried to double down on actively working against me for that simple thing of, like, there's—I'm offering you options to make this work and you are working against me..."

"We need people who intimately understand the disabled experience, the trauma of the disabled experience, and that we're going to have to provide care, authenticity, and intentional design in organizations and spaces. It would've made such a difference if we had a safe, warm line for suicide and we had safe people to call to deal with people in—like as an all-volunteer organization, there's often no training, there's no safe call—it was the police or nobody."

"...some safeguards in place for people that their rights are protected because they're not protected at this moment. Their right to be included is not protected."

More insights and participant quotes on this topic are available in Appendix A on page 64.



"I was left in my room, I was left on the toilet, I was – and I cried and said, don't leave me sitting here. I was in so much pain from everything that I had gone through that just sitting on the toilet or moving, breathing hurt . . . And they'd walk away . . . I had to yell at them to get some attention."

Another person reported when he called out for help in a care home, "They come at the time they want to come."



2.10 Topic: Social Awareness and Community Life

Ableism is a significant barrier to integration. An attitude of inclusion is important to promoting community integration.

Racism and xenophobia against people with disabilities who are Black, Indigenous, or people of color is a significant barrier to integration.

More education is needed for people of all ages, including children, about disability.

People with disabilities want respect for their choices related to expressing affection, being in romantic relationships, and having children.

Isolation is a significant concern for people with disabilities.

People with disabilities want to engage in community and recreational activities that they enjoy.

Participants who identified as veterans highlighted the importance of building personal connections and individuals having involvement in processes related service delivery are essential elements that contribute to a supportive framework for individuals with disabilities.

“[Non-disabled] people organizing things at whatever level should not make assumptions about what disabled people need—it should always be with us, never apart from us.”

“I feel people lead with judgment, and if you could educate people not to judge right out of the gate, and you understand that might be their choice.”

More insights and participant quotes on this topic are available in Appendix A on page 66.



“I really felt hurt and it really hurt my feelings because I wanted to involve myself in my school. They kept telling me I couldn’t participate, and that was not enough for me. I decided I wasn’t going to take it anymore.”



2.11 Topic: State Services

Minnesota was acknowledged by many participants to be a better place to live and receive services for people with disabilities than some other states or countries, but there is still significant room to grow.

Minnesota government services, programs, and procedures are often complex, inefficient, and difficult to navigate.

Lack of information in particular is a barrier for some communities.

Communities want more centralized information available. They also want more and different options for receiving information.

There is the need for more culturally responsive services.

Community mutual aid, where community members can assist and support each other, is an alternative to state services. Some participants say mutual aid works well.

“Every time I get more services, I have more of a bureaucratic burden on me to manage my disabled life. As a person with an extreme energy limiting chronic illness, I don’t have the energy to do this.”

“I’m only 25 and I’ve already given up on half of my life. I’m done asking for help, because every time I ask for help, there’s a hoop I’ve got to go through, and sometimes I can’t get that objective done in the time that they need because a disability or something that blocks me from being able to do it.”

“We don’t get the opportunities that people in private health care get. We just plain don’t. We don’t get scheduled the same. We don’t get looked at the same. We don’t get treated the same.”



“I shouldn’t have to move to a certain county to make sure my son gets the service.”

Meaningful choice, when selecting or participating services, is not always provided by state agencies or the counties.

State and county bureaucracy also causes long wait times for services.

County case managers need more support and training.

Service providers need more training and to promote choice and person-centeredness.

Assessments and reassessments, along with identification of what services are to be provided, must be person-centered.

Greater Minnesota and rural areas have less access to disability supports.

Participants who identified as veterans noted a need for strengthening support systems for veterans, emphasizing increased resources, clear policies and collaborative efforts to empower veterans with disabilities, and solutions to housing challenges.

“...it would be nice if 90 percent of the people who need the services know that these services are out there for them. That’s a huge start; that’s going to do something. You have to make sure.”

“Mandated poverty,” or the inability to have a higher income or assets and still receive needed disability services, is a barrier to true integration.

The “marriage penalty” for some services or programs decreases integration.

The direct care professional shortage significantly impacts people with disabilities, including preventing some people from living independently.

Direct support professionals deserve more recognition, better working conditions, and better pay.



“Better, clear application processes that they share between departments or organizations that you can look at, so you can see where is it, where am I in my application. And there’s a whole thing where it’s all easy to access and it’s easy to see.”

More money and more services should be directed by people with disabilities.

People may not be able to access available services of their choice due to their specific disability or limitations in the service.

Fewer people should be in the corrections system, and their involvement in those systems may be connected to a lack of appropriate services.

“You’re disabled, but they’re still not helping you with the paperwork. It’s like, but you know I have a disability, so why are you not helping me with the things that I need help with for this?”

“Give special attention to the disabled and send them people who know their language and culture.”

“I can’t imagine my life outside of the poverty that I’m forced to live in.”



“Maybe we add stipulations into those state and county funded waiver programs that have special budgets for job coaching versus having to lean on non-profit organizations and volunteers to do the work.”

More insights and participant quotes on this topic are available in Appendix A on page 69.



2.12 Topic: Transportation

Successful transportation infrastructure and options increase community integration and provides more choice.

Reliable transportation can be critical for access to employment and state services.

Wait times and timeliness are a significant problem with transportation.

Transportation must be accessible.

"...we have lots and lots and lots of seniors who really want to live in their own home for as long as possible. But they don't have transportation or they don't have homemaking."

"I'm looking with my social worker into other transportation because I just—with my anxiety and everything, I just—I can't be on the bus for two hours. I just can't."



"[Public transportation] doesn't come up to where I live, and it would be a little more helpful if something like that would be able to come up there because my parents have to drive me most of the time."

More insights and participant quotes on this topic are available in Appendix A on page 77.

3.0 Participant Demographics

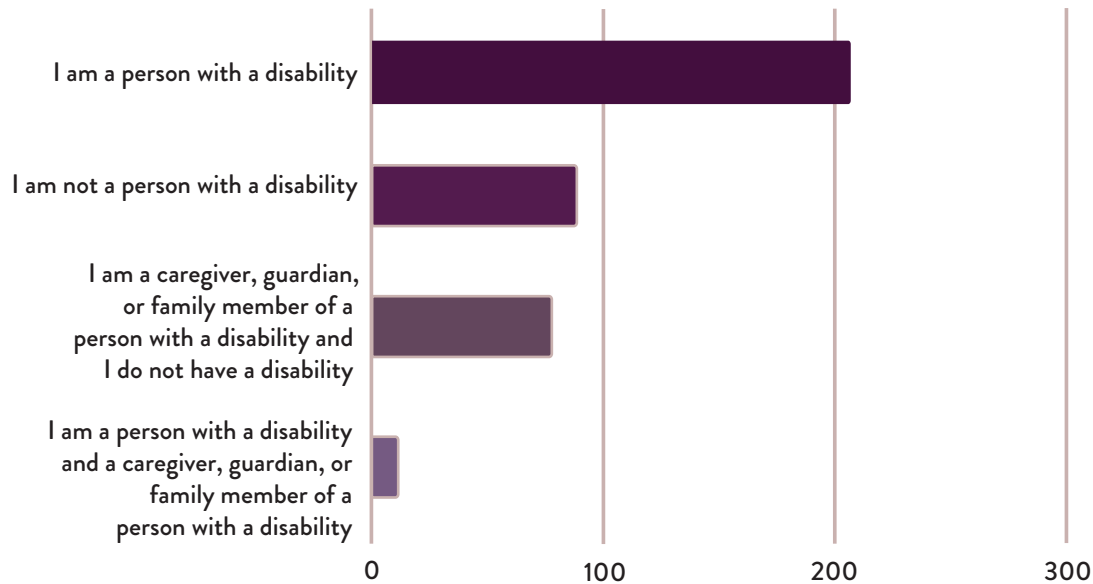
In total, 304 people engaged with community partners to learn about the Olmstead Plan and participate in the small community conversations. The distribution of participants' disability, age, gender, race and/or ethnicity, military status, location, and experience in segregated settings can be found within this section.



3.1 Disability

Relationship of Participants to Disability Community

n=304



Relationship of Participants to Disability Community

I am a person with a disability	212 (69.7%)
I am not a person with a disability	81 (26.6%)
I am a caregiver, guardian, or family member of a person with a disability and I do not have a disability	74 (24.3%)
I am a person with a disability and a caregiver, guardian, or family member of a person with a disability	11 (3.6%)

* 11 participants (3.6%) did not share their status.

The Olmstead Plan aims to ensure that disabled Minnesotans live full, integrated lives in their chosen communities.

To support this goal, the small community conversations recruited Minnesotans with disabilities. Participants were asked two eligibility questions during the registration process for small community conversations. The responses from those questions are represented here to describe participants' relationship to the disability community.

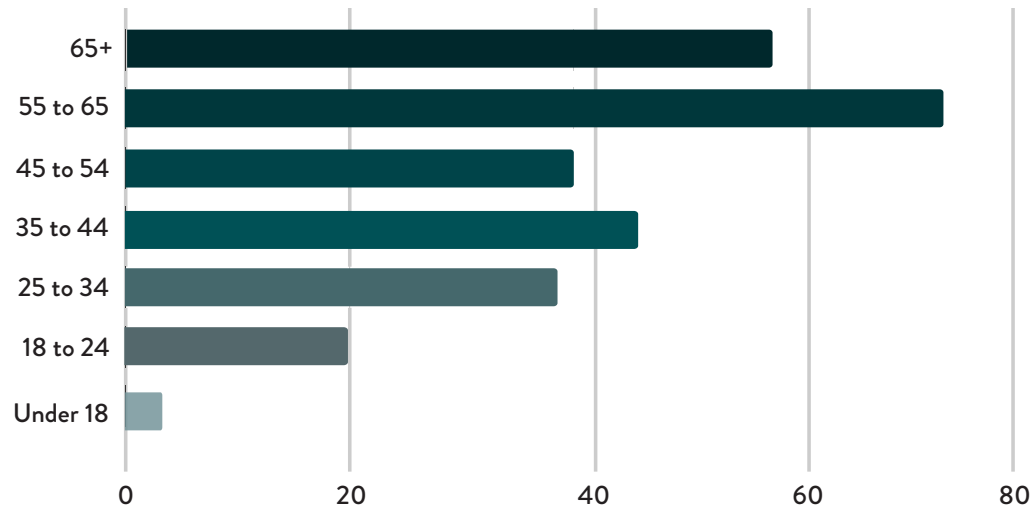
In all, 69.7% of participants were people with disabilities, 26.6% of participants did not have a disability, 24.3% were caregivers of someone with a disability, and 3.6% of participants did not indicate their disability status. 3.6% of participants were both a caregiver and a person with a disability themselves.

Speaking directly with a variety of Minnesotans with a disability was critical to inform the creation of the next Olmstead Plan.

3.2 Age

What is your age?

n=304



Recruitment efforts included engagement with community partners representing all portions of the life span. Participants in small community conversations represented a wide range of ages. Nearly half of the participants were between the ages of 18 to 54 (46.7%). The second largest group of participants (42.5%) were age 55 or older. While conversations primarily included adults, 1.3% of participants self-reported being under the age of 18. The recruitment of community partners included organizations serving and supporting Minnesotans across the life span.

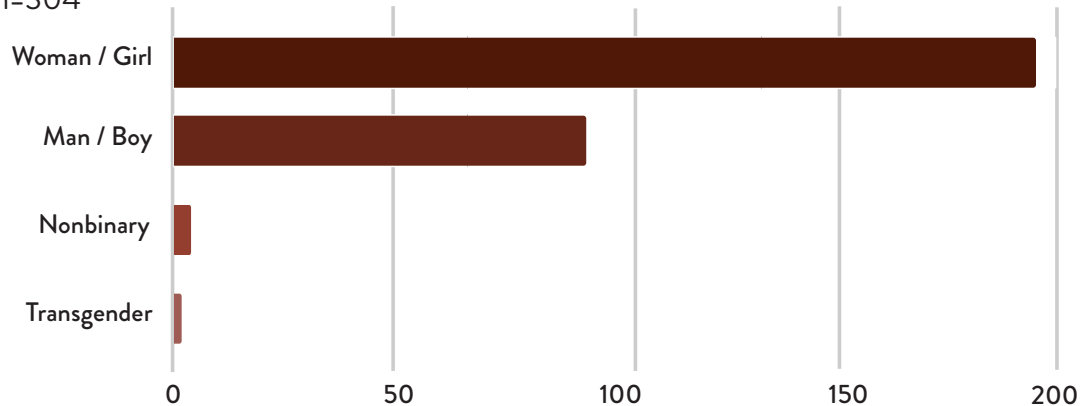
What is your age? (Select all that apply)	
65+	57 (18.8%)
55 to 65	72 (23.7%)
45 to 54	38 (12.5%)
35 to 44	47 (15.5%)
25 to 34	37 (12.1%)
18 to 24	20 (6.6%)
Under 18	4 (1.3%)

* 29 participants (9.5%) did not share their age.

3.3 Gender

What best describes your gender?

n=304



When registering for a small community conversation, participants were asked a variety of demographic questions. The purpose of these questions was to better understand who participated in each session. Most participants (60.2%) self-reported their gender identity as a Woman or Girl. Slightly more than a quarter of participants (27.3%) self-report their gender identity as a Man or Boy. Some participants (9.9%) chose not to self-report their gender, and others self-reported their gender as Nonbinary (2.0%) or Transgender (0.7%).

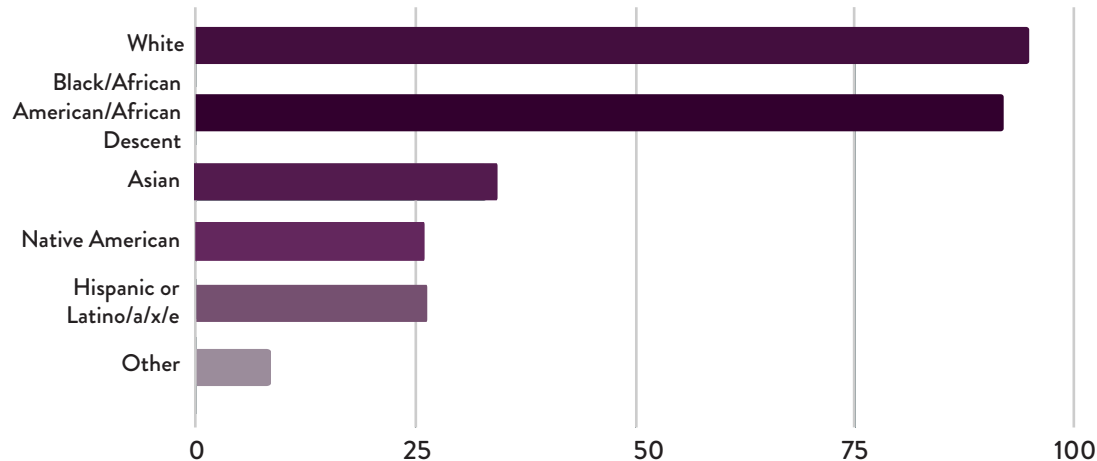
What best describes your gender? (Select all that apply)	
Woman/Girl	183 (60.2%)
Man/Boy	83 (27.3%)
Nonbinary	6 (2.0%)
Transgender	2 (0.7%)

* 30 participants (9.9%) did not share their gender.

3.4 Race and/or Ethnicity

What best describes your race and/or ethnicity?

n=304



Participants in small community conversations included a diverse range of disabled Minnesotans from different racial, cultural, and linguistic backgrounds. The diversity of participants in these conversations supports the aim of the Olmstead Plan to ensure that all Minnesotans with disabilities live full, integrated lives in their chosen communities. Among the racial diversity represented in the 20 small community conversations, some participants also identified with a variety of cultural identities including: East African, German American, Hmong, Japanese, Middle Eastern/Arab American, Romani, Somali, South Asian, and West African.

What best describes your race and/or ethnicity? (Select all that apply)

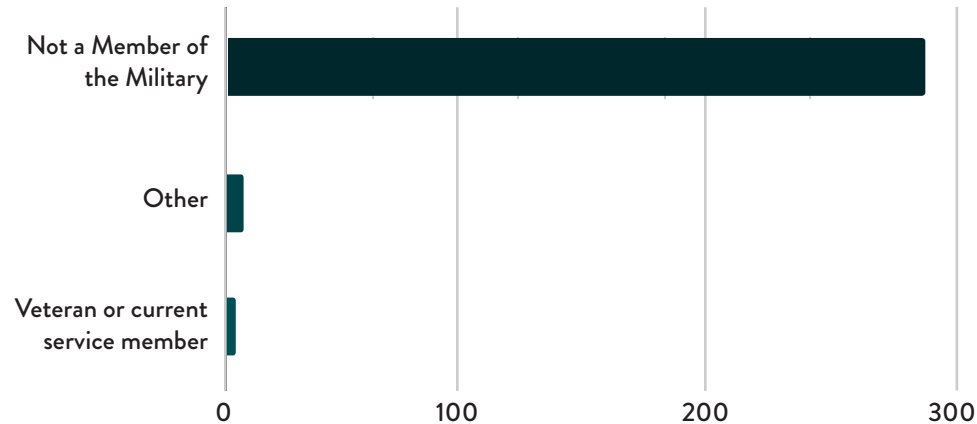
White	94 (30.9%)
Black/African American/African Descent	91 (29.9%)
Asian	35 (11.5%)
Native American	26 (8.6%)
Hispanic or Latino/a/x/e	26 (8.6%)
Other	9 (3.0%)

* 23 participants (7.6%) did not share their race and/or ethnicity.

3.5 Military Status

Which of the following best describes your status as a member of the military/armed forces?

n=304



Which of the following best describes your status as a member of the military/armed forces? (Select all that apply)

Not a member of the military	289 (95.1%)
Other	8 (2.6%)
Veteran or current service member	7 (2.4%)

Community partners were selected based on their connections and support of Minnesota's diverse disability community, which includes persons serving in the military and veterans. Partnerships specifically with veterans' organizations were sought, however, given the time frame of this project very few veterans with disabilities participated in the small community conversations. There were several lessons learned in seeking partnerships with organizations serving veterans with disabilities. Veterans are highly sought after in surveys and other input opportunities. And so, the request for their time should be made very clear, planned far in advance, and when possible coincide with already established community activities.

3.6 Location

Where do you live in Minnesota?

Seven-County Metro Area	195 (64.1%)
Greater Minnesota	109 (35.9%)

Through community partnerships, a total of 304 participants were recruited from across Minnesota. Participants in small community conversations represented 25 counties and one Tribal Nation, 35.9% of participants live in Greater Minnesota and 64.1% live within the seven-county metro area.

Which Minnesota county, Tribal Nation, or community do you live in?

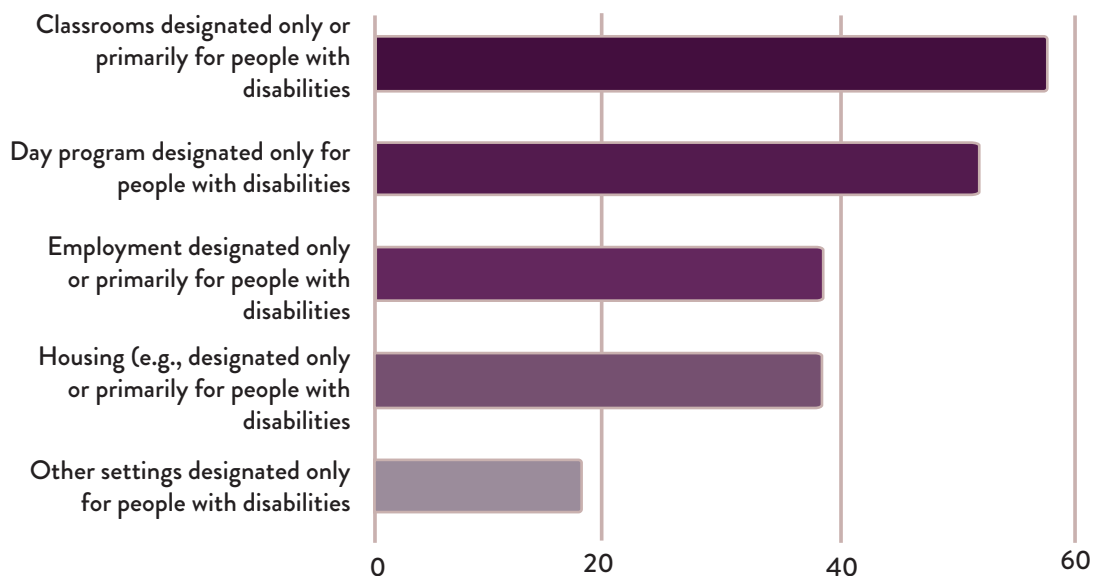
Aitkin County	1 (0.3%)
Anoka County	17 (5.6%)
Blue Earth County	8 (2.6%)
Bois Forte Band of Chippewa	9 (3.0%)
Brown County	2 (0.7%)
Carver County	2 (0.7%)
Cass County	1 (0.3%)
Chisago County	1 (0.3%)
Clay County	16 (5.3%)
Dakota County	10 (3.3%)
Faribault County	1 (0.3%)
Hennepin County	109 (35.9%)
Hubbard County	4 (1.3%)
Itasca County	19 (6.3%)
Nicollet County	1 (0.3%)
Ramsey County	51 (16.8%)
Rice County	8 (2.6%)
Scott County	1 (0.3%)

Which Minnesota county, Tribal Nation, or community do you live in?	
Sibley County	1 (0.3%)
St. Louis County	10 (3.3%)
Stearns County	14 (4.6%)
Steele County	1 (0.3%)
Wadena County	1 (0.3%)
Washington County	5 (1.6%)
Watsonwan County	8 (2.6%)
Wright County	3 (1.0%)

3.7 Settings

Have you had experience in any of the following settings designated only or primarily for people with disabilities? (Select all that apply)

n=304



Have you had experience in any of the following settings designated only or primarily for people with disabilities? (Select all that apply)

Classrooms designated only or primarily for people with disabilities	57 (19.3%)
Day program designated only for people with disabilities	52 (17.6%)
Employment designated only or primarily for people with disabilities	38 (12.8%)
Housing (e.g., group home) designated only or primarily for people with disabilities	38 (12.8%)
Other settings designated only for people with disabilities	18 (5.9%)

The Olmstead Plan is designed to impact multiple areas of life including individual choice, person-centered planning, housing, education, employment, transportation, and more. To better understand who participated in each conversation, participants were asked to self-report their participation in a variety of settings. Just more than two-thirds of participants (69.5%) have participated in one or more of the following settings:

- Classrooms designated only or primarily for people with disabilities,
- Day program designated only for people with disabilities,
- Employment designated only or primarily for people with disabilities,
- Housing (e.g. group home) designated only or primarily for people with disabilities, and
- Other settings designated only for people with disabilities (please specify).

4.0 Lessons Learned

Providing culturally tailored meals, transportation, accessible spaces, child care, and incentives promoted participation.



4.1 Lessons Learned

The following lessons reflect the learning of the community partners, small community conversation facilitators, ACET as the project lead and the Olmstead Implementation Office as project sponsor.

Awareness and Engagement

- There was a general lack of awareness about the Olmstead Plan, and this project helped to increase awareness.
- The project successfully engaged some communities who had been less involved in the Olmstead Plan in the past.

Values of Community Input

- Many participants expressed appreciation for the conversation and the ability to offer their perspectives.
- There is high hope that participant feedback will lead to real change.
- Community partners expressed interest in ongoing opportunities for themselves and participants to stay connected with the Olmstead planning process.
- Debriefing and continuous feedback from community partners supported ongoing improvements and future engagement.

Collaboration and Trust

- ACET's collaboration with community partners closely connected to the communities encouraged participation.
- Community facilitators and providing conversations in participants' preferred languages helped foster trust and engagement.

Logistics and Planning

- It is important to allow as much time as possible to collaborate with partners and give community members advance notice of events. More time allows for more effective collaboration and successful conversations.
- Sharing information with community partners, participants, and facilitators before the conversations was important because of limited knowledge of the Olmstead Plan.
- Using familiar community spaces and encouraging pre-registration helped secure reasonable accommodations and promoted meaningful participation.
- Community members preferred that incentives be offered onsite.
- Summer can be difficult for engagement for some communities.

Cultural and Accessibility Considerations

- Tailoring registration methods to community preferences is important. In some cultures, one-on-one invitations are the most effective way to encourage participation. Pre-registration can be challenging with some communities due to limited email access or those who don't typically pre-register in advance.
- Providing culturally tailored meals, transportation, accessible spaces, child care, and incentives promoted participation.
- Questions that may work for one community may not work well for other communities. ACET worked collaboratively with OIO and, when available, the community partner, to revise the questions.

5.0 Appendix A - Summaries and Examples to Support Themes

This section of the report includes both the themes by each topic and examples summarizing the experience of participants.



Topic: What does integration for people with disabilities mean to you?

Inclusion is an important aspect of integration, and needs to be widely used and understood.

Summary statements and examples supporting this theme:

- Some participants felt the term integration was insufficient to describe the needs of people with disabilities. They felt a greater emphasis should be placed on inclusion (e.g., social settings) and equal outcomes (e.g., sustainable employment and quality care) which better facilitate the positive experiences, services, and opportunities for people with disabilities.
- It is important to move conversation beyond mere physical inclusion toward genuine understanding and acceptance, to include recognizing and valuing of unique needs and experiences of people with disabilities.
- Integration for people with disabilities encompasses the belief that they should have the same rights, freedoms, and opportunities as those without disabilities, including the autonomy to choose how they engage and live within their communities.

Accessibility is necessary for integration. This includes accommodations, infrastructure, and organizational practices.

Summary statements and examples supporting this theme:

- Integration for people with disabilities prioritizes accessibility and ensures that everyone has equal opportunities for participation in health care, employment, and public spaces without the pressure to conform to norms.
- Mental health needs, and related accessible supports, should be included in plans for integration strategies.
- Integration for individuals with disabilities requires personalized support and accommodations, allowing for genuine participation in society.

People want to be treated with dignity. This includes all interactions in public, private, and family settings.

Summary statements and examples supporting this theme:

- Inclusive environments with accessible supports and infrastructure empowers people with disabilities to thrive within their communities.
- Integration is having support (i.e., through assistance from others) and accommodations (i.e., improved transportation) to socialize.
- Responsiveness to accommodations needs/requests leads to improved public environments for people with disabilities.

Integration means there is not discrimination.

Summary statements and examples supporting this theme:

- For people with disabilities, integration requires comprehensive education for those without disabilities and the acknowledgment of the intersections of disability, segregation, and racism to combat systemic marginalization and promote inclusivity for all.

People want to be included, supported, not be treated or referred to as “less than,” and be taken into account in planning and early decision making about the community.

Summary statements and examples supporting this theme:

Integration for people with disabilities hinges on equitable access to resources, fair treatment in employment and housing, and a commitment to overcoming societal biases, ensuring that all community members can thrive and participate fully in society.

Integration involves people with disabilities spending time with people who don’t have disabilities, whether it’s in education, living environment, work, or other aspects of community life.

Summary statements and examples supporting this theme:

- Schools may limit full integration, both physically (i.e., limited access to facilities) and socially (e.g., interaction with the whole student population).
- People with disabilities define integration as the opportunity to fully belong and participate in all aspects of society, without limitations or barriers.
- People with disabilities want to experience intentional proximity to people of different racial, ethnic, cultural, and experiential backgrounds.
- Integration is not having to worry about discrimination in educational settings.
- Integration involves support being available when it is needed, not solely from caretakers, but from the community and general public; without respect and adequate communication, it can feel impossible to feel integrated into society.

Integration includes genuine understanding and acceptance, to include recognition and valuing the needs and experiences of people with disabilities.

Summary statements and examples supporting this theme:

- Integration is about sharing spaces and improving awareness of the needs and preferences of people with disabilities.

Integration means people have the right to work and share ideas with you, and you should respect their ideas.

Summary statements and examples supporting this theme:

- Integration requires greater inclusion of people with disabilities in workplaces, not just in limited roles, and a greater understanding and accommodation of a wide range of disabilities, including those that are not immediately apparent.

Integration means having the opportunity to fully belong and participate in all aspects of society, without physical, social, and/or systemic limitations or barriers.

Integration is the experience of being welcomed and supported to engage with a diverse range of people in public settings.

Integration must include having needed supports and reasonable accommodations.

Integration means getting the disability community involved in decisions.

Representative quotes about integration:

- “Access before integration...you cannot integrate into anything without access.”
- “Integration means the ability to participate with what’s going on around you.”
- “Much more like equity, where everyone has...access to the tools that are out there.”
- “Acceptance is a big piece of it, because you can’t integrate something without accepting what it is.”
- “The people with disabilities should be the ones who decide how and what they want to integrate with...It doesn’t necessarily mean they have to do things that everybody else does.”
- “Integration is a two-way process involving disabled people and those without disabilities.”
- “The action or process of combining two or more things in an effective way.”
- “Living in harmony.”
- “Inclusion in all areas of life.”
- “...quality matters. I see a lot of inclusion initiatives that don’t give folks access to the same quality of participation or activities or choice, the same quality of choice that they would be able to pursue if they were not using disability services.”
- “People coming together and people falling apart is not integration. When they are coming together as a team, it’s integration.”
- “To be active in the community and take on a good life role.”

Topic: What does having a meaningful choice mean to you?

People want meaningful choices in areas including:

- Ability to make mistakes and learn
- Clothing
- Education
- Employment
- Family and other close relationships
- Finances
- Food
- Health Care
- Housing
- Public services
- Recreational activities
- Religious activities
- Spending time and/or living with others
- Transportation
- Where to go and spend time, and when to do so

Meaningful choice means having autonomy and self-determination, enabling people with disabilities to exercise control over their lives and make informed decisions with appropriate support.

Summary statements and examples supporting this theme:

- The right to make one's own decisions, with access to culturally tailored resources, employment opportunities, and community support is essential to exercising autonomy.
- At times providers are making choices for persons with disabilities (e.g., restricting or omitting information) instead of with them.
- For people with disabilities, meaningful choice is synonymous with autonomy and self-determination, enabling them to exercise control over their lives and make informed decisions with appropriate support.

Meaningful choice for people with disabilities extends beyond individual autonomy. It requires systemic and policy changes that create genuine opportunities for independence and full participation in society.

Summary statements and examples supporting this theme:

- People with disabilities are entitled to exercise their autonomy, making their own decisions and asserting control over their lives, rather than having others impose choices on them.
- It is essential for individuals with disabilities to have real choices in their lives, especially in their daily routines and in finding safe and accommodating housing; true autonomy means being empowered to choose while also having the right support when needed.
- Meaningful choice includes autonomy in decision making, with well-coordinated support, rather than the absence of choices made by service providers or agencies.

Poverty restricts choice in many areas, and having a disability increases the chances of being in poverty.

Summary statements and examples supporting this theme:

- A person's financial situation dictates their choices, and for those who are financially dependent (i.e., living in "mandated poverty") on state or county support, the dollars provided do not provide palatable choices.
- Choice requires financial stability for individuals with disabilities, to include affordable transportation options.

Lack of information is a significant barrier to choice. Without overarching and complete information and support to access that information in easy-to-understand formats, the opportunity to make informed choices is significantly hindered. For example:

- People with disabilities need language access to obtain information.
- People without Internet access may have more difficulty getting information.
- People with certain disabilities, such as brain injuries, may not be able to access or use computers to access information.
- Meaningful choice for people with disabilities requires open conversations and can include the involvement of caregivers who support informed decision making.

Limited choice is not choice.

Summary statements and examples supporting this theme:

- Giving people limited options, like one or two choices of where to live, is not true choice.
- Choice should be more than "simple yes-no choices."
- But part of any choice is being able to say "no."
- Giving the people a choice without the ability to experience that choice and see if they like it, or understand other options, is not real choice.
- Choice is often limited for the Deaf, Deafblind, and hard of hearing community due to barriers in communication with hearing people, and struggles with both small and big decisions due to limited resources and accessibility.

Guardianships may restrict choice and should only exist when necessary.

Summary statements and examples supporting this theme:

- The guardianship process should recognize that even if people might not be able to make all decisions, they can make some decisions.

Some participants expressed that while they want a supportive structure and help when making choices, they still want to be the one actively making choices. For example, caregivers might provide various options to choose from and say, "We can try it and if it doesn't work, we'll do something else."

Some service or housing providers restrict choice.

Summary statements and examples supporting this theme:

- Some housing and service providers do not honor choice, such as the choice to freely engage with the community or choice in food

Representative quotes about meaningful choice:

- “Choice means being able to pick from various options when you make decisions about your life.”
- When you live in poverty, in a neighborhood that’s not your choice, in a home you wouldn’t choose, “that’s nothing I’m choosing.”
- “Choice to me means freedom to choose. I’m beyond freedom so – I’m holding onto what little freedom I’ve got left, whether it’s the way I dress, or the way I carry my bag, little choices.”
- Choice is not “spoon feeding you options and saying this is a choice that you have.”
- People want more choice in housing, and not being told, “Okay, you’re going to live here, and your other choice is to be homeless.”
- Choice is “the opportunity to go where you want to go, live where you want to live, not be boxed into something you don’t care for.”
- “It means a lot to have a choice. It makes you confident.”
- “Knowing all my options.”
- “Usually it isn’t a choice. You usually have either do this or that.”
- “People with disabilities don’t get very much choice at all.”
- Letting people make their own choices, instead of being told you “must do this” or choosing for them.
- “Your choice should be a like and dislike, what you like is your choice, and what you dislike is not your choice.”
- “Feeling empowered and making the decision that I want to make, rather than being pressured by society or being pressured by culture.”
- “Having the choice to do what I want, when I want.”
- “The person should be the one to decide if they want to or not.”
- “To be able to make a choice and have the person that you make the choice with respect your wishes.”

Topic: Accessibility

Lack of accessibility is a major barrier for inclusion and choice.

Summary statements and examples supporting this theme:

- Improving accessibility across Minnesota is key to ensuring people with disabilities can navigate their communities and make choices in their daily lives. Many participants commented about different types of accessibility, including physical accessibility and communications access.

Representative quotes:

- “I feel like I’m constantly trying to accommodate the world around me, and the world does not want to accommodate me.”

Many buildings are not physically accessible.

Summary statements and examples supporting this theme:

- Participants said they want to be able to access buildings and other spaces for day-to-day tasks like shopping, as well as for recreation. This would include ensuring doors have automatic push buttons and other accessibility measures.
- Participants mentioned theaters, museums, hotels, pools, event spaces, and friends’ and families’ homes as spaces that need to be accessible.

Accessible restrooms are important for community integration.

Summary statements and examples supporting this theme:

- Many community members brought up the importance of accessible public restrooms, which includes:
 - Bathrooms big enough for wheelchairs and for people who need assistance in the restroom
 - Bathroom doors and stall doors that people with disabilities can open
 - Bathrooms in community gathering places, such as county fairs
 - Participants brought up the restrooms at the Minnesota State Fair as a model for county fairs and other festivals.

Accessibility can require American Sign Language (ASL) interpreters.

Summary statements and examples supporting this theme:

- The ASL interpreter shortage makes it very difficult to schedule interpreters, afford interpreters, and find certified interpreters, which is a significant community access and accessibility issue.
- ASL interpretation services are costly.
- There is unclear prioritization for interpreters accepting jobs, which can lead to lack of interpretation services for needed services, like meetings about a child's education.
- Police departments and emergency medical technicians need ASL interpreters, Deaf/Deafblind/hard of hearing liaisons, and cultural competency.

Creating accessible communities involves a wide range of other accessibility measures.

Summary statements and examples supporting this theme:

- Participants brought up the following suggestions to improve accessibility in other ways:
 - Accessibility in emergency preparedness and planning. For example, ensuring people with disabilities can leave their apartment in a fire, providing emergency generators for people who rely on oxygen, and ensuring tornado warnings are accessible to people who are Deaf, Deafblind, or hard of hearing.
 - Accessibility for people who are blind or low vision, to be able to navigate physical spaces.
 - Pictures in restaurant menus.
 - Plain language in all materials.
 - Sidewalks and streets that are in good condition allow for easier mobility.
 - Creating sensory-friendly spaces, like sensory tents at events.
 - Not needing to wait in line for people whose disabilities make it difficult to do so.
 - Making accessible household items more widely available, like knives and nail clippers.
 - Holding more in-person engagement opportunities.
 - Holding more remote/virtual engagement opportunities.
 - Implementing safety measures for people with compromised immune systems, like N95 mask mandates, air purifiers, and better ventilation.
 - Accessibility for those with specific communication needs.

Improvements are necessary for disability parking.

Summary statements and examples supporting this theme:

- There are not enough disability parking spaces.
- There is a lack of enforcement for people parking illegally in disability parking spaces.

People with disabilities want more access to assistive technology.

Summary statements and examples supporting this theme:

- Assistive technology and resources can be important for community access and integration.
- Better care is needed for people who have limited ability to speak through words, including access to assistive technology for communication.
- Lack of access to hearing aids or other methods of communication after hearing loss can significantly impact community integration.

Lack of access or accommodations can lead to dangerous or life threatening situations.

Summary statements and examples supporting this theme:

- Participants shared instances where they were seeking help from emergency services and were unable to get the support they needed.
- When accommodation requests were denied (e.g., closer parking, addition of safety features in bathrooms in housing units), the impact on people with disabilities forced them to reconsider their housing, employment, and places of recreation often to avoid risk of injury.

Increased representation of people with disabilities in direct service roles that provide services or support accessible practices is important to people with disabilities.

Better promotion of existing disability hotlines, hubs, or phone services that support accessibility practices is needed.

- While larger areas with more dense populations may have better information and resources, people with disabilities live across every county of Minnesota. Information and resources are less available and/or less well known in Greater Minnesota.
- People with disabilities may need accessibility support, and/or greater promotion and knowledge of existing support options.

Improved training and accessibility practices are needed among service providers who provide direct service or interact with people with disabilities (e.g., in transportation, public services, housing).

Summary statements and examples supporting this theme:

- Some accessibility practices, transportation options, housing options, and the gradual increase in representation and advocacy for people with disabilities are going well.
- Consistent use of accommodations, by trained and knowledgeable public servants and program staff, support people with disabilities to feel included.
- Training is needed for government staff, general support staff, and political leadership to gain a greater understanding of the experience of people with disabilities.
- Ongoing education and training for service providers and policymakers is essential to challenge preconceived notions and improve understanding of the diverse needs of people with disabilities.
- Increasing awareness and accessibility to resources in small towns and enhancing education and training for providers is vital to allow people with disabilities to fully integrate into their communities.
- Better collaboration across entities, agencies, and service providers is needed to share information regarding eligibility for programs, services, training for service providers and other supports.

Topic: Community Engagement and Representation

Using co-creation models, where people with disabilities are explicitly involved in developing strategies and solutions, within state systems would improve integration, choice, and inclusion for people with disabilities.

Summary statements and examples supporting this theme:

- Minnesota government's community engagement needs to be accessible, equitable, and ongoing.
- People with disabilities should be involved in designing all systems that affect them.
- It is crucial to amplify the involvement of people with disabilities in decision-making processes. Policymakers and state staff must engage directly with their experiences.
- The state can foster inclusive systems that prioritize understanding and support through hiring disabled individuals.
- Ensure people with disabilities can participate in civic and electoral processes, including Deaf, Deafblind, and hard of hearing people.
- Disability justice is the goal, which would require significant changes to many state systems.

Representative quotes:

- "I wish we had the space and the resources just to build things for ourselves."
- "I think that the people that make these decisions for us are not us . . . Because they don't experience our lives, they don't understand all of the hidden costs in being disabled."
- "I think people don't realize at the higher levels what it's like to live in some of these places, or to experience some of these things. You don't know what challenges we face, what strengths we have. They might have a completely different picture [from] what is actually going on."

People with disabilities want to be included in an impactful way in the Olmstead planning process. The next Olmstead Plan should effectively shape state systems that affect disabled people.

Summary statements and examples supporting this theme:

- Many people expressed lack of awareness of the Olmstead Plan. They have a desire to be involved in each stage of the planning process.
- Many participants expressed appreciation for the community conversations and hoped for similar conversations in the future, with people they trust.
 - Some people wondered why they have never been asked these kinds of questions or had these types of conversations before. As one person said, “Nobody ever asked me what I really thought.”
 - Participants hope their contributions will bring change. Participants want to be able to “come back here and [say] this is all happening now because of our conversations.”
- People with diverse, intersecting identities should be included in engagement efforts in a meaningful way.
 - One participant commented that they often felt like as a Black or brown person, they have been asked to sit in on a conversation about disabilities where everyone else in the conversation was white. They asked, “How do we build that and sustain the community of Black and brown folks in this space?”
- People with disabilities should be affirmatively reached out to by the state government to ask how things are going in state systems, in ways that are accessible to them.

Topic: Education

K-12 schools need to improve integration and inclusion of students with disabilities, in academic and extracurricular settings.

Summary statements and examples supporting this theme:

- Some participants described having positive experiences in their school setting. However, there is still the need for change in educational systems.
- Bullying and excluding students with disabilities are major problems. There has been progress in this area, but there is still room to grow.
- Some classrooms and schools are not physically accessible.
- Schools need to increase classroom integration. Integrated classrooms improve educational and social opportunities for people with disabilities. They also reduce stigma and ableism in the broader community.
- Outside appointments during the school day can interfere with education and inclusion. Many appointments are not available during evenings or weekends.
- Children need to be able to participate in programs outside of the regular school day or outside of the school building, including after school programs or field trips. One parent described being told her child could not participate in after school programs because of the need for one-on-one cares, and that she was also not allowed to attend to support her child.
- Some public schools will not provide ASL when requested. There are more limited choices for effective education and schools for Deaf, Deafblind, and hard of hearing people.

Parents need better information and support to engage with their children's education.

Summary statements and examples supporting this theme:

- Families can struggle to get support for children with disabilities in schools.
- School communications often aren't accessible to families who speak languages other than English. Schools need interpreters, and to translate materials into multiple languages, including emails to parents and other information about events. Some people also need information that is provided in methods other than writing.
- Parents need better communication about issues with their children at school.
- Parents need easier access to outside resources, like PACER, as well as checklists and other information. Some people do not know what services are available from the school or elsewhere, like waiver services.
- Some families do not have the resources or information to get a disability diagnosis for their child.
- Lack of transportation can make it difficult for families to get involved with school events, like open houses and conferences.

Students, teachers, and other school staff need more training about disability, in ways that promote integration rather than “otherizing.”

Summary statements and examples supporting this theme:

- Teachers, paraprofessionals, and other school staff need training to improve awareness and understanding of disabilities, including working effectively with Deaf people, Autistic people, and people with mental illnesses.
- Teachers and staff should not label children as “bad” because of their disabilities.
- Teachers need to know how to support children who are facing challenges in school; for example, it may be supportive to have a student visit a school counselor.
- Students should be educated about disability from a young age.
- Parents also want to feel supported and know that their child is not treated differently for other aspects of their identity, including race.

Minnesota needs to increase funding and staffing for special education.

Summary statements and examples supporting this theme:

- The state should provide more funding for staff who support students with disabilities. The state should increase pay and reduce staffing shortages.
- Decision making related to special education supports, as well as strategies that support inclusion and integration in schools, is an area that parents and children want more opportunities for input.

Schools and transition programs should better prepare students with disabilities for life after high school.

Summary statements and examples supporting this theme:

- Schools should provide more information about the transition from high school to adulthood, including information about transition services, guardianships, and alternatives to guardianships.
- Students want to be treated with respect in transition programs, learn how to live on their own, and not have unnecessary rules.
- When you lack “communication, relationship, finances, food, housing – any type of security, you can’t think past a day or two... let alone plan what is going to happen when my child turns 18,” one parent said.
- Schools should properly educate disabled students to achieve their best lives possible.

Minnesota colleges and universities should be accessible to and inclusive of people with disabilities.

Summary statements and examples supporting this theme:

- There are limited post-secondary options for some people with disabilities.
- Colleges and universities need to be accessible and inclusive of all people with disabilities, including Deaf and Deafblind people.

Ensure child care, early childhood education, and summer camp programs are inclusive of children with disabilities.

Summary statements and examples supporting this theme:

- Accessible child care and early childhood education with accommodations is valuable to caregivers and children with disabilities.
- Minnesota needs more inclusive child care options for children who are Deaf, Deafblind, and hard of hearing.
- Minnesota needs more inclusive child care options for children with disabilities who speak languages other than English.
- Minnesota needs more child care for children with disabilities who speak languages other than English.
- Some daycares will not accept children with disabilities.
- Summer camps need more inclusion of people with disabilities.
- Families may need more support in the summer, when their children are not in school, college, or university.
- One solution might be children with disabilities sharing staff at day cares or other child care settings.

Topic: Employment

Jobs should match the experience and interests of people with disabilities.

Summary statements and examples supporting this theme:

- People with disabilities want jobs that are a match to their education, experience, interests, and needs.
- People described being hired for jobs that were not compensated as well or did not match their expertise due to discrimination.
- More people with disabilities want access to state employment, including through the Connect 700 program.
- The State of Minnesota should employ staff interpreters and employ more people who are Deaf, Deafblind, and hard of hearing.
- Some older adults with disabilities still want to have the opportunity to work.
- More job opportunities with remote work and flexible schedules would help people with disabilities maintain jobs in the community.

Stigma, discrimination, and ableism are barriers to competitive, integrated employment.

Summary statements and examples supporting this theme:

- Employers need to have less stigma about disability.
- Employers should be more educated about disabilities and why people may engage in certain behaviors or need certain accommodations.
- Employers must acknowledge that gaps in work records or other issues in work history may be because of disability and not because someone cannot do the job well.
- Employers need to be more understanding of hidden disabilities and not mistreat people or make ableist comments.
- Participants described employers asking inappropriate questions and screening based on disability.
- People with disabilities should be given a chance to succeed in employment of their choice. Probationary periods may help to make this possible to prove they can do the job.
- Participants feel it is difficult to bring lawsuits or enforce their rights in employment. This includes fear of retaliation.
- Deaf, Deafblind, and hard of hearing people often do not have access to competitive jobs and pay.
- A key to maintaining competitive, integrated employment is employers understanding and providing accommodations.

Representative quotes:

- “There needs to be a shift in the attitudes toward us. Not in just our capabilities, but also acknowledging our contributions.”
- “I’m not a number. I’m a person, I have my own ideas, my own dreams, my own life and stuff, and I detest being a number on the computer... Do not forget that we are people, we are not just a number.”
- Help us “be empowered to do what we want to do.”

Having too high an income can be a barrier to receiving necessary services, and in turn is a significant barrier to finding and sustaining employment.

Summary statements and examples supporting this theme:

- Some people described taking jobs that paid less than they could have made because of fear of losing services and benefits.
- Participants described the many ways in which income restrictions limit their access to needed services and supports.

Representative quotes:

- “I have to take a job that pays me less than what I’m capable of because I have to make under a certain amount of money or I lose all my benefits.”

The State of Minnesota should offer more incentives to encourage businesses to hire people with disabilities.

Summary statements and examples supporting this theme:

- Employers often believe it will be expensive to hire people with disabilities. This is a barrier to finding competitive, integrated employment.
- The State of Minnesota should provide more funds to reimburse employers for the costs of providing reasonable accommodations. The State should also make sure that businesses are aware of current reimbursement programs.
- Better accommodations and accessibility for the Deaf, Deafblind, and hard of hearing are needed to create advancements in integration and choice, such as accessibility in media, improved education on the wide range of disabilities, and more financial resources available for employers to support Deaf employees around the state.

Representative quotes:

- “Finding a job for a disabled person is very hard.”
- Employers may be reluctant to hire people with disabilities because “they’re more worried about their bottom line, more worried about whether I need to provide you any services.”

People with disabilities want more information on where they can find jobs that might fit their skills and accommodate their needs.

Summary statements and examples supporting this theme:

- Participants expressed the desire for:
- In-person as well as online resources that are helpful for people with disabilities, like job fairs for people with different types of disabilities.
- More advertising and awareness of available job opportunities, when someone may no longer be able to do the type of job they previously did.
- More awareness of educational opportunities that a working parent may be able to undertake and afford, to follow new career paths if needed due to a disability.

Some participants did not support subminimum wage, where a person with a disability is paid less than minimum wage. Many participants shared general comments about the need for more job supports and services across Minnesota.

Summary statements and examples supporting this theme:

- Some specified that people with disabilities need more resources in:
 - Job coaching, including better pay and support for job coaches
 - Advocates, to help them obtain and keep employment
 - Communication with their family and support persons about what is going well in their employment and any areas for improvement.
 - Flexible schedules that accommodate transportation and other needs

Participants who identified as veterans indicated that access to essential support services related to employment resources brings stability and hope amid economic changes.

Topic: Health and Health Care

People with disabilities want access to quality health care.

Summary statements and examples supporting this theme:

- There is a need for better access to health care for people with a variety of disabilities, including people with brain injuries.
- Health care and mental health care are especially difficult to find in rural areas.
- There is limited ability to get some necessary health assessments, like neuro-psych appointments, that are prerequisites to getting needed services.
- There can be long waitlists to get needed services, for example autism therapy.
- People with disabilities need care options that will adequately address both physical disabilities and mental illness.
- People with disabilities need access to quality dental care, including not unnecessarily having teeth removed.
- Transportation to medical appointments is critical for people with disabilities.
- Health care spaces must be accessible, including ambulances for people who must use car seats or remain upright.
- Deaf people have trouble accessing quality and safe medical care, including in the emergency room.
- Participants expressed that video interpreter utilization is extremely dangerous. All health care providers must employ readily available facilitators and should employ Deaf people.

The risk of suicide must be better addressed.

Summary statements and examples supporting this theme:

- Participants described mental illness and risk of suicide being ignored because they are not visible.
- Ableism, isolation, and stigma increase the risk of suicide.

Doctors and other health care providers need to believe the experiences and concerns of their patients with disabilities and treat them with respect.

Summary statements and examples supporting this theme:

- Health care and mental health care providers should be better trained in working with disabled patients.
- Participants described doctors who did not believe them and would not, for example, give them pain medication that was needed. One participant described going to the doctor in pain and being told “you don’t have anything,” and then the doctor came to apologize after they did more tests and discovered the concern.
- It is important to reduce ableism among health care providers.
- Good hospital care is needed for women and babies after giving birth, including for babies with Down’s Syndrome. Some care providers behave in an ableist manner toward the parents of children with Down’s Syndrome.

Insurance coverage must be available, comprehensive, and affordable.

Summary statements and examples supporting this theme:

- Participants shared examples of not having certain items covered by insurance that they needed due to their disability, such as a walker.
- Participants described the barrier of expensive medications. For example, one participant described a copay for a medication that was \$20. They could not afford it, putting them at risk of needing to move into a long-term care facility to receive medications.
- Medications can be extremely expensive for people with disabilities. Access to insurance is essential.
- It can be overwhelming for people to navigate what is covered by insurance and what is not.
- There is a need for better services for addiction and substance use disorder.
- More providers should accept state insurance. Doctors and medical care options are more limited for people with Medicaid than people with private health care.

Continuity and choice of care is important. People with disabilities described the negative impact of discontinuity of care on their financial, physical, and social-emotional well being.

Summary statements and examples supporting this theme:

- It can be very difficult for someone to change providers. Sometimes people with disabilities are forced to change providers.
- Information can be lost when there is a transition in the provider.
- Doctors are often rushed because of how many people they need to have appointments with during a single a day, making it difficult for doctors to understand the needs of their patients with disabilities.
- There is the desire for easier ways for providers to share information.

Culturally competent and responsive care must be provided.

Summary statements and examples supporting this theme:

- There is a need for competent and appropriate health care for members of the LGBTQIA+ community with various disabilities, including dentists, physicians, specialists, surgeons, and therapists.
- There is a need for culturally competent care, including language access.
- To effectively serve diverse communities, more diverse community members need to become doctors, nurses, nurse practitioners, social workers, and other health care professionals.
- Access to mental health care is an area that needs more attention for people with disabilities. This care needs to take into account the diverse intersectionality that comes with identity, geographical location, and other socio-economic factors, including being a person with a disability.

Topic: Housing

People with disabilities want more housing choices.

Summary statements and examples supporting this theme:

- Many people expressed wanting to live in their own home instead of a group home or other facility, but they feel they do not have a choice. Some people expressed liking where they lived, including their group home.
- People described getting stuck with “wherever was open,” not where they wanted to live.
- Restrictions in housing programs can limit options and reduce choice for people with disabilities. These restrictions can include funding or program eligibility requirements.
- People with disabilities feel their housing options are often limited to poor quality housing in locations far from their chosen communities.
- Group homes and affordable housing are often segregated in certain areas.
 - People want housing in the community of their choice and near loved ones.
 - People want to live in areas where they feel safe.
 - People want housing that has good community infrastructure, like sidewalks that are in good condition and access to stores.
- People described wanting the option of homeownership and wishing the government would help them to pay a mortgage rather than providing Section 8 or other rent subsidies.
- Property taxes, including taxes on accessible homes, can be a barrier to community living.
- People do not want to be homeless or at risk of homelessness due to their disability.

Finding housing that is both affordable and accessible is extremely difficult.

Summary statements and examples supporting this theme:

- Some participants thought affordable housing was the “top” issue “in capital letters” because of the impact that lack of affordable housing has on people with disabilities.
- Many people with disabilities live in poverty and have limited funds to pay for rent. The cost of rent is too high.
- Housing often lacks accessibility features like elevators, ramps, push buttons, lift tubs, accessible bathrooms, and counters or cabinets at accessible heights.
- Many affordable housing buildings do not have enough units or are not accessible.
- Often older apartment buildings are the least expensive, but they do not have accessible features. People may end up in group homes simply because they can’t find affordable housing elsewhere.
- Affordable housing may be dangerous, uncomfortable, or uninhabitable.
- Some housing that claims to be affordable may not actually be affordable.
- Even housing specifically for people with disabilities or older adults may be inaccessible.
- There should be more access and timely access to home modifications, which can help to keep people in their home.

- Minnesota needs more affordable, accessible housing for older adults.
- People who are Deaf, Deafblind, and hard of hearing may have limited housing choice. Many choose to live in the Twin Cities area due to lack of accommodations and interpreters in other areas.
- Lack of affordable housing puts some people with disabilities at risk of homelessness. Homelessness can also lead to disability.
- It is crucial to prioritize the development of affordable, accessible housing that supports independence and quality of life for the disabled community, regardless of income.

Housing with more capacity (i.e., larger accessible units) would encourage community living.

Summary statements and examples supporting this theme:

- Some families want to care for their loved one with a disability in their home, but they cannot because their house or apartment is not big enough. In some cases, the person with a disability ends up living in a facility as a result.
- This theme was especially important in some cultural communities where extended families often live together.

Some participants want more options for independent housing, in clean and safe neighborhoods, with supports that provide real choice.

Summary statements and examples supporting this theme:

- Not all “independent” or “supportive” housing provides true independence and choice. One participant said, “They tell us when to eat, when we get our meds, when to get on the van for an activity. To me, that’s not independent.”
- Ideally, independent housing with supports would provide help with meals, laundry, yard work, and other day-to-day needs.
- Some participants want to move away from two extremes of living in a building exclusively for disabled people or in a building with just one or two units for people with disabilities. They said they would like to be integrated with people without disabilities but still be near others with disabilities.

Some people with disabilities end up in nursing homes, group homes, or other facilities when they do not want to live in those settings.

Summary statements and examples supporting this theme:

- People with brain injuries may end up in nursing homes instead of a more appropriate placement of their choice.
- Older adults may live in care homes when they want to stay home or live with family.
- Participants said family members should be paid to care for family members with disabilities. Many people feel better to be taken care of when being cared for by someone like a family member.
- Geography or affordability limit choice in facility.
- Participants want more state support to help people with disabilities buy a home and/or continue living in their own home.

People in group homes or other facilities may have limited choice or ability to be integrated into the community.

Summary statements and examples supporting this theme:

- Group home residents sometimes feel that their choices are not respected. Examples of choices include where they go or when they spend time with their families.
- In facilities like nursing homes, residents have limited food choices and may have to eat the same food or food they do not like.
- People need caregivers in facilities who can understand their language and culture.
- Facilities may not have the staff or programming to integrate people into the community. There should be enforced requirements that people in facilities have true community access.

Representative quotes:

- “I’ve been in placements where they force you to do stuff that you don’t want to do. And when you complain, they say, that’s what we do here. And so, I didn’t have freedom.”

Retaliation, evictions, and being denied admission to housing are all barriers to stable housing.

Summary statements and examples supporting this theme:

- Participants expressed fears that their housing providers would retaliate if they shared concerns.
 - “If you advocate for yourself or for someone else, then you’re a troublemaker.”
 - Housing or service records with false information or documentation can affect future housing choices. Participants said they are afraid that advocating for themselves will lead to false information being placed in a file as retaliation.
- Participants described being told that they could not live in the housing setting of their choice due to their disability. The choice of where a person can live may be made by the housing provider, not the person with a disability.
- Credit history can be a barrier to obtaining housing.
- A participant described being told to leave his housing because “you can’t handle” living here, but then did not receive help getting out and had no place to go. Another participant described being evicted for something he did not do, and now he cannot find other affordable housing.
- When a person with a disability is evicted, they may lose personal items that are difficult to replace.
- Participants described housing providers who failed to provide reasonable accommodations, like parking spaces needed for disability or emotional support animals, and retaliating when people tried to enforce their rights.
- Community councils can help to empower people by creating strength in numbers and overcoming retaliation, but these councils can be discouraged.
- Some housing providers “expect you to have things done as fast as everybody else, but they don’t realize there’s obstacles that are in the way for some people.”
- Evictions lead to instability. Moving can be traumatic and exacerbate disability.

Participants want more state funding for housing programs, like rental assistance and housing vouchers, and easier access to programs.

Summary statements and examples supporting this theme:

- Waitlists for Section 8 and other housing are a significant barrier.
- Landlords not accepting Section 8 is also a significant barrier.
- One respondent described becoming homeless with a Section 8 voucher due to limited housing options.
- Paperwork and bureaucracy associated with housing programs can make these programs difficult to access.

Topic: Rights and Freedom from Abuse and Neglect

People with disabilities must be free from abuse and neglect.

Summary statements and examples supporting this theme:

- Some participants described being treated poorly by care providers, including experiencing neglect, and that they did not have their complaints taken seriously.
- As one participant described, “I was left in my room, I was left on the toilet, I was – and I cried and said, don’t leave me sitting here. I was in so much pain from everything that I had gone through that just sitting on the toilet or moving, breathing hurt . . . And they’d walk away . . . I had to yell at them to get some attention.”
- Another person reported when he called out for help in a care home, “They come at the time they want to come.”

Train law enforcement in disability awareness, etiquette, and safe interactions.

Summary statements and examples supporting this theme:

- Examples were provided of law enforcement approaching individuals with disabilities and not understanding their disabilities or adequately protecting their safety.

Enforcement of rights is needed but can be difficult to obtain.

Summary statements and examples supporting this theme:

- There is a need for more enforcement of the laws, including laws on accessibility.
- Legal representation can be difficult to find.
- People need to be free to enforce their rights without fear of retaliation. Some participants expressed fear of retaliation from providers, counties, health providers, and health insurance for asking questions or asking that their rights be respected.

It is essential to create a more person-centered culture that promotes and honors self-advocacy and empowers people with disabilities to take control of their own lives. This will help achieve choice and integration in Minnesota.

Summary statements and examples supporting this theme:

- Self-advocacy training and programs are important for people with disabilities.
- People with disabilities need more education on the laws and their rights. This must start at a young age.

Advocacy from support persons and allies can be important to upholding the rights of people with disabilities.

Summary statements and examples supporting this theme:

- Advocacy can be critical in all areas of life for people with disabilities, including education, employment, housing, and other areas.
- Some people do not have access to advocates through their family members. Access to other advocates is critical.

Resolving issues and conflicts within state and provider systems can be challenging for people with disabilities. Better and clearer steps to issue resolution, as well as support when doing so, are needed.

Topic: Social Awareness and Community Life

Ableism is a significant barrier to integration. An attitude of inclusion is important to promoting community integration.

Summary statements and examples supporting this theme:

- Many people described ableism and stigma related to disability.
- A systemic shift in attitudes toward people with disabilities is key to fostering an environment where meaningful choice is genuinely supported and valued.
- Some disabilities may have more “stigma” associated with them in certain communities than others. Some participants felt that mental illness and substance use disorder have more stigma. Sizeism can also intersect with ableism.
- Some people described situations where a parent or spouse were being asked questions instead of the person with a disability.
- Some people with disabilities described being talked to like they are children.
- Being restricted to specific spaces and places for people with disabilities leads to exclusion.
- Recognizing that people with disabilities have individual needs would support inclusion. This means not overgeneralizing attitudes about ability or disability.
- People described wanting to be able to try things for themselves instead of having people do it for them.
- Some people have internalized stigma and may hide that they or their children have a disability. They also may not understand that they have a disability and therefore not have access to services.
- Ageism can also intersect with ableism for older adults with disabilities.

Representative quotes:

- “Every facet of our society has to really accept us as people first.”
- “I would go out in the community and people would just, like, run past me, like didn’t see me.”
- “They look down on you. They don’t talk to you, and they leave you behind. They don’t say it to you, but you know.”
- “It’s like you only have a disability when they can see it.”
- When they see ableism, “they want to stay at home, and don’t go anywhere, and don’t see anyone, or doing the things that they like to do outside in . . . society.”
 - “But when you see someone respect you and feel that you are included in the community . . . it makes you happy.”
- “Talk with me, not at me.”
- “I like to feel included and try to make other people feel included.”
- “If someone approached me and made me feel welcome, that would lighten the burden.”
- Allow “people to come into the community to live as you live.”

Racism and xenophobia against people with disabilities who are Black, Indigenous, or people of color is a significant barrier to integration.

Summary statements and examples supporting this theme:

- Integration requires the acknowledgment of the intersections of disability, segregation, racism, and xenophobia to combat systemic marginalization and promote inclusivity for all.
- Multiple participants described racist incidents that affected their sense of integration, inclusion, and choice in the community.
- People with disabilities are often treated differently because of their disabilities and their other intersecting identities.
- One parent gave the example of being scared that her Black son with a disability will be misunderstood in the community. For example, he will be followed in a store when he will pick up things and carry them around the store. His mom said that “people don’t understand him” and why he is doing what he’s doing.

More education is needed for people of all ages, including children, about disability.

Summary statements and examples supporting this theme:

- Educate people about ableism and respectful treatment of people with disabilities.
- Educate the public about disabilities, including invisible disabilities, such as brain injuries and dementia.
- Educate the public about communication methods for people with disabilities, including those who communicate through methods other than words.
- Training is needed for government staff, service and housing providers, policymakers, and political leadership to gain a greater understanding of the experience of people with disabilities.
- Directly challenge and eliminate stereotypes that impact interactions between people with and without disabilities.
- Expand state-led initiatives that create opportunities and foster educational awareness about disability inclusion.

People with disabilities want respect for their choices related to expressing affection, being in romantic relationships, and having children.

Summary statements and examples supporting this theme:

- People expressed the desire to make their own choices about partnership and expressing affection to other people.
- Child protection should not use someone’s disability to threaten parents or in decisions about whether someone can raise a child.

Isolation is a significant concern for people with disabilities.

Summary statements and examples supporting this theme:

- People who are homebound need access to a social life and may not know of available programs, including remote opportunities.
- Some described rarely leaving the house because “I don’t feel like I’m welcome anymore” due to aging and disability.
- Some desired more support groups and peer-to-peer services, including within their cultural community.
- Integration requires resources for older adults with disabilities to engage in spaces with one another and with the community.
- Older adults in senior housing should have ways of being checked on to avoid isolation.
- Some desired more visitors, who are trusted by community members, to visit homebound people for conversation and connection to services.
 - People with disabilities may feel “you’re forgotten about. You’re kind of swept under the rug.” It’s nice when someone is “just checking in on you, and not hounding you for this document.”
 - “Freedom for me is to be able to go out in the community, do what I want in the community, and then come home and have people talk to me about what I did.”

People with disabilities want to engage in community and recreational activities that they enjoy.

Summary statements and examples supporting this theme:

- People with disabilities should be included in organizing events and community activities.
 - “[Non-disabled] people organizing things at whatever level should not make assumptions about what disabled people need, it should always be with us, never apart from us.”
- Many people with disabilities expressed enjoying the arts or sports and wanted more opportunities to engage in these activities.
- Deaf, Deafblind, and hard of hearing people want to enjoy movie theaters that are open captioned at any time and access more captioning on television.
- Minnesota’s vibrant arts community and their ongoing education and communication efforts involving people with disabilities is impactful.
- Opportunities for individuals with disabilities can be significantly enhanced through inclusive programs like the Special Olympics, supportive community discussions that amplify their voices, and increased access to support professionals, which promotes empowerment and independence in society.

Topic: State Services

Minnesota was acknowledged by many participants to be a better place to live and receive services for people with disabilities than some other states or countries, but there is still significant room to grow.

Summary statements and examples supporting this theme:

- More comprehensive and available services and supports exist in Minnesota than many other locations.
- Home and community-based waiver programs in Minnesota provide many needed supports and services.
- One area of strength identified by many participants was the ability of family members and parents to be paid for caregiving.

Minnesota government services, programs, and procedures are often complex, inefficient, and difficult to navigate.

Summary statements and examples supporting this theme:

- Government bureaucracy is a barrier to people accessing services.
- There is a need for simplifying and enhancing access to support systems for people with disabilities, including across agencies and programs.
- Participants want state agencies to work together to figure out how to provide needed services in a more cohesive and accessible way.
- Participants described what is sometimes known as the “disability tax.” This is the extra costs—monetary, emotional, and time-related—for people with disabilities to live their day-to-day lives. This includes “bureaucratic burdens” created by state systems.
- Often systems can be too complex, with too many choices and not enough information. Disability often makes it difficult to navigate state systems.
- Other barriers to accessing state services mentioned included:
 - Long applications for state programs
 - Lack of data sharing between state agencies
 - Having to fill out multiple applications for multiple programs is a barrier. There is a desire for a simple application to fill out for multiple programs.
 - Filling out the same paperwork year after year, even though nothing has changed, despite the person’s disability is lifelong is perhaps an unnecessary burden.
 - Risk of losing benefits if paperwork is lost or not filled out
 - Computer literacy being required to access or understand programs
 - Cell phone or social media access being assumed or required
 - Lack of language access and accessibility
 - Need for language translations
 - People with limited or no literacy or who are blind or low vision
 - Lack of plain language
 - Not having a family members or friends who can assist

- Hospitals or clinics not providing sufficient information about services available in the community
- Expensive vehicle tab prices on accessible vehicles
- Lack of easy access to the person's files and records through the state and county

Representative quotes:

- “There’s so many scenarios where there is some sort of bureaucratic, sort of unrealistic expectation of us to do something that we physically, mentally, emotionally can’t do.”
- “Every time I get more services, I have more of a bureaucratic burden on me to manage my disabled life. As a person with an extreme energy limiting chronic illness, I don’t have the energy to do this.”
- “You’re disabled, but they’re still not helping you with the paperwork. It’s like, but you know I have a disability, so why are you not helping me with the things that I need help with for this?”
- “I’m only 25 and I’ve already given up on half of my life. I’m done asking for help, because every time I ask for help, there’s a hoop I’ve got to go through, and sometimes I can’t get that objective done in the time that they need because a disability or something that blocks me from being able to do it.”
- You have to “dig for” information.
- “There’s a lot of resources, but no idea what there are and how to get them.”
- Resources are there however “getting there is the difficult part.”

Lack of information in particular is a barrier for some communities.

Summary statements and examples supporting this theme:

- There is a lack of trust by some people with disabilities for available resources.
- Relationship building is critical when sharing information with disabled people, particularly in some communities.
- Representative quotes:
 - “In Indian Country, they got to feel welcome and they got to trust you. And if they don’t trust you, they’re not going to open up to you.”
 - “They don’t want a stranger to come to their door because there’s a trust factor again.”
 - Services providers need to figure out how to make programs accessible and to “bring our services to the people rather than making them come to us.”
- Lack of language access can reduce knowledge of resources.
- Some people don’t know where to go, how to fill out paperwork, or what is available.

- Lack of cultural understanding can lead to barriers.
- Some people with disabilities who are homeless may not know the resources that would be available to them through disability services.

Communities want more centralized information available. They also want more and different options for receiving information.

Summary statements and examples supporting this theme:

- Some participants suggested having culturally responsive offices or centers where disabled people can meet with other people who share their culture and language. There was a desire for “someone that can come between us and the state, we will tell them our issue and then pass it on to the state. Then they tell us what the state has informed them.”
- Other participants suggested spreading the word through advertisements with phone numbers on specific TV channels or radio channels, saying where to call for more information about available services.
- Others requested more information in writing, such as comprehensive resource guides or booklets of resources for older adults.

Representative quotes:

- “We don’t have somewhere to meet. We don’t have somewhere we can share our thoughts ideas, and challenges. The State of Minnesota needs to listen to our concerns whether it’s the young or old.”
- “The person with disability doesn’t know where to start to ask for help.”
- We need more “communication between the people and the government.”

There is the need for more culturally responsive services.

Summary statements and examples supporting this theme:

- The right to make one’s own decisions, with access to culturally tailored resources, employment opportunities, and community support, is essential to exercising autonomy.
- Some people with disabilities want to have access to service providers who are part of and can understand their culture and language.
- Tribal nations should have more flexibility to offer services directly.
- Some community members, such as families, want to support people with disabilities, but their income is not sufficient.

Representative quotes:

- “Give special attention to the disabled and send them people who know their language and culture.”
- “Community has that part to play—to embrace them, make them feel that they are welcome in the community and they are important and they are people to live with us.”
- “We can’t feed ourselves, how can we feed them?”
- “We’ve got to work collectively, the government, the family, and the community.”

Community mutual aid, where community members can assist and support each other, is an alternative to state services. Some participants say mutual aid works well.

Summary statements and examples supporting this theme:

- The state should support giving more money to the community directly instead of creating difficult state systems.
- Some expressed this was not simply giving more money to non-profit organizations but ensuring that people with disabilities were involved in directing where money would be spent.
- Putting funds into peer supports can be effective, for example, for people with brain injury.

Representative quotes:

- “I would trust my community” over the state or service providers, but “my community doesn’t have nearly the amount of resources the state does. So, let’s have the state give our communities money and let our community distribute it as we see fit.”

Meaningful choice, when selecting or participating services, is not always provided by state agencies or the counties.

Summary statements and examples supporting this theme:

- Under home and community-based waiver programs, environmental accessibility adaptations are not covered if they are for “comfort and/or convenience,” meaning they are “not directly related to a person’s assessed need or is a ‘nice to have’ item.” These adaptations are also not covered if they are “not for the person’s direct and specific benefit.”
 - People report that these restrictions are a barrier to integration because they may prohibit needed adaptations, including those that may incidentally benefit people who live with them. For people with disabilities who live with others, some items will be shared with family, and “this is true integration.”
- More services should be covered for life skills in the community.
- Sometimes services are denied, but the case manager cannot point to a clear reason in the Community-Based Services Manual (CBSM) or other rules.

Representative quotes:

- “A lot of us have caseworkers and they oftentimes make the choices of what agencies we use and what services we get, and they don’t really ask our opinion or give us choices.”
- “There are so many impediments to being able to get the service you need unless you know all this stuff yourself or your family knows all this stuff.”

State and county bureaucracy also causes long wait times for services.

Summary statements and examples supporting this theme:

- Counties do not always process things timely.
- Sometimes paperwork is sent into counties, and people with disabilities will continue to receive notices that the paperwork was not received.
- Counties sometimes do not answer the phones or return calls in a timely manner.
- After assessments, it can take additional time to be placed on the waiver or obtain services.

County case managers need more support and training.

Summary statements and examples supporting this theme:

- County case managers have too heavy a workload.
- Response times and service vary by county. Case managers may take months to return a call.
- Some case managers do well, but they may leave for other positions because of high turnover.
- Case managers should proactively reach out and be more responsive.
- Case managers should proactively let people know if there are changes in the law.
- Case managers may have limited knowledge of what programs and services are available. They may say they need to talk to their supervisor for answers, and it can be hard to get calls back.
- Many calls go to automated lines, where wait times can be long.
- The services provided by case managers may vary by county. More oversight is needed to ensure laws are being followed.

Service providers need more training and to promote choice and person-centeredness.

Summary statements and examples supporting this theme:

- Service providers need more training. People providing services need training in the support plan, needs, and disabilities of the people they serve.
 - It can be difficult to find personal care assistants (PCAs) and other caregivers who are trained and competent to provide certain types of care.
- Direct support professionals (DSPs) need training in what the person they are serving enjoys and to help them engage in those activities.
- At times providers are making choices for persons with disabilities instead of with them.
- Each person's disability may require a unique set of supports. Choices need to reflect individual needs and contribute to overall well-being.

Assessments and reassessments, along with identification of what services are to be provided, must be person-centered.

Summary statements and examples supporting this theme:

- Some people with disabilities described being denied for services even though they needed them.
 - For example, a woman needed a bathtub due to balance concerns in the shower and was denied multiple times before finally being approved.
- Assessments must be done in a person-centered manner and in an appropriate length and location that is accessible for the person with the disability.

Representative quote:

- “Every year I get reassessed for my waiver, I would like to see their person-centered reassessments actually be person-centered and not just a blanket five questions they ask me every single year.”

Greater Minnesota and rural areas have less access to disability supports.

Summary statements and examples supporting this theme:

- More services and supports are available in the Twin Cities than greater Minnesota.
- Rural areas have fewer services and supports than urban areas.
- It is important that high quality and affordable resources are available within a person’s immediate community. This allows for better experiences among persons with disabilities and their caregivers.

Participants who identified as veterans noted a need for strengthening support systems for veterans, emphasizing increased resources, clear policies and collaborative efforts to empower individuals facing disabilities and housing challenges.

“Mandated poverty,” or the inability to have a higher income or assets and still receive needed disability services, is a barrier to true integration.

Summary statements and examples supporting this theme:

- Income and asset guidelines for state programs can require poverty to receive needed state services.
- Asset guidelines put people in a precarious financial position and can lead to homelessness.
- The lack of ability to save money affects financial stability.
- Single adults with disabilities may have more trouble accessing some services and programs.

- There should be more flexibility in terms of individual and total family income, longer-term savings, home ownerships, and improved quality of life, without losing services or benefits.
- Paid family caregivers should still earn social security benefits for themselves.

Representative quotes:

- “I can’t imagine my life outside of the poverty that I’m forced to live in because I’m just struggling to maintain what I have with the energy and resources that I have access to. It is such a stretch to try and imagine something different even.”
- “You are forced to either live in abject poverty or you are forced to not be able to afford the medical treatment which enables you to work in the first place.”
- “If you’re just in that survival mode, how do you get outside, too?”
- People with disabilities need “basic necessities.” “We need transportation, we need housing, we need food.”
- “I don’t have a choice because of my financial status.”

The “marriage penalty” for some services or programs decreases integration.

Summary statements and examples supporting this theme:

- People with disabilities want the ability to get married without having any needed services or benefits affected.
- People do not want to feel they might be penalized for “choosing to be in love or for choosing to get married.”
- One participant described how people with disabilities have had partners leave them because of the need to get married, and marriage not being possible for the person with a disability.
- For those who do get married, they may feel reliant on their partner and dependent. This can be problematic, especially if it ends up being a “bad relationship.”

The direct care professional shortage significantly impacts people with disabilities, including preventing some people from living independently.

Summary statements and examples supporting this theme:

- Participants described having approval for hours of support, but not being able to find DSPs like PCAs to fill those hours.
- Participants described staffing shortages at facilities like nursing homes and group homes.
- Better staffing at facilities would allow more care, including showers and laundry.

Direct support professionals deserve more recognition, better working conditions, and better pay.

Summary statements and examples supporting this theme:

- More money should be invested in caregiver wages, instead of going to for-profit or non-profit providers.
- DSPs do not make livable wages and need to make higher wages.
- DSPs need more recognition for doing dignified and important work.
- DSPs need better working conditions, including not being called in at unexpected hours or to fill in for other shifts.
- DSPs working in facilities need better work cultures and colleagues who are committed to the work. This will improve working conditions and safety.
- Participants also suggested solutions to the workforce shortage such as nurses or nursing students getting educational credits for PCA hours.
- Workloads in facilities are too high because of a lack of appropriate staffing.

More money and more services should be directed by people with disabilities.

Summary statements and examples supporting this theme:

- People with disabilities should be able to direct their own funding, instead of the money going to businesses or non-profits.
- People with disabilities should be able to hire and choose their own PCAs.

People may not be able to access available services of their choice due to their specific disability or limitations in the service.

Summary statements and examples supporting this theme:

- Some services can be difficult to access, such as day services, particularly for people with specific needs like one-on-one care.
- Some programs have long waitlists.
- Providers may have the choice of whether to select or choose the person with the disability, not the other way around.

Fewer people should be in the corrections system, and their involvement in those systems may be connected to a lack of appropriate services.

Summary statements and examples supporting this theme:

- More programs and interventions are needed to help some people with disabilities avoid prison. Some people end up in the corrections system due to lack of proper services.

Topic: Transportation

Successful transportation infrastructure and options increase community integration and provides more choice.

Summary statements and examples supporting this theme:

- Transportation is critical for community access. One participant shared, “You can’t have integration without being able to get where you’re going.”
- More transportation options and service areas would increase the integration and inclusion of people with disabilities.
- Transportation is important to spending time in the community, whether it is social events or other types of recreation.
- Transportation can be limited by service area, limiting options of where people can go.
- Transportation options may also be limited in where they will take people. For example, transportation may take people to certain things (like a job) but not other needed activities in the community.
- Public transportation and Metro Mobility are not always connected, reliable, or safe.
- Participants described transportation options being too limited or expensive. Transportation options can be especially limited in Greater Minnesota and rural areas.
- Rideshare companies like Lyft and Uber are a desirable option for many people, where available and affordable.
- Electric bikes or scooters may increase mobility for some people with disabilities.
- Some cultural communities have less access to cars and lack training on how to use public transportation.
- The driver shortage impacts transportation options.
- More funding is needed for transportation.

Reliable transportation can be critical for access to employment and state services.

Summary statements and examples supporting this theme:

- Transportation can be critical to getting food and access to food shelves.
- Transportation is essential for getting to services and doctor appointments.
- Some services and benefits are only offered at certain physical locations. People with disabilities may not have transportation to access these services. For example, people may be required to fill out paperwork programs at a physical location.
- Reliable transportation is essential for employment.

Wait times and timeliness are a significant problem with transportation.

Summary statements and examples supporting this theme:

- Metro Mobility timeliness is a concern.
- People must wait a long time for rides to arrive. They must be available when the bus comes, or it will leave quickly.
- Other bus services may be untimely or limited.
- Long bus rides can make it difficult for people with disabilities to access community spaces.
- Transportation services should ask community members what dates and times work best for them.

Transportation must be accessible.

Summary statements and examples supporting this theme:

- Many bus stops are not well maintained for wheelchair access.
- Bus stops need to have benches for people with disabilities to sit. Participants shared that benches have been removed from some bus stops.
- Some transportation options may feel unsafe to people with disabilities.
- Transportation should be accessible to people who are blind, deafblind, or low vision.
- Transportation must be accommodating for Deaf, Deafblind, and hard of hearing people, including captions, smart phone notifications, and more.

5.2 Appendix B - Community Partner Descriptions

This section of the report includes a listing and description of the community partners who supported each small community conversation by hosting, recruiting, registering participants, and/or facilitating conversations.



Advocating Change Together

Advocating Change Together (ACT), located within the seven-county metro area and serving communities statewide, is led by people with disabilities and focuses on self-advocacy, disability justice, and disability pride.

Bethel University's BUILD Program

The BUILD program at Bethel University, located within the seven-county metro area, is a two-year residential certificate program for students with intellectual disabilities.

Bois Forte Band of Chippewa

The Bois Forte Health and Human Services is affiliated with the Bois Forte Band of Chippewa (also referred to as Ojibwe) and provides comprehensive health services to the Bois Forte community.

CloseKnit

CloseKnit, located within the seven-county metro area, is a nonprofit community organization focused on addressing youth homelessness.

Compassion Chapel

Compassion Chapel, located within the seven-county metro area, is a Hmong church that is a member of the Hmong district of the Christian & Missionary Alliance.

Confederation of Somali Community

Confederation of Somali Community, located within the seven-county metro area and serving communities statewide, is the oldest Somali-serving community organization in Minnesota.

Cultural Diversity Resources

Cultural Diversity Resources, located in Fargo-Moorhead metro area, is an intercultural bridge between many diverse communities, with the goal of informing and educating the community about diversity and inclusion.

Fahan

Fahan, located in Central Minnesota, is a Somali-led non-profit organization dedicated to fostering hope, empowerment, and inclusion for people with disabilities.

Faribault Deaf Club

Faribault Deaf Club, located in Rice County, is a community-based organization focused on building community among Deaf people in Faribault.

HACER

HACER, located within the seven-county metro area and serving communities statewide, is an advocacy-driven and Latino-specific organization focused on increasing information about the Latino community in Minnesota.

Itasca Life Options

Itasca Life Options, located in Itasca County, is a day services provider that serves over 70 individuals with diverse disabilities across Itasca County.

Minnesota Brain Injury Alliance

Minnesota Brain Injury Alliance, located within the seven-county metro area and serving communities statewide, is a non-profit organization dedicated to improving the lives of individuals affected by brain injury and strokes.

MSS

MSS, located within the seven-county metro area, serves over 600 people with disabilities with employment services, arts opportunities, and day services.

OutFront Minnesota

OutFront Minnesota, located within the seven-county metro area and serving communities statewide, is the largest LGBTQ+ advocacy organization in Minnesota and focuses on liberation and intersectional justice.

SEWA-AIFW

SEWA-AIFW, located within the seven-county metro area and serving communities statewide, is a non-profit organization focused on serving, supporting, and enhancing family wellness for the South Asian community in Minnesota.

The Arc Minnesota

The Arc Minnesota, located within the seven-county metro area and serving communities statewide, is a community organization committed to providing information and assistance to people with intellectual and developmental disabilities.

The Remember Project

The Remember Project, located within the seven-county metro area and serving communities statewide, is an organization dedicated to developing dementia-friendly and dementia-capable communities by increasing awareness through the arts.

Touchstone Mental Health

Touchstone Mental Health, located within the seven-county metro area, is a residential service provider focusing on improving mental health and housing stability through a range of services.

Union Gospel Mission Twin Cities

Union Gospel Mission Twin Cities, located within the seven-county metro area, is a non-profit organization focused on fighting homelessness, addiction, and poverty.

Community members from a seven-county metro area based rare disease support group and a Special Olympics team.

ACET convened community members from a seven-county metro area based rare disease support group and a Special Olympics team for other small community conversations.

5.3 Appendix C - Demographic Questionnaire

This section of the report includes the demographic questionnaire that participants completed following the registration process. The results of the questionnaire were used to compile section 3.0 Participant Demographics of this report.



Demographic Information

We invite you to answer a few brief questions about yourself. The following demographic questions are optional. You can skip questions that you prefer not to answer.

We recognize that identity is highly personal and hope these questions reflect the diversity and intersectionality within Minnesota's disability community. We are asking these questions to learn more about the people participating in these conversations and to inform future engagement opportunities about the Olmstead Plan. What you share will not be connected to your identity but will be combined with what others share in a report about who participated in the conversations.

1. To help us understand your perspectives, please select the descriptions below that apply to you.

- ☐ I am a person with a disability
- ☐ I am a parent of someone with a disability
- ☐ I am a caregiver of someone with a disability
- ☐ I am the legal guardian of someone with a disability age 18 or over
- ☐ I am the legal guardian of someone with a disability under age 18
- ☐ I am a family member of someone with a disability
- ☐ I am the partner/spouse of someone with a disability
- ☐ I am a child of someone with a disability
- ☐ I am a friend or ally of someone with a disability
- ☐ I work for the State of Minnesota
- ☐ I am a disability service provider
- ☐ I work in a disability-related field
- ☐ Other (please specify)
- ☐ I prefer not to answer

2. What is your age?

- ☐ Under 18
- ☐ 18 to 24
- ☐ 25 to 34
- ☐ 35 to 44
- ☐ 45 to 54
- ☐ 55 to 64
- ☐ 65+

- ☐ Prefer not to say

3. Which Minnesota county or Tribal nation or community do you live in?

- | | | |
|--|---|---|
| <input type="checkbox"/> Bois Forte Band of Chippewa | <input type="checkbox"/> Douglas County | <input type="checkbox"/> Norman County |
| <input type="checkbox"/> Fond Du Lac Band of Lake Superior | <input type="checkbox"/> Faribault County | <input type="checkbox"/> Olmsted County |
| <input type="checkbox"/> Chippewa | <input type="checkbox"/> Fillmore County | <input type="checkbox"/> Otter Tail County |
| <input type="checkbox"/> Grand Portage Band of Lake Superior | <input type="checkbox"/> Freeborn County | <input type="checkbox"/> Pennington County |
| <input type="checkbox"/> Chippewa | <input type="checkbox"/> Goodhue County | <input type="checkbox"/> Pine County |
| <input type="checkbox"/> Leech Lake Band of Ojibwe | <input type="checkbox"/> Grant County | <input type="checkbox"/> Pipestone County |
| <input type="checkbox"/> Lower Sioux Indian Community | <input type="checkbox"/> Hennepin County | <input type="checkbox"/> Polk County |
| <input type="checkbox"/> Mille Lacs Band of Ojibwe | <input type="checkbox"/> Houston County | <input type="checkbox"/> Pope County |
| <input type="checkbox"/> Prairie Island Indian Community | <input type="checkbox"/> Hubbard County | <input type="checkbox"/> Ramsey County |
| <input type="checkbox"/> Red Lake Nation | <input type="checkbox"/> Isanti County | <input type="checkbox"/> Red Lake County |
| <input type="checkbox"/> Shakopee Mdewakanton Community | <input type="checkbox"/> Itasca County | <input type="checkbox"/> Redwood County |
| <input type="checkbox"/> Upper Sioux Community | <input type="checkbox"/> Jackson County | <input type="checkbox"/> Renville County |
| <input type="checkbox"/> White Earth Nation | <input type="checkbox"/> Kanabec County | <input type="checkbox"/> Rice County |
| <input type="checkbox"/> Aitkin County | <input type="checkbox"/> Kandiyohi County | <input type="checkbox"/> Rock County |
| <input type="checkbox"/> Anoka County | <input type="checkbox"/> Kittson County | <input type="checkbox"/> Roseau County |
| <input type="checkbox"/> Becker County | <input type="checkbox"/> Koochiching County | <input type="checkbox"/> Scott County |
| <input type="checkbox"/> Beltrami County | <input type="checkbox"/> Lac qui Parle County | <input type="checkbox"/> Sherburne County |
| <input type="checkbox"/> Benton County | <input type="checkbox"/> Lake County | <input type="checkbox"/> Sibley County |
| <input type="checkbox"/> Big Stone County | <input type="checkbox"/> Lake of the Woods County | <input type="checkbox"/> St. Louis County |
| <input type="checkbox"/> Blue Earth County | <input type="checkbox"/> Le Sueur County | <input type="checkbox"/> Stearns County |
| <input type="checkbox"/> Brown County | <input type="checkbox"/> Lincoln County | <input type="checkbox"/> Steele County |
| <input type="checkbox"/> Carlton County | <input type="checkbox"/> Lyon County | <input type="checkbox"/> Stevens County |
| <input type="checkbox"/> Carver County | <input type="checkbox"/> Mahnommen County | <input type="checkbox"/> Swift County |
| <input type="checkbox"/> Cass County | <input type="checkbox"/> Marshall County | <input type="checkbox"/> Todd County |
| <input type="checkbox"/> Chippewa County | <input type="checkbox"/> Martin County | <input type="checkbox"/> Traverse County |
| <input type="checkbox"/> Chisago County | <input type="checkbox"/> McLeod County | <input type="checkbox"/> Wabasha County |
| <input type="checkbox"/> Clay County | <input type="checkbox"/> Meeker County | <input type="checkbox"/> Wadena County |
| <input type="checkbox"/> Clearwater County | <input type="checkbox"/> Mille Lacs County | <input type="checkbox"/> Waseca County |
| <input type="checkbox"/> Cook County | <input type="checkbox"/> Morrison County | <input type="checkbox"/> Washington County |
| <input type="checkbox"/> Cottonwood County | <input type="checkbox"/> Mower County | <input type="checkbox"/> Watonwan County |
| <input type="checkbox"/> Crow Wing County | <input type="checkbox"/> Murray County | <input type="checkbox"/> Wilkin County |
| <input type="checkbox"/> Dakota County | <input type="checkbox"/> Nicollet County | <input type="checkbox"/> Winona County |
| <input type="checkbox"/> Dodge County | <input type="checkbox"/> Nobles County | <input type="checkbox"/> Wright County |
| | | <input type="checkbox"/> Yellow Medicine County |

4. Which best describes your gender?

- ☐ Woman (or girl, if younger than 18)
- ☐ Man (or boy, if younger than 18)
- ☐ Nonbinary
- ☐ Transgender
- ☐ Unsure
- ☐ Prefer not to say
- ☐ Self-describe

5. Which best describes your race and/or ethnicity?

- ☐ Asian
 - ☐ Hmong
 - ☐ Chinese
 - ☐ Karen
 - ☐ Vietnamese
 - ☐ South Asian
 - ☐ Other
- ☐ Black/African American/African Descent
 - ☐ Somali
 - ☐ East African
 - ☐ West African
 - ☐ Other
- ☐ Hispanic or Latino/a/x/e
- ☐ Middle Eastern or Arab American
- ☐ Native American
- ☐ Pacific Islander
- ☐ Prefer not to say
- ☐ Self-describe
- ☐ White

6. Which of the following best describes your status as a member of the military/armed forces (Air Force, Marine Corps, Navy, Army, or Coast Guard)?

- ☐ Not a member of the military/armed forces

- ☐ Current service member
- ☐ Veteran
- ☐ National Guard
- ☐ ROTC
- ☐ Other

7. Have you had experience in any of the following settings designated only or primarily for people with disabilities?

- ☐ Classrooms designated only or primarily for people with disabilities
- ☐ Employment designated only or primarily for people with disabilities
- ☐ Housing (e.g. group home) designated only or primarily for people with disabilities
- ☐ Day program designated only for people with disabilities
- ☐ Other settings designated only for people with disabilities (please specify)