

# **BELONGING TO THE COMMUNITY**

A series of six papers describing Options in Community Living, a supported apartment program for people with developmental disabilities.

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## **Section I**

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## AN INTRODUCTION TO OPTIONS IN COMMUNITY LIVING

### What is Options in Community Living?

Options in Community Living (hereafter referred to as "Options") is a private non-profit agency in Madison, Wisconsin, which provides residential support services to 95 men and women who have developmental disabilities. At Options, we think about our mission in the following way:

Options in Community Living believes that every person has the right to live in a home in the community as an active and accepted member. Its mission is to provide support and coordinate services to enable adults with developmental disabilities to live on their own in small, dispersed settings. The agency works with people to help them make their own choices and reach their own goals, with support available as often and for as long as it is needed.

Guided by an active board representing a diverse group of persons, Options strives to help people with disabilities and the larger community learn from each other in order to promote mutual understanding, personal satisfaction, and a greater fulfillment of the potential of each individual.

### Who Receives Help from Options?

Options' services are available to persons who are at least 18 years of age, live in Dane County, and have a developmental disability. In 1985, Options is serving equal numbers of men and women. Over 40% are between the ages of 20 and 30; about 30% are in their 30's, and the remaining 30% are over 40. Over 94% of our clients experience varying degrees of mental retardation. Significant numbers require support services due to cerebral palsy, epilepsy, brain injury, mental illness, or hearing impairments. In the past four years, Options has begun to serve increasing numbers of people with multiple and severe disabilities.

Our clients live in apartments throughout the Madison area. We serve people who live alone, with one or two roommates, or with spouses or children. Prior to receiving services from Options, 50% of our clients lived in group homes or institutional facilities; 35% lived at home with their families.

The cost of Options' services, an average of \$4,000 per year per person, is paid for by the Dane County Unified Services Board. However, each of our clients must have a minimal monthly income to pay rent, utilities, food, transportation, and personal expenses. Over half of our clients earn some income through competitive or sheltered employment. Almost all receive financial assistance through SSI, SSDI, or other publicly funded programs. However, 93% of our clients have annual incomes of less than \$8,000. See Attachment I-A at the end of this section for more detailed demographic information.

## What Kinds of Help Does Options Provide?

Options staff provide whatever assistance a person needs and wants in order to live successfully in the community. Options helps the person to identify his/her personal needs and preferences and to organize ways to meet those needs. This may include help in finding and selecting housing or roommates, in arranging for live-in support, in furnishing and moving into a new apartment, or in gaining access to community resources for transportation, employment, leisure-time or financial assistance. It may involve monitoring, coordinating or advocating with other service agencies who deal with the person. It often entails teaching skills in home maintenance, shopping, money management, meal planning, health, and self-care. It usually involves offering advice, suggestions, a "friendly ear", or companionship in helping people to make decisions, solve problems and develop satisfying social activities and relationships. Options staff also provide a variety of types of practical help with the complexities of everyday living and in times of emergency or crisis.

Some clients have live-in support provided by Options staff, paid roommates, or personal care attendants. Most live on their own with varying degrees of come-in staff support, ranging from daily and intensive to monthly or as needed. Since services are long-term in nature, turnover of clients is relatively infrequent, perhaps four to six clients per year.

## What Values Guide Options?

We believe that human service agencies should operate in congruence with a set of values about the people they serve that is positive, clear, and known and understood by both board and staff members. At Options, the set of values we have chosen to guide our decisions and actions is embodied in the principle of normalization as it was defined and systematized by Wolfensberger in the evaluation tool Program Analysis of Service Systems (PASS) .<sup>1</sup> We invest considerable agency resources (e.g., funding for evaluation, consultants, PASS training for staff, time for in-services and retreats) to further our understanding of normalization and the issues it raises for our agency. Our ideas about values are incorporated in our mission statement and in our agency policies and practices. Although these values will be discussed thoroughly in the following sections (especially IV and V), we will mention them here briefly.

1 • We believe that every person has the right to live in a home of his/her choice and to have a role as a participating and accepted member of our community. Options' job is to do whatever is necessary to make that possible for individuals with developmental disabilities. We do not exclude or reject any person from our services on the basis of type or extent of

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<sup>1</sup>Wolfensberger, W. and Glenn, L., PASS: A method for the quantitative evaluation of human services. Toronto: National Institute on Mental Retardation, 4700 Keele St., Downsview, Ontario, Canada M3J1P3. (Third Edition, 1975).

disability or past history. As a result of this belief, we have had to learn to adapt and individualize our services to meet a wide variety of requirements. Each client at Options receives an entirely different combination of types and amounts of services, including live-in support if necessary. These services are flexible and can be adjusted over time as needs and preferences change. Services are available for as long as the client needs and wants them.

2. We believe that people learn most readily when they have the daily opportunity to face the challenges and experience the rewards of the environment to which they are trying to adjust. Options' role is to provide the type and level of support that individuals need in order to engage in that learning process successfully within typical community environments. Options is not a transitional or a readiness program. We do not see our purpose as moving our clients along through rigidly defined stages of increasing integration, autonomy or skill development. Instead, progress is measured in terms of a person's growing competence, control, and confidence in dealing with ordinary community settings and in terms of the increasing sophistication of his/her natural social support systems. Success means observable improvements in the quality of life, experienced by our clients within the Madison community.

3. We believe that people with developmental disabilities have a need, equal to that of any other citizen, to control their own lives, to manage their own affairs, to make their own decisions. We believe that our clients are the best judges of their own needs and progress, and that our responsibility is to help them gain more control and competence, with things in their lives that are meaningful to them. We can do that by helping them to know and pursue their own choices, by providing opportunities for them to learn and to try new things, and by supplying assistance and support when they experience problems or make mistakes. Our "consumer-directed approach" contrasts sharply with other agencies whose primary goal is to make their clients more self-sufficient by allowing professionals to identify deficiencies and prescribe corrective services.

Our approach, of course, carries inherent risks, since many of our clients have impaired judgment or communication, or limited experiences on which to base decisions. We have had to struggle to develop ways to insure that we provide adequate levels of support and protection, determined on an individual basis, without discouraging or infringing on our clients' sense of autonomy and responsibility.

4. We believe that people with developmental disabilities have a need- equal to that of any other citizen to feel accepted within the community, valued for their uniqueness and contributions, and able to participate in interactions, activities, and mutually supportive relationships with a variety of people in a variety of environments. Over the past four years, Options has avoided or moved away from practices that would segregate or stigmatize its clients. For example, we have moved staff offices out of apartment buildings where clients live and have actively sought housing for clients in positively-imaged locations in dispersed sites. We pay careful attention to the way we represent our clients and our services, orally or in

writing, in order to enhance their status and to break down negative perceptions. Probably most importantly, we have established community integration as a responsibility and priority of Options and have challenged ourselves to develop competence at helping clients form satisfying personal relationships and engage in ordinary social and leisure-time pursuits with non-handicapped citizens.

## How Has Options Changed Over Time?

Options did not begin as a smaller version of its present form. The program was begun in 1974 by the Retardation Facilities Development Foundation (RFDF), a parent-run organization that also operates a large intermediate care facility in Madison. The apartment program originally consisted of a cluster of five apartments leased in a westside apartment building. Four of the apartments were sublet to a total of 16 persons with developmental disabilities, most of whom came from large institutional settings, while the fifth apartment was used for live-in staff. With growing demand for the program, RFDF rented a second cluster of five apartments in 1976 in a complex of garden apartments on the east side of the city. From this beginning, the program evolved to its present form by pursuing six major patterns of development.

1. Separation from its parent organization. By 1980, the RFDF Apartment Program had developed to the point at which it was no longer compatible with RFDF's goals and philosophy. As a result, the RFDF Board discontinued its sponsorship of the program. Staff formed a new corporation, Options in Community Living, with a new board of directors. Recognizing the value of the program and the importance of continuity for its clients, Dane County continued to fund the program under its new independent status, beginning in 1981.

2. Separation of staff functions from client apartments. Early in its history, staff determined that the full-time presence of staff living and working in the apartment cluster was not necessary for clients at that time. By 1977, live-in staff had been removed from both apartment clusters. A separate office was established near the eastside cluster. A staff office was maintained in the westside cluster until 1983 when it was moved to a nearby office building. . . . .

3. Movement from apartment clusters to a scattered site model. Soon after the program began, people who had made considerable progress in the apartment clusters began to think about moving out on their own. While the 16-person apartment cluster was clearly too confining and restrictive for them, it was also obvious that they would continue to need some support from staff for a long time. Thus, the program began to develop follow-along services for a growing number of the so-called "graduates" of its clustered sites. The county was willing to fund these services, and in 1980 the program received a state grant to extend its services to persons who had not participated in the clustered apartment program. Apartment clusters could not accommodate the rapidly growing demand for services, especially from clients who needed wheelchair access or who wanted to live as couples or

## OPTIONS IN COMMUNITY LIVING, INC.

DEMOGRAPHIC INFORMATION'

NUMBER OF OPTIONS CLIENTS SERVED TO DATE IN 1984 ..... 92

<u>SEX</u>		<u>AGE</u>	
Female . . . . .	48	Under 20 . . . . .	1
Male . . . . .	44	20 - 30 . . . . .	22
		26 - 30 . . . . .	17
		31 - 35 . . . . .	12
		36 - 40 . . . . .	15
		Over 40 . . . . .	25
<u>MARITAL STATUS</u>		<u>RESIDENCE AT TIME SERVICES BEGAN</u>	
Single . . . . .	87	Family Home . . . . .	30
Married . . . . .	5	Group Home/Halfway House . .	20
		Intermediate Care Facility .	20
		Independent Living . . . . .	8
		Adult Foster Care . . . . .	6
		Nursing Home . . . . .	4
		Hospital Rehabilitation Unit	2
		YMCA/YWCA . . . . .	2
<u>DAY ACTIVITY</u>			
Paid Employment . . . . .	29		
Sheltered Workshop . . . . .	21		
Unemployed . . . . .	19		
Volunteer Employment . . . .	17		
Student . . . . .	4		
Homemaker . . . . .	2		
<u>DIAGNOSIS</u>		<u>Primary</u>	<u>Secondary</u>
Mental Retardation . . . . .	57		19
Cerebral Palsy . . . . .	13		0
Epilepsy . . . . .	12		6
Brain Injury . . . . .	8		0
Mental Illness . . . . .	2		15
Hearing Impaired . . . . .	0		4
Vision Impaired . . . . .	0		2
Other . . . . .	0		1
<u>INCOME SOURCES</u> *		<u>ANNUAL INCOME</u>	
SSI . . . . .	68	Unknown or 0 . . . . .	0
SSDI . . . . .	59	\$3000 - 3999 . . . . .	4
Employment . . . . .	44	4000 - 4999 . . . . .	15
Employment/Other Sources**	34	5000 - 5999 . . . . .	40
SSI-E . . . . .	8	6000 - 6999 . . . . .	15
Title XX . . . . .	6	7000 - 7999 . . . . .	7
COP . . . . .	3	8000 - 8999 . . . . .	1
AFDC . . . . .	1	9000 - 9999 . . . . .	2
City Welfare . . . . .	1	10,000 - 10,999 . . . . .	0
DCSS . . . . .	1	11,000 - 11,999 . . . . .	3
Foster Care . . . . .	1	12,000 - 12,999 . . . . .	3
USB . . . . .	1	13,000 - 13,999 . . . . .	1
Veteran's Check . . . . .	1	14,000 - 14,999 . . . . .	0
		15,000 - 15,999 . . . . .	1

\* People may have varying combinations of income sources.

\*\* This "other" duplicates income sources included in other categories

alone. In addition, staff felt that the congregation of too many clients in one building interfered with their ability to become integrated in the community, and soon it became obvious that people living in the clusters neither needed nor necessarily received any more staff support than those living in scattered sites. By 1979 the agency dropped its eastside leases, and by 1984 the westside cluster had also disappeared. (Attachment I-B shows the location of apartments in the Madison area.) .. .... ..

4. Increase in clients with a wider variety of special needs. From its original 16 clients in 1974, Options has grown steadily to its present size (in 1985) of about 95 clients. In addition to adding new clients, Options has also worked to expand its ability to serve people with more complicated needs and to respond to local deinstitutionalization events. In 1983, the program began serving people with multiple and severe physical disabilities, many of whom previously lived in nursing homes and needed live-in support. Options also took on 10 new clients from a 140-person intermediate care facility in Madison which had been closed suddenly. In 1984, Options received a state grant to provide service to four people with traumatic brain injury. Also in 1984, Options accepted its first Community Integration Program client from a State DD Center.\*\* (See Attachment I-C for a chart showing the growth of Options.)

5. Increase and differentiation of staff roles. In 1981, Options had five full-time professional staff who shared direct service and administrative responsibilities. Since then, Options has added six paraprofessional positions and four new professional positions and has developed a full-time administration job. In 1983, staff were organized into teams and paid roommate and attendant roles were added; 1984 brought the addition of Home Support Workers and a part-time Recruitment Specialist.

6. Increased recognition as a model program. In 1981, Options was featured in a policy bulletin on residential service, published by the Wisconsin Coalition for Advocacy. In 1982, Options requested and received an official PASS evaluation, producing a report that helped Options organize its future development and that brought attention from around the state and the country. In 1984, Options received the first annual Wally Bauman Distinguished Service Award for Outstanding Program, awarded by the Dane County Unified Services Board. As the recipient of three state grants, Options has been able to adapt its services to new populations and is increasingly called on to provide technical assistance to apartment programs in Wisconsin and throughout the U.S.

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\*\*The Community Integration Program allows State and Federal Medical Assistance funds to be used to pay for community alternatives for people living in the State Centers for the Developmentally Disabled.

## Attachments for Section I

I-A Demographic Information (May 1985) . . . » r-

I-B Location of Apartments of Options Clients (September 1985)

I-C Size of Options (1974-1985)

### Other Documents Available on Request

Article about Options in WCA Newsletter (July 1981)

A Report of the Assessment of Options in Community Living by means of  
Program Analysis of Service System (PASS)

Options in Community Living Annual Report - 1984



Location of Apartments of Options Clients

September 1985

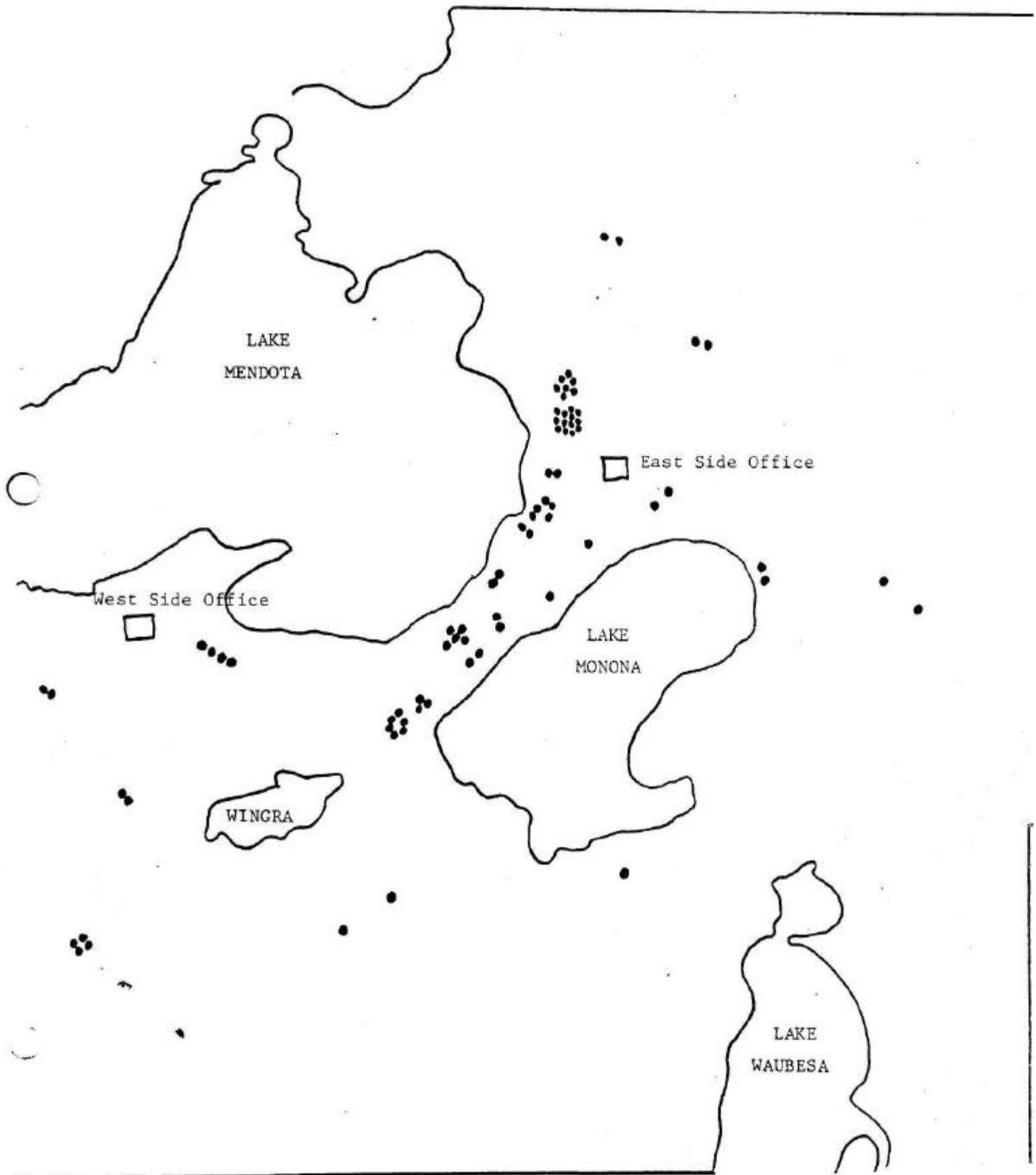
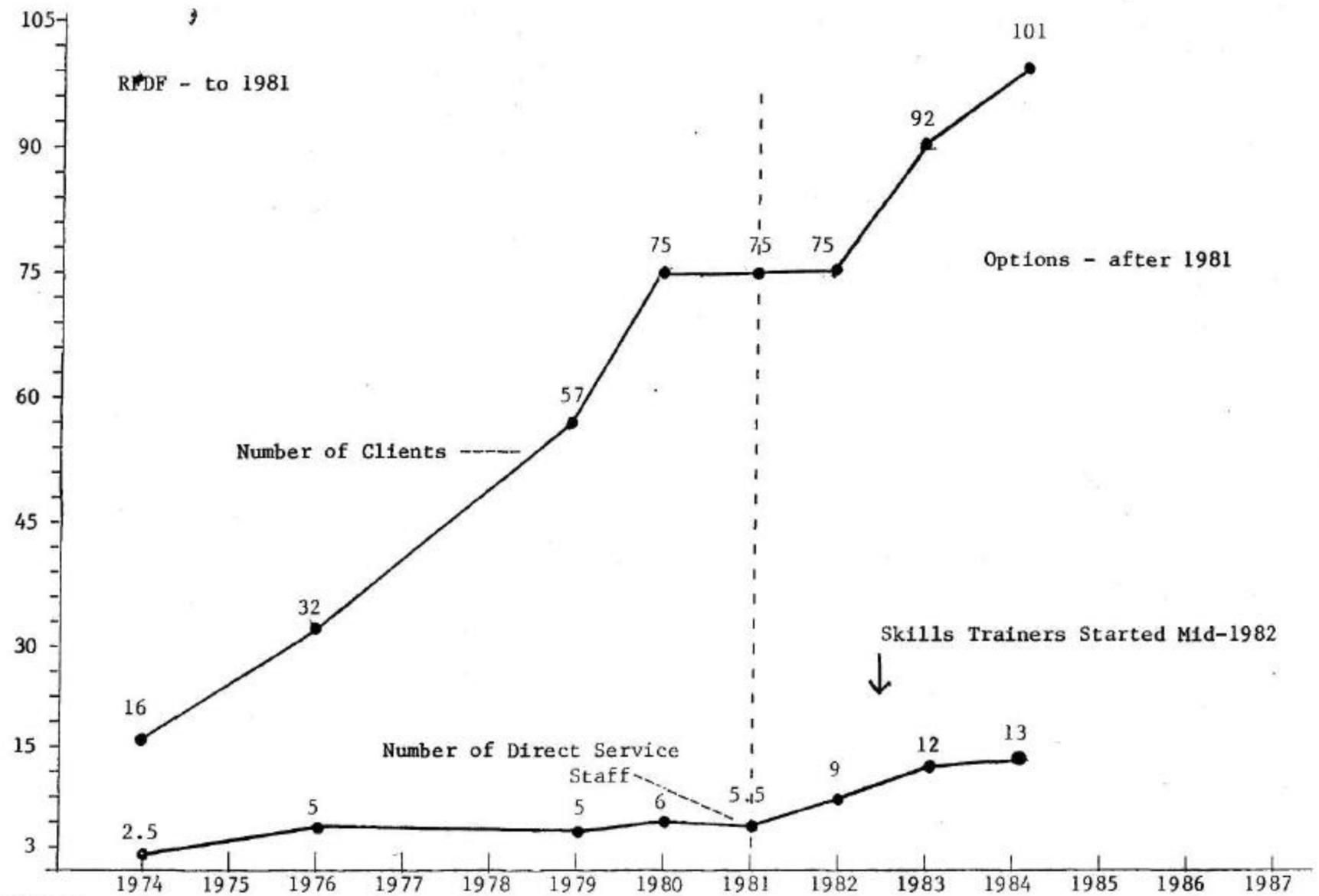


Table 1: SIZE OF OPTIONS



Number of Clients Per Staff

GJ/pm  
11/83

## Section V

### Belonging to the Community

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## BELONGING TO THE COMMUNITY

Options' mission statement refers to the right of every person to be an active and accepted member of the community and of the agency's intent to help people with disabilities and the larger community learn from each other. Many of our clients have a history of rejection and segregation. We are keenly aware of the loneliness and vulnerability they experience because of the stigma attached to their disabilities and because of their isolation from many normal community activities and routines. Many of our clients report having few significant friendships with handicapped or non-handicapped people - in fact, almost none, if one excludes family and paid staff. We also know of the large number of teachers, counselors, case managers, social workers, supervisors, attendants, doctors, psychologists, and volunteers who move in and out of each of our clients' lives, making a mockery of the term "personal relationships". Clearly, a significant goal of our service program must be inclusion of our clients in ordinary community life and in non-paid, lasting relationships with typical citizens.

Having stated our intentions unequivocally, the next and more difficult question is to what degree an agency such as Options can realistically assume responsibility for accomplishing this goal. We worked hard on all of the obvious things. To decrease the stigma attached to our clients, we help and encourage them to find and maintain attractive apartments in neighborhoods throughout the city and to look and behave in ways that will win them acceptance from their neighbors. We make sure that our own presence, from the name of our program to the actions of our staff, does not call negative attention to the people we are helping. To encourage clients to get out and about, we assist them in using transportation systems and in finding jobs in the community. We constantly look for and connect clients to generic resources for their education, work, housing, health, and recreation needs. We arrange for them to participate on agency boards and committees, to attend conferences, and to take vacations. We encourage close contact with family members, provide counseling on relationship problems, and assist clients who wish to marry.

All of these efforts are essential for promoting community integration and have been well worth the effort. Nevertheless, in 1982 the team that conducted a PASS evaluation of Options had this to say:

Although some people undoubtedly stay alone and indoors too much, the program's weakness is not so much in the variety and number of opportunities that clients have to "get out", as it is in the depth and continuity of the relationships that have resulted.

Many clients apparently have not succeeded in building significant reciprocal relationships outside the service system and are still quite dependent on staff of Options and other agencies for a variety of kinds of support.

The evaluation forced us to re-examine our role and responsibility in the lives of clients. We decided that, while we should maintain and improve our established methods of promoting integration and relationships, we also needed to bring to the problem a deepened commitment and fresh ideas.

## Laying the Foundation

In 1984, Options' Program Director established the issue of community integration as the top priority in Options' service development. The Program Director continues to play a key role in keeping this topic in front of the board, committee and staff members. She makes it her responsibility to build in time for training, planning and discussion on community integration and to bring up the subject in multiple contexts, from board meetings to service planning sessions for individual clients.

We began by establishing certain planning events that were devoted solely to the issue of community integration. The purpose of these sessions was to sharpen our awareness of the importance to our clients of participation in community activities and relationships and of Options' role in making that happen. A second purpose was to improve our competence and creativity; we decided that our limited success was due to the fact that we didn't really know how to do it. Following is a list of activities that occurred during the first year:

- March 1984 Team Coordinators attend training sessions on how to teach normalization principles. Prepare in-service program on community integration. Team Coordinators
- April, May 1984 present to staff three in-service presentations on community integration. The first is a general overview of the process of social devaluation of people with disabilities and the meaning of normalization; the second covers the notion of integration and ways a program can promote and measure participation in community life. In the third meeting, staff divide into small groups, each of which is assigned an Options client. Their task is to develop visual representations of the client's activities and relationships, and to compare the patterns that emerge with those of a non-disabled person.
- June 1984 Two in-services are arranged to present practical ideas on integration. A local community recreation coordinator talks about programs that can accommodate people with special needs, and a parent talks about leisure-time ideas that have worked for her son. A university consultant makes a presentation on teaching appropriate social skills, with an emphasis on integration.
- July 1984 All-day staff retreat. Staff divide into three groups, each of which chooses two clients. The task is to analyze the clients' current activities, relationships, environments, interests, and personal strengths, and to devise new possibilities or strategies to promote community integration. The end result is a specific plan and timetable for implementation for each client.

- September 1984 Staff meeting to review and evaluate success of six individual community integration plans.
- February 1985 Staff retreat with John O'Brien, international consultant and author on normalization and community integration. Discussion of barriers and dilemmas staff are encountering in trying to create relationships or encourage community activities.
- March 1985 Options' Community Affairs Committee decides to assume role in community integration. Identifies personal and organizational contacts of board and committee members that can be used in finding community citizens and groups for clients who need friends or want to become involved in a group. Defines process for making and responding to requests.

As a result of these group activities and the individual effort of many Options staff, we are beginning to develop a larger body of experience and knowledge about community integration. We are still puzzled and frustrated by many of our clients' situations, and we are a long way from having clear or easy answers. The remainder of this section is simply a modest attempt to summarize some of the things we have thought about and learned, as we have tried to help our clients to become a part of life in our community.

## Dilemmas

Before describing actual strategies we have used, it will be useful to mention briefly several of the dilemmas with which we have struggled. Community integration, more than any other goal or activity of our program, has challenged our assumptions and preconceptions about the kind of role that paid community support staff should play in the lives of their clients. It has forced us to question some traditional priorities and practices, and to modify the system of measurement and rewards that we build into our professional services.

First, a real concern of our staff is whether community integration activities should be a high-priority use of staff time, given other competing needs and demands. In order to help a client feel comfortable in a new activity or learn to meet new friends, our staff often decide that it will be necessary to join or attend the activity with the client, perhaps for an extended time. Going to weekly folksinging events, eating out at restaurants, or taking a crocheting class with a client, however, is time-consuming and sometimes expensive. Are those activities as important as balancing the checkbook, reviewing the shopping list, or making five phone calls about Medical Assistance benefits? Community integration activities often feel frivolous to staff, not as important as more practical or urgent activities.

In considering this question, we realized that there was very little in our everyday service practices that would remind and reinforce us for expending effort on community integration. Part of the solution, therefore,

lies in defining community participation and relationships as integral and valid goals for each client, rather than as afterthoughts. Our new individual assessment and planning process requires that we examine the importance of community integration in relation to other kinds of learning and assistance the client needs. Establishing priorities is still difficult, but we are now better able to give ourselves permission to reduce time spent on certain traditional activities in favor of community integration.

For example, when one Skills Trainer complained that her job was becoming too routine, she and the team looked at her activities and decided that some of the tasks weren't worth the time. Rather than meet for an hour each week at a client's apartment to help him write out checks and balance his checkbook, it might make more sense for the Skills Trainer to do the paperwork herself in 5 minutes and spend the other 55 minutes with the client at a concert, art show, or church social event. In some cases, success in getting a client interested in a new activity, such as taking guitar lessons and attending folk concerts, has reduced the amount of time staff previously spent dealing with the person's loneliness, boredom, and frustration.

In addition, we decided it was important to work together and support each other in this new, unfamiliar territory. We needed to make a conscious effort to recognize successes and progress, and to reward each other. As one team member said, "We decided to praise each other a lot for any community integration activity."

A second dilemma we have faced arises from our concern that intervention in community integration often feels unnatural and meddling to staff. To be intervening in a client's personal interactions and relationships may seem too intrusive, assertive, or controlling. At first, staff found it awkward and artificial to be initiating friendships and engineering meetings between their clients and other community members. They were unsure of the correctness of staff acting on behalf of a client in these matters; they also were concerned that their own involvement would further stigmatize their clients in the eyes of others, by calling attention to their need for extra help in areas that most people manage independently. Experience in trying out various strategies, as well as results of consumer satisfaction surveys, have gradually shown us that many clients need and want assistance in this part of their lives, as much as in money management, cooking, or apartment selection. As in all other activities, our intervention must be sensitive to the preferences, privacy, and dignity of each client. Although it "feels funny", it is rarely rejected or unappreciated.

A third challenge for us is to define our role as paid staff in filling the relationship needs of our clients. On one hand, we want to prevent the development of a "we-the-staff versus they-the-clients" attitude; we would prefer not to create professional distinctions and boundaries that put distance between us and the people who receive our services. On the other hand, we are uncomfortable with the idea of Options staff becoming the primary source of emotional and practical support to clients. Involvement in community integration activities can mushroom into an overwhelming and never-ending responsibility if clients become dependent on staff for all of their social activities and relationships. We are struggling to find a

balance between being friends to clients and being the people who help to find and support other people to establish friendships with them.

## Thoughts About Strategy

1. Break down the task so that it is manageable and individualized. Significant improvement in the community integration of all of our clients is a challenge too large and complex to be tackled with group strategies. Discovering ten more generic resources or starting a client softball team may have an immediate effect on many clients, but the results will be fairly superficial. We have found that it is easier and more effective to think together about community activities and relationship possibilities for only a few clients at a time and to develop individual plans that reflect the client's characteristics and circumstances. Results, in terms of impact on quality of life, are easier to see. An example of a community integration plan for one client is included at the end of this section (see Attachment V-A).

2. Be able to identify and support multiple types and levels of need. A person who frequently spends long evenings or weekends at home alone may be doing so for many reasons. Ignorance of possible activities and how to get to them is one of the simplest problems to remedy but is usually not the main cause of loneliness. Some of our clients have become dependent on families or staff to plan their activities for them; when left alone, they do nothing. We teach them to plan and carry out their household and job routines but may neglect direct planning and skill development for their social life. As one parent noticed, "You don't always anticipate loneliness until you find yourself in the middle of it." Some of our clients need to learn to anticipate loneliness and to develop the basic skills and responsibilities of maintaining a routine that includes friends and leisure-time activities.

For example, one of our clients, Bob, needed staff to help him plan his social activities (just as he might need help planning a monthly budget); he needed to learn to use the telephone book, to make phone calls, and to use an appointment book. In developing a community integration plan for Bob, we discovered that he had always known lots of people, but he lacked the skills to get in touch with them. As a result of a modest amount of staff time invested in teaching and planning, Bob now has a full social life.

Other clients require more intensive and continuous staff support. One young man, for instance, can decide that he wants to go to a movie with a woman friend. To carry out his intention, he may need help and multiple reminders to choose the movie, date, and time and to make the invitation. The young woman's family may require reassurances of their daughter's safety. Transportation details must be worked out, and a number of calls must be made among the client, his date, staff and parents to cross-check the details. Making a movie date possible may be as important a staff responsibility for this client as teaching a new recipe or mediating roommate disputes.

3. Be prepared to get actively involved with clients in attending community events and participating in activities. Often, in the past, we simply informed people of events they could attend or groups they could join and then we wondered why they never followed our suggestions or perhaps attended once or twice and then dropped out. We realize now that our clients, like everyone else, prefer to try something new in the company of a friend. In many cases, it is really the personal relationships that make the activity enjoyable and worthwhile. When clients joined something alone, they were often ignored; they did not understand the expected social behavior and others in the group were unsure of how to accommodate them. When a staff person joins in the activity in a peer relationship with a client, s/he can find ways to make everyone more comfortable with a new situation. The staff person can deal with problems or misunderstandings early and facilitate interaction and friendships between the client and others. In the past year, for example, Options staff have joined drawing, swimming and exercise classes with clients; they have accompanied individual clients to sporting events, restaurants, and church programs and have helped clients try out new neighborhood and recreation centers, craft, music, dance, and nature resources.

Greg, one Options client who recently returned to Madison from a state institution, joined a weekly art class, sponsored by his neighborhood center. An Options staff person at first accompanied him to every class, as the instructor was concerned about his odd and sometimes disruptive behaviors. Over a period of six months, the instructor learned how to deal with Greg so that he now attends the class on his own. In addition to serving as an outlet for Greg's interest in drawing, the class provides for Greg evening trips to new places in the community, exposure to new people who are his classmates, and a subject for conversation at home.

4. Spend time discovering and acknowledging a person's unique gifts, so that community experiences can be built on his/her strengths. We want to help each of our clients find places where s/he is acknowledged as a valued member, where s/he is in a position to make a contribution, rather than being in a dependent or non-productive role. We try to match our clients *with* places or groups that will open up to them, that will take on some responsibility to include them, that will miss them when they are absent. In some cases, this intention is challenging us to look for places that reflect individual preferences and cultural values different from our own. In all cases, it forces us to enlarge our vision of integration possibilities for our clients. We are learning to consider informal gathering places in the community, such as lunch counters and coffee shops, as well as an enormous number of interest groups organized around political concerns, environmental issues, outdoor activities, church, art, theater, and neighborhood needs.

5. Help to create and support meaningful relationships with ordinary community folks. Many of the preceding observations have to do with finding places to go or activities to engage in, with the idea that relationships will follow naturally. Sometimes, however, lasting relationships do not develop. Also sometimes our clients don't want more places or activities; what they really need is friends with whom to share time. We have learned

from several volunteer recruitment programs in our community that mass appeals for volunteers are virtually useless in finding people for the one-to-one, long-term relationships that are missing from the lives of most of our clients. What seems to work best are personal invitations to a few people, identified through a network of community contacts, who best fit the needs of a particular client.

Options staff have been able to use this technique by recruiting through their own social networks. For example, as a result of a specific community integration plan that was developed for Carol at a staff planning day, the sister of a roommate of one of our Skills Trainers was recruited to get to know Carol. In addition to becoming a significant friend of Carol's, the volunteer introduced her to her family, where she now spends her holidays, and to her church, where Carol was welcomed into a Bible study group and a single's club. Members of the church groups provide rides for her, invite her to social events, save her a seat in the meetings and ask about her when she is absent. For Carol, one volunteer opened up a wide circle of people and activities.

Options, as an agency, is gearing up its capacity to find volunteer citizens. The Community Affairs Committee has polled Options board and committee members in order to compile an inventory of all social, recreational, religious, cultural, professional, and service affiliations, interests, and contacts that they are willing to share with Options. Each month, staff submit written descriptions of two client situations that would be improved through recruitment of a volunteer or membership in a community group. Board and committee members attempt to fill those requests by drawing on their own social networks. They will make the initial phone calls; if successful, the staff person for the client will follow up the lead. After only a few months, this process produced two volunteers for clients who previously were reluctant to participate in community activities by themselves.

We have realized also that there are many opportunities to strengthen or deepen relationships that our clients already have but that are casual or fragile. We are learning to be alert for and "to jump on" those opportunities that, two years ago, we would not even have noticed. For example, Julie, who frequented a downtown restaurant, mentioned that she liked some of the waitresses there. Her Community Support Specialist began to accompany her to the restaurant every couple weeks for about a year in order to encourage Julie's interactions with the waitresses. As a result, Julie and the waitresses have begun spending time together outside the restaurant. In another instance, staff found that a client had a former school buddy in a distant suburban area that he hadn't seen since graduation; she arranged for the two to get together periodically to maintain their friendship.

6. Don't forget the neighbors. Traditionally, Options staff have not initiated contacts with neighbors, either by themselves or in company with clients. We did not wish to stigmatize them by drawing any unusual amount of attention to them or our presence as service providers. Consumer satisfaction surveys, however, have confirmed our observations that most of our clients do not enjoy close relationships with their neighbors. In some

cases, interactions are almost completely absent or are hostile. There are a variety of explanations. In some parts of Madison, especially where apartment dwellers are fairly transient, "neighborliness" is not a strong tradition. In the problem situations, neighbors have a low tolerance for people who look or behave differently or clients have engaged in clearly unacceptable behaviors, such as repeatedly yelling and slamming doors. The difficulties have increased as Options has expanded its services to clients with a wider variety of needs in more apartment locations. One subject that is getting increasing attention, therefore, is when and how Options staff should intervene to promote good relationships with neighbors.

An obvious strategy we are using is to encourage clients to do friendly, neighborly things, such as sending Christmas cards, sharing cookies, and dropping by to introduce oneself or say hello. One client moved into an apartment complex where the norm was to have annual flower gardens. Although tenants were initially extremely opposed to this individual, they were quite touched when he planted his own flower garden and cared for it throughout the summer. This small effort seemed to visually present him as a responsible and average citizen, and someone who could fit into their environment.

If it seems likely that problems will arise between Options clients and their neighbors, we believe it may be advisable for the staff member to introduce him/herself and the client to the neighbors in advance. In one instance where the apartment tenants were particularly hostile about a client's impending move to their building, an Options staff person met with them separately and explained all of the client's peculiarities in advance, so that there would be no surprises. Although Options staff usually do not use this approach, in order to avoid setting up negative expectations, it may be helpful in some instances if the client's behavior is unusual and the neighbors are already extremely anxious.

In analyzing some of the failures our clients have experienced, due to problems with neighbors, we have become more aware of our responsibility to assist apartment managers and neighbors in knowing how to interact with our clients. Often, they will give in to any request from a client or they will be reluctant to complain about problems until the situation gets out of hand. It is important for Options staff to assure neighbors and managers of their right to refuse or ignore inappropriate requests and behaviors. Regular check-ins by staff also help to identify problems before they pile up or become too serious.

7. What about people who don't want community integration? Most of our clients are open to having help in making and keeping friends and in participating in community activities. Some, however, say they do not want friends; they may even be friendly, sociable people but they prefer to stay isolated and will go out only with one or two trusted staff persons. The challenge for us, in these situations, is to respect their preferences but still try to help them see the value of having friends. We need to be careful not to blame people who remain isolated and to avoid using the term "unmotivated". Unwillingness to participate is often dismissed as lack of motivation, when in reality the reluctance has to do with lack of confi-

dence, unpleasant past experiences, or other reasons that we need to understand. Some people who have been served by Options for many years do not expect or want Options to be involved in their social life.

## **Building Relationships Among Clients**

Although Options hopes to increase the opportunities that our clients have to form relationships with non-handicapped citizens, creating and strengthening positive relationships among clients is another legitimate goal. Often a person's degree of community integration will be improved if s/he has a nearby friend, spouse, or apartment-mate to do things with. As Options has moved from a clustered to a scattered site model and federal rent subsidies have allowed more of our clients to live alone if they prefer it, this issue has gained importance for us.

Building relationships between clients can be addressed in the same planned, systematic manner as community integration. In an assessment of Jim, for instance, staff noted that he rarely left the house except to go to his job. He resisted any participation in community activities, even though he had a roommate who was very active in several groups. He wanted very much to have a relationship with a woman but had ruined previous opportunities by being too aggressive at first introduction to any potential woman friend. A Skills Trainer devised a plan to match Jim with Ann, who is very outgoing and active in the community. She carefully planned an outing in May to a major league baseball game for herself and four clients, including Jim and Ann. The activity was purposely chosen to be something that Jim liked and knew a lot about and it was emphatically not a "date", so that Jim would have no unrealistic expectations. The game, lunch, and the ride to and from were pleasant. At the end, Ann asked Jim for his phone number and later invited him out for coffee. By July, Jim and Ann were dating regularly. Jim now knows Ann's neighbors, shops, and eats out often. At Christmas the couple were engaged and plan to marry in September.

Another approach we use is to organize "client groups" which meet regularly for a limited period of time, usually about three months. The groups provide opportunities for clients to get to know one another and to try out their abilities in an environment that staff can structure to feel non-threatening. We try to organize groups that will not duplicate other more integrated social opportunities in the general community. Usually groups are formed in conjunction with a college or university student, who prepares agendas and co-facilitates the group with one Options staff person. The groups meet at apartment community rooms, churches, schools, or Options' offices. They generally are open to voluntary participation by clients from any of Options' three teams.

Some of the client groups are organized to provide instruction on particular topics, such as nutrition, exercise, health, personal safety, fire and home safety, and emergency phone use. Staff and students act as teachers, although in some groups clients have assumed a leadership and co-teaching role. Other groups are designed to help people communicate with each other more effectively, learn how to make friends, and provide emotional

support. For example, a friendship group, including 12 men and women, recently met weekly for three months from 5:00 to 6:30 p.m. The members' main purpose was to have fun and to get out of the house during the winter months for conversation, card games, and potluck suppers. They had varying levels of social experience; staff, students and more capable group members modeled appropriate behaviors. We have had men's groups, women's groups (including several for victims of incest), bowling groups, potluck supper groups and groups on assertiveness, sexuality, communication, and relaxation.

## **Advocacy Activities**

Our ability to achieve community participation and meaningful relationships for our clients is influenced by a number of external conditions. Many of the advocacy activities undertaken by Options' board, Program Director, and individual staff members are aimed at improving these conditions. Our clients need:

- \* A wider variety of affordable housing options. Some of our clients need barrier-free housing that is close to community resources and specialized transportation routes. Many wish to live in apartments that are reasonably close to people or neighborhoods they know. Also, it is generally helpful if clients can live in places where they are likely to meet and know their neighbors; small-scale flats and community-oriented neighborhoods are preferable to larger suburban apartment complexes. We are particularly interested in supporting the development of cooperative housing arrangements which can provide built-in contact with neighbors and support for relationships between non-handicapped and handicapped co-op members.
- \* Community based jobs. Services that develop community jobs for our clients and that provide training, coaching and long-term support are invaluable. In addition to providing clients with more discretionary income, community employment opens up numerous possibilities for activities and relationships that Options can reinforce and build on.
- \* More reliable and convenient specialized transportation for people who use wheelchairs.
- \* Barrier-free settings for recreation and consumer activities (e.g., stores, restaurants).
- \* More community educational and recreational programs that are willing to include and accommodate people with disabilities.
- \* **Programs to recruit one-to-one volunteers for people with disabilities.**
- \* **Better education of neighborhood, church and social organizations about the needs of people with disabilities.**