EMERGENCY SHELTER: A GROWING NEED FOR ARIZONA VICTIMS WITH I/DD

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Emergency Shelter: A Growing Need for Arizona Victims with Intellectual and Developmental Disabilities
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BACKGROUND
In recent years, advocacy groups have been lobbying for state and national level initiatives that are more inclusive of victims of abuse and exploitation. Advocates maintain that we need to build stronger and more appropriate support systems around victims who have intellectual or developmental disabilities (I/DD) or vulnerable adults who have ongoing support needs. Domestic violence programs have shared stories of victims in need of caregiving support having nowhere to go, as the perpetrator of their abuse is their primary caregiver. The definition of abuse varies as abuse itself takes many forms, ranging from overt physical and sexual assault to bullying and emotional cruelty. In addition, the word "abuse" also includes any unwanted behaviors that intentionally harm an individual that are demeaning or insulting, or cause fear in another person.

Circumstances around reporting abuse are especially alarming for some victims who have I/DD. For those who have cognitive or communication challenges, reporting can be difficult. Law enforcement and judicial professionals tend to treat these victims as unreliable witnesses, making cases of abuse even more difficult to substantiate. As a result, unaddressed acts of violence whittle away at a person's dignity, sense of worth, and ultimately options for escape from their abuser. Their physical and mental health suffers as a result.

The state of Arizona's inadequate policies to protect victims with I/DD became readily apparent in 2018. Arizona received negative backlash and national media coverage following the rape, and subsequent pregnancy, of an incapacitated female resident with I/DD at Hacienda HealthCare. In response, Governor Douglas Ducey established the Abuse & Neglect Prevention Task Force to evaluate the state's current ability to address abuse and neglect cases involving vulnerable adults, including individuals with I/DD.
In November 2019, the Task Force outlined 30 recommendations to address concerns of abuse faced by Arizonans with I/DD and other disabilities.

The Task Force's recommendations, while extensive, were not all-encompassing. Advocates and service providers continued to meet in workgroups outside of the Task Force to identify additional gaps in public and private agencies' support for vulnerable adult abuse victims. One of the more pressing issues to emerge from these collaborations is the lack of accessible emergency shelters for vulnerable adult victims who need caregiving support. These are victims who may need to be removed from their residence when the abuser is a caregiver, family member, or other cohabitants. Although vulnerable children also are victims of such treatment, the Arizona Department of Child Safety exists to provide foster homes and other temporary care settings in such cases. There is no similar agency or system to serve adult victims.

This scenario played out as discussions took place about the potential closing of the Hacienda intermediate care facility. For the first time, state officials got to witness firsthand the insufficient number of supported shelter options available to Arizonans living with I/DD during times of emergency.

THE ISSUE

Arizona is currently home to just under 1.5 million people with a documented disability, or 26 percent of the state population (CDC 2020). National research has shown that individuals with disabilities are two-and-a-half times more likely to be violently victimized than those without disabilities (Harrell, 2017). According to data received by Arizona Adult Protective Services, in 2019, of their total cases (16,513), roughly 18% were allegedly committed by the victim's caregiver. However, in cases where the victim was documented with I/DD, that percentage was as high as 40%.

Law enforcement officials and governmental support agencies almost universally acknowledge their efforts to protect these victims are hampered by limited access to reliable and accessible emergency shelters. Victims who need support do not want to report their abuser because they fear what will happen to them or where they will be forced to go. Some would rather continue to deal with the tormentor they know than potentially be placed in an institutional setting they cannot escape. That is a realistic fear, as residential options currently available through the Arizona Long Term Care System (ALTCS) are limited, which funding primarily supports placement in congregate settings. As noted by a representative from the Arizona Health Care Cost Containment System (AHCCCS), "Although we serve as a state healthcare provider, our funding is federally mandated and currently does not cover emergency shelter." Furthermore, victims who receive public assistance, like disability or medical coverage, but who are not ALTCS members generally do not have any options if they need caregiving support. They do not have the financial means necessary to secure alternative living arrangements.
Community-based options that do exist are ill-equipped to serve individuals with care needs. A U.S. Department of Justice-funded study shows glaring omissions in service to victims with disabilities from the criminal justice system and informal and formal systems of support. Part of this research focuses on shelters for domestic and sexual abuse victims. Findings show that virtually every facility lacks resources or trained staff with knowledge of serving abuse victims with I/DD or other support needs. Many individuals with severe cognitive impairments have difficulty with verbal expression. Those who experience abuse have heightened difficulty relating details of the abuse or processing the trauma in "typical" ways. They require the assistance of staff and therapists experienced in working with this population. The lack of personnel at existing emergency shelters who are trained to assist such individuals creates a situation in which they can become isolated, unsupported, and further traumatized by their ordeal.

Furthermore, potential confidentiality barriers arise when victims with I/DD utilizing community-based shelters require outside healthcare services, like personal care attendants. Some shelters will not allow outsiders due to the privacy concerns of the other victims in the shelter. As a result, victims in the I/DD community have few, if any, options to report their abuse. This can push them to remain with their abusers.

RECOMMENDATIONS

The state of Arizona has minimal regulatory or procedural impact on agencies that provide emergency shelter, especially regarding specific requirements needed to serve individuals with I/DD. However, all establishments must meet the requirements set by the Americans with Disabilities Act (ADA) when serving the community, although these requirements are inconsistently enforced. For example, ADA language includes ensuring reasonable accommodations for victims with I/DD, e.g., personal care support, ASL interpreters, etc. The state could also offer additional financial incentives to help shelters meet victims' support needs. With this additional funding, these facilities can become more inclusive to accommodate victims with I/DD. Arizona could also establish a state standards board for workers in the emergency shelter services field that requires standardized training, including education on working with individuals with intellectual or developmental disabilities, with an annual renewal requirement. AHCCCS (Arizona's state Medicaid agency) and the state Division of Developmental Disabilities (DDD) should also consider creating an expedited application process for vulnerable adult victims who are not already enrolled in services, as well as funding emergency lodging options for these victims in the community.

With these intentional efforts of inclusion, victims with disabilities will finally have more viable options to escape from abuse, which should have been afforded to them a long time ago. Freedom from abuse is a basic right we all have, regardless of disability. It is time the system that supports these victims recognizes this right.
REFERENCES


