Visionary solutions in disability and community through research, education, and service in Indiana since 1970.
From Our Director

Friends and Colleagues:

Change is inevitable, and anyone engaging with Indiana’s public systems in recent years knows this all too well. In the last two years alone, systems that educate, serve, and support Hoosiers with disabilities across the lifespan began rethinking their approaches. Some systems are already initiating major reforms. Changes underway, among others, include the integration of new approaches in early childhood services, new graduation requirements targeting skills to prepare students for the labor force and higher education, redesigning of Medicaid Home and Community-Based Services, and an expansion of less restrictive alternatives to guardianship. Common among these is a push for greater individualization, increased service flexibility and choice, and greater opportunities for people with disabilities to be included in their communities.

At the Indiana Institute on Disability and Community, we have been at the forefront of advancing and supporting many of these systems changes. With our deep expertise and knowledge about the state and the public systems, and our capacity to conduct research and evaluation, train and educate, convene and engage key stakeholders, and scale-up best practices, the Institute remains steadfastly committed to supporting the state to ensure all Hoosiers are included.

At the Institute, we also recognize that Indiana is a culturally and linguistically diverse and rich state. As such, it is imperative that we, through our day-to-day work, acknowledge and embrace this diversity. In the last year, we at the Institute committed to expand our professional and organizational capacities to more effectively include and serve diverse communities. As a partner in statewide systems change, we are also committed to using these capacities to ensure we are responsive to the varying needs of the diverse communities in which we operate.

The future is bright for people with disabilities in Indiana and the changes underway today will serve as the critical foundation. Though there is much work to do across the state, I am confident that with Indiana’s strong and effective self-advocates, families, advocates, professionals, and policymakers, people with disabilities will have greater opportunities to lead meaningful lives in the community.

I invite you to take a moment to read this annual report that provides a glimpse into our work and impact for 2018-19. To learn more in-depth about the Institute’s research to practice activities, please visit our website at www.iidc.indiana.edu.

Sincerely,

Derek Nord, Ph.D.
Director
The Indiana Institute on Disability and Community (IIDC), Indiana’s University Center for Excellence in Disabilities, has fostered a foundation of excellence for community investment in developmental disabilities since 1970. Our mission is to work with communities to welcome, value, and support the meaningful participation of people of all ages and abilities through research, education, and service.

Our work crosses the lifespan and is conducted across six centers and an Indiana University disability-focused library accessible to all state residents.

Advancing Improvement in Policy and Practices in Disability

The Indiana Institute is a bridge that connects the university to the broader community through the sharing of ideas and innovations to improve communities and lives. The Institute’s work achieves this through:

- Advocacy: Advancing effective policy and best practices by informing and educating decision makers.
- Coalition Development: Developing collaborative solutions by connecting and convening diverse community stakeholders.
- Family Engagement: Supporting families through partnerships among educators and human service providers to strengthen learning, independence, and community connections.
- Information Dissemination: Communicating and sharing information and research findings with broad constituencies over various mediums.
- Pre-Service Education and Preparation: Supporting the training of professionals to become leaders and prepare future practitioners to implement best practices in the field.
- Research, Evaluation and Policy Analysis: Conducting disciplined inquiry to test and improve policies, programs, and practices.
- Training and Technical Assistance: Building capacity to support community members and professionals in applying specific skills and best practices.

By the Numbers

The Institute’s research to practice initiatives support the advancement of applied research, evaluation, and public policy; outreach that is community oriented and state-wide; technical assistance activities that are collaborative, systematic, and results driven; and educational preparation that supports the pre-service and in-service training of professionals to become leaders in the field.

69,525 PEOPLE IMPACTED
7,738 HOURS OF TRAINING PROVIDED
144 BOARDS & COMMITTEES

RESEARCH
52 projects ranging in topics across the lifespan

SERVICE
68,515 people impacted at 563 events

SCHOLARSHIP
104 products produced by Institute professionals

EDUCATION
90 university students impacted by the Institute

Thanks to our IIDC Advisory Council members: Dawn Adams, Sylvia Brantley, David Carter, Christine Dahlberg, Frank Epperson, Shawn Fulton, Sharon Haus, Stacey Health, Leah Helvering, Mary Ann Lapenta, Kate McQueen, Cori Mitchell, Chris Myers, Cynthia Nassim, Derek Nord, Amber O’Haver, Chris Strogisullidi, Karen Vaughn.
Early Childhood

Professional Development Strategies: Best Practice Coaching

Research indicates that professional development (PD) intended to teach new skills requires intensive ongoing support – workshops alone are not sufficient. Recognizing this, the Early Childhood Center (ECC) adopted and integrated Practice-Based Coaching (PBC) strategies into its PD efforts this past year, including work with preschool educators to adopt inclusive early education practices and with individual First Steps agencies to adopt family guided home visiting practices. PBC is an evidence-based model that supports the acquisition and implementation of new practices by providing individualized and continuous coaching and support.

Following face-to-face workshops introducing new evidence-based practices, ECC staff facilitated the following components of PBC. First, early intervention and education practitioners completed a self-assessment of their knowledge and implementation of the target practices, while their coaches or mentors conducted an initial assessment by observing the practitioners during home visits or classroom activities. Next, the coach and ‘coachee’ met to jointly develop an individual PD goal and action plan specifying the actions the practitioner would take in implementing the new practices, the resources they might need, and the level of support they would receive from their coach/mentor. Afterwards, the coach and practitioner would engage in monthly observation/meeting times, in which the coach observed the practitioner’s efforts followed by a meeting to reflect, give and receive feedback, and formulate the next action plan. The cyclical nature of the PBC process ensured that the desired outcomes of coaching were regularly reviewed and revised.

The Center implemented PBC differently with the two early childhood programs. In our work with preschool educators, ECC staff were the coaches and provided in-classroom supports, including modeling targeted practices and/or providing feedback during a lesson. In our work with the First Steps agencies to support school districts interested in providing high quality special education services to children with disabilities within regular classrooms. To promote the use of the Pyramid Model, staff worked with a local Head Start program to adopt the Model’s positive behavior support strategies addressing children’s challenging behavior through traditional professional development and applying the evidence-based Practice-Based Coaching model.

One Community One Family Safety PIN

In an effort to reduce infant mortality rates and increase birth outcomes, Indiana’s State Department of Health created Safety PIN (Protecting Indiana’s Newborns), a project designed to support new and pregnant mothers with substance misuse to identify and access services. The Center for Collaborative Systems Change and ECC partnered with One Community One Family to evaluate their project supporting families in nine Southeastern counties. By the end of their project, 88 caregivers participated in care coordination, with 76% of families successfully meeting identified goals. Families had considerable needs when starting the care coordination program including transportation support, community connections, healthcare management, and substance use issues. The majority of participants showed statistically significant improvements (decreased needs) in all areas of support.

Research to Practice in Early Childhood Programs

Major gaps exist between research and practice within early childhood programs. A key function of the Early Childhood Center (ECC) is bridging those gaps through evidence-based practices. This year, the ECC promoted the implementation of two such practices: inclusive special education services and the use of the Pyramid Model. To promote inclusive special education services, Center staff worked with the Indiana Department of Education to support school districts interested in providing high quality special education services to children with disabilities within regular classrooms. To promote the use of the Pyramid Model, staff worked with a local Head Start program to adopt the Model’s positive behavior support strategies addressing children’s challenging behavior through traditional professional development and applying the evidence-based Practice-Based Coaching model.

Program Evaluation and the Early Childhood Center

Ongoing evaluation is critical to any program’s success. The Early Childhood Center (ECC) has initiated two new evaluation efforts. First, the Center is working with the Indiana Department of Education to identify and document model school districts providing high quality inclusive early education services for their preschoolers with disabilities. This effort has included analyses of child count/assessment data and interviews and classroom observations that document implementation of evidence-based inclusive practices. Second, ECC is working with the Office of Early Childhood and Out of School Care to conduct a performance evaluation documenting the implementation and quality of 15 projects funded through Indiana’s federally-funded Preschool Development Grant (PDG). ECC staff have worked with multiple PDG vendors to develop, and now implement, evaluation plans that document progress and assess the soundness of the vendors’ efforts.

Implementation Strategies and Practice-Based Coaching

Integrating Practice-Based Coaching (PBC) into the Early Childhood Center’s (ECC) professional development efforts requires frequent and individualized contact, making it difficult to implement with fidelity due to practical challenges such as long distances and classroom or home visiting logistics not always being conducive to observation. ECC staff have adopted several technologies to bridge these space and time obstacles. Rather than spending several hours in a car to conduct a PBC session, staff and participating professionals use: their smartphones and apps to record video classroom or home visiting sessions, specialized software to easily upload and evaluate the videos, and teleconferencing tools to conduct virtual coaching sessions.

Where family-community partnerships provide all families the supports they need to nurture, teach, and advocate for their children.

Safety PIN evaluation showed significant improvement in all areas of support to reduce infant mortality in 9 counties.

Additional Highlighted Projects
ISMHI expands Bring Change to Mind Clubs from 10 Indianapolis-based clubs to 100 statewide.

Evaluation of Elkhart County Systems of Care Expansion Grant

Elkhart County in Indiana was awarded a U.S. Substance Abuse and Mental Health Services Administration grant to expand the county’s System of Care (SOC) through strategic infrastructure expansion and development of services to youth 0-17 with significant mental health challenges. The Center for Collaborative Systems Change (CCSC) is conducting an external evaluation of SOC expansion and services. Using a community-based participatory approach, CCSC is responsible for the collection and reporting of all grant performance measures that capitalize on existing resources, while building capacity for sustained project evaluation. Multiple data sources are integrated into the study design to explore change over time in service outcomes, return on investment of the SOC as it relates to hospital, residential, and juvenile placements classified as “high inclusion” scored better on ELA and Math for all analyses; and of the 40 analyses, 95% of them favored high-inclusion settings for special education classrooms; students with placements classified as “high inclusion” scored better on ELA and Math for all analyses; and of the 40 analyses, 95% of them favored high-inclusion settings for special education classrooms; students with placements classified as “high inclusion” scored better on ELA and Math for all analyses; and of the 40 analyses, 95% of them favored high-inclusion settings for special education classrooms; students with placements classified as “high inclusion” scored better on ELA and Math for all analyses; and of the 40 analyses, 95% of them favored high-inclusion settings for special education classrooms; 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Day and Employment Services Outcomes System (DEOS) Report

How do working-age adults with disabilities spend their day in Indiana? What types of work are they doing? What outcomes are they achieving related to employment, specifically wages earned and hours worked? These and other questions related to people with disabilities who are receiving supports from Indiana’s adult service providers are reported in the Day and Employment Services Outcomes Systems Report (DEOS), a statistical documentation of the types of work or alternatives to work people are engaged in throughout Indiana. DEOS, compiled by the Indiana Institute on Disability and Community for the Division of Disability and Rehabilitative Services and the state’s Family and Social Services Administration, aggregated data for 10,843 individuals receiving day and employment services in 2018. Seventy-one percent of respondents engaged in employment, and DEOS outcomes indicate that there continues to be a steady increase in non-employment programs in Indiana at 33% over individual job placements at 20%.

Self-Employment

Innovation and technology have opened new doors to self-employment for people with disabilities. However, self-employment is a challenge that requires deep and ongoing technical training and support. In partnership with Indiana’s Governor’s Council for People with Disabilities and an advisory group of self-advocates, the Center on Community Living and Careers (CCLC) developed a self-employment initiative providing information and support to those with disabilities and their families as they learn about, and consider, self-employment. Introductory workshops around the state help participants determine if self-employment is an option. Additionally, more intensive two-day trainings offer new entrepreneurs and their families ongoing technical training and support to access resources as well as key community partners to help them overcome barriers to self-employment.

Additional Highlighted Projects

Improving Sexual Health Literacy and Advocacy Skills Benefits Information Network

Improving sexual health for people with disabilities, especially for those with Intellectual and Developmental Disabilities (I/DD), requires a system change approach because it necessitates significant changes in values, knowledge, and practices of stakeholders in health care, community services, and families. The Center for Health Equity (CHE), in conjunction with the Indiana Governor’s Council for People with Disabilities, aims to improve health and well-being of Hoosiers with disabilities by enhancing sexual health literacy and advocacy skills for individuals with I/DD and their partners. Through the development of evidence-based sexual health education, project outcomes will promote healthy lifestyles and illness prevention related to sexual health. Additionally, this project helps families and addresses barriers to women’s health care including access, screenings, health literacy, and sexual abuse/exploitation prevention.

Professional Development

The Center on Community Living and Careers (CCLC) works with Indiana professionals who are teaching in the classroom, counseling at an area Vocational Rehabilitation office, or coaching on a job site. Every year, hundreds of self-advocates learn regulations, strategies, and essential knowledge through CCLC trainings funded by the Indiana Department of Education or Indiana Vocational Rehabilitation Services (VR). Professional development trainings include those for teachers on how to create measurable annual IEP goals; for employment providers needing information on state and federal benefits; for VR counselors advising job seekers; for new employment specialists assisting job seekers; for VR managers and community employment service providers working to build teams; and for employment consultants seeking beyond-the-basics trainings in job development and customized employment.

IIDC Annual Report 2018-19
Aging
Living Well
Promoting independence, community integration, and access to quality non-paid and paid community supports and services is the focus of a new Indiana Institute on Disability and Community initiative. In early winter, 2019, the Indiana Division of Disability and Rehabilitative Services (DDRS) contracted with the Indiana Institute to evaluate Indiana’s current system for monitoring the safety, health, and well-being of individuals with intellectual and developmental disabilities (I/DD). The Indiana Institute’s evaluation work will provide support to guide project management and logistics for project related activities as well as content expertise in the design, implementation, and evaluation of the community monitoring approach.

The Living Well project design engages self-advocates, families, and key stakeholders to ensure full involvement in the development of practices, policies, and procedures to improve Home and Community-Based Services (HCBS). Through these collaboratives, the project aims to develop and implement an improved process for analyzing data from HCBS providers to influence practices, policies, and procedures for increasing the quality of, and access to, services and reduce risk factors for abuse, neglect, and exploitation. Living Well utilizes the LifeCourse framework, developed at the Institute for Human Development, University of Missouri – Kansas City, to increase the capacity and competency of the workforce serving those with I/DD by expanding person-centered planning principals and provides for waiver service improvements and leadership opportunities between DDRS and self-advocates, families, workforce serving those with I/DD.

In April of 2019, the Indiana legislature passed Senate Enrolled Act (SEA) 380. legislation that prioritizes alternatives to guardianship. Indiana is the eighth state to enact legislation that requires consideration of Less Restrictive Alternatives (LRA) to guardianship and recognizes Supported Decision Making Agreements. In winter, 2019, the Indiana Institute conducted a state wide survey to understand guardians’ knowledge and practices around less restrictive alternatives to guardianship and to make comparisons among family guardians and those in professional guardianship roles. A total of 227 people participated in the survey including 167 family members and 70 professionals. Comparisons between guardians who are family members and professionals found differences across a number of areas including personal and professional characteristics, behaviors, and knowledge. Nine recommendations to inform policymakers and professionals were made and include training on Less Restrictive Alternatives to guardianship, the creation of a resource and technical assistance center, and a recommendation that oversight and regulation occur ensuring the rights of individuals under guardianship and/or supported decision making agreements are maintained.

Library Resources on Disability
Hoosiers with disabilities, their families, and those who work with and for them need access to appropriate, quality information and resources. The Library at the Indiana Institute on Disability and Community offers more than 5,000 books, kits, and DVDs that are available to borrow by anyone in Indiana. Library materials cover issues impacting the lives of people with disabilities from birth through the aging process, and information is available on topics such as diagnosis, daily living, assistive technology, disability rights, education, employment, community living, early intervention, child care and a special collection of standardized speech/language pathology assessments.

Indiana Institute Library offers more than 5,000 books, kits, and DVDs that are available to borrow by anyone in Indiana.

Oral Health for Hoosiers with Disabilities
In a report by the Institute of Medicine (2011), “vulnerable and underserved populations, including people with special health care needs, have great disparities in access to quality oral health care.” “People with disabilities have greater difficulty accessing ongoing care” (Health Resources and Services Administration, 2014). The Indiana Governor’s Council for People with Disabilities contracted with the Center for Health Equity (CHE) to collect comprehensive data on the oral health needs of Hoosiers with disabilities as well as the needs of dentists in Indiana. The project employs key informant interviews and electronic surveys to identify oral health needs and experiences in dental health care access. A brief about practice and policy recommendations to improve access to dental care and oral care services will be developed.

ADA-Indiana
Since 1991, ADA-Indiana has served as a centralized, statewide resource for individuals interested in promoting the implementation of the Americans with Disabilities Act (ADA). As part of the work within the Center for Health Equity (CHE), ADA-Indiana provides support to individuals, organizations, and local communities. Through ADA-Indiana’s Coro ADA Community Grants program, four grants to local community organizations to address local ADA issues were awarded. Additional funding and support from ADA-Indiana included three workshops on the employment provisions of the ADA reaching 180 individuals; an Employment First and ADA workshop series reaching 83 participants; and two trainings focused on the expansion of transportation and mobility options for people with disabilities and older adults reaching 80 participants. Other activities included the release of over 180 requests for technical assistance by individuals and organizations and resources disseminated via conference exhibitions, a website, a monthly newsletter, and social media.

Additional Highlighted Projects
References
