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# **When A Mother Has a Disability: Dealing with Disability in the AFDC and CPS Systems**

Meeting the Needs of Women With Disabilities:  
A Blueprint for Change

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# **When A Mother Has a Disability: Dealing with Disability in the AFDC and CPS Systems**

Meeting the Needs of Women With Disabilities: A Blueprint for Change

**By Marlene F. Strong and Susan Haight-Liotta**

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# Table of Contents

I.	Introduction.....	1
	<i>The Purpose of this Booklet</i> .....	1
II.	Who Are Mothers With Disabilities? .....	1
III.	Discrimination and Mothers with Disabilities .....	2
IV.	Women with Disabilities and Work-Welfare Requirements .....	3
V.	Social Services and the ADA.....	4
	<i>Titles of the ADA</i> .....	4
	<i>What is Mandated by the ADA</i> .....	4
	<i>Services Offered by Governmental Entities</i> .....	5
VI.	Accessibility Needs Differ for Women with Different Disabilities.....	5
	<i>Physical Disabilities</i> .....	6
	<i>Hearing Disabilities</i> .....	6
	<i>Visual Disabilities</i> .....	7
	<i>Developmental Disabilities</i> .....	8
	<i>Learning Disabilities</i> .....	8
	<i>Psychiatric Disabilities</i> .....	9
	<i>Chronic Conditions Leading to Hidden Disabilities</i> .....	9
VII.	How to Make Your Program More Accessible to Mothers With Disabilities.....	10
	References.....	11
	Appendix A: Suggested Readings .....	12
	Appendix B: Resources.....	14
	About the Project .....	16

## **A Note to Women with Disabilities:**

We wrote this booklet primarily for social workers in AFDC and CPS systems. However, we also think that it will be useful for women with disabilities who want to work with staff of senior programs to help their programs to become more accessible. We encourage you to bring this booklet to the attention of service providers. We have included a chapter on the Americans with Disabilities Act (as well as organizations specializing in the ADA in the "Resources" section), which you may find particularly useful in learning about your rights to accommodations, and helping service agencies understand their responsibilities under the ADA.

## I. Introduction

### ***The Purpose of this Booklet***

Women with disabilities make up an unknown proportion of the population served by the AFDC and CPS systems. However, it is estimated that a substantial percentage may have physical or learning disabilities, and many others are likely to have disabilities that have not been studied. These mothers may have difficulties with the complicated requirements of the systems, and often face discrimination based on misperceptions held by many social workers that they cannot be good mothers. This booklet gives an overview of the requirements of the Americans with Disabilities Act and offers suggestions for accommodating women with different kinds of disabilities. The disabilities discussed include: physical, hearing, visual, developmental, learning, psychiatric, and hidden disabilities. It lists suggested readings and resource numbers to obtain further information.

There are no sure estimates of the number of mothers with disabilities who are clients of the public welfare and child welfare systems, the Aid to Families with Dependent Children (AFDC) and Child Protective Services (CPS) systems. However, some experts suggest that as many as 40% of women on welfare have undiagnosed learning disabilities,[1] and about 17% are thought to have physical or sensory disabilities.[2] Others have cognitive impairments (such as mental retardation) or psychiatric disabilities. Informal stories abound about women with disabilities who have had their children removed from the home due to alleged abuse or neglect. Social workers need to understand the needs of these women in order to be able to work effectively with them.

This booklet is an overview of how social workers can help women with disabilities when they encounter them in the AFDC and CPS systems. It describes how mothers with disabilities face barriers to receiving effective services, gives an overview of the requirements of the Americans with Disabilities Act (ADA) obligations of social service systems, and describes the accessibility needs of women with various disabilities.

## II. Who Are Mothers With Disabilities?

Mothers with disabilities are very diverse. They might have physical, psychiatric, sensory, cognitive, or learning disabilities. Some may be women of color; some may be lesbians. They come from all economic classes. Some women have been disabled since birth, and others acquired their disabilities later in life some may have even become disabled after they had children. Their children may be their own biological children, stepchildren, or adopted children. In other words, the mothers with disabilities you may serve are as diverse as the other mothers in the child welfare system.

Many disabling conditions are not visible to the casual observer. Cognitive, psychiatric, and learning disabilities are usually not visible, and some physically disabling conditions (e.g., AIDS, epilepsy) may remain unknown unless the mother discloses them to you. Therefore, you may already be working with mothers with disabilities and be unaware of it. Raising your awareness about the needs of mothers with all kinds of disabilities will make your services more accessible, even to those who might not disclose their disabilities.

There are not very good statistics about the number of women with disabilities who have children. However, one estimate is that there are at least 8.1 million families with children in which one or both parents has a disability or work limitation, comprising about 10.9% of all American families and families were defined as intact marriages, leaving out the many single mothers and divorced parents with disabilities.[3] Another study found that 1.25 million married couples with children under six included at least one parent with a work disability, and that in over half a million cases the disability was considered severe. An additional half a million single parents with children under six were estimated to have a work disability.[4] In a recent survey of women with disabilities that we conducted, about 40% of the women reported that they had children.[5]

What these diverse women have in common is that they have chosen to be mothers and love their children. They seek to care for them as best as they can, just like other mothers. They usually put the needs of their children first, even if it means that they must suffer exclusion or insensitive remarks. Mothers with disabilities are mothers first.

### **III. Discrimination and Mothers with Disabilities**

In general, people tend to be uncomfortable with people unlike themselves. While people with disabilities are more visible than they were 20 years ago, they still tend to be shunned and stereotyped. Women with disabilities often face double discrimination, because they belong to two undervalued groups. Women of color with disabilities experience even more prejudice.

Some of their problems are gender-related and shared by non-disabled women; some problems are disability-related and are shared by men with disabilities. But many problems and needs are simply unique to them. Women with disabilities are often ill-served by mainstream social service systems that assist other women, because the workers in those systems do not understand their needs.

Mothers with physical and sensory disabilities often face discrimination because non-disabled people cannot imagine how they perform common tasks and assume that they are inferior parents. In fact, mothers and their children adapt quite well, especially when the mother has the support and advice of others who have faced similar issues. Women with disabilities have usually learned their own independent living skills before they become parents, and they extend these skills to mothering. A mother with a physical impairment may need adaptive equipment to help her lift and carry her baby, who quickly learns to climb onto her wheelchair. Mothers who have hearing impairments often have special sensors that blink the lights when their babies cry. A blind mother teaches her children that they must respond verbally to her requests.

Without assistance mothers with some kinds of disabilities may have trouble parenting. This is particularly true for mothers with cognitive impairments like mental retardation, and mothers with severe psychiatric disabilities such as schizophrenia, who may need social support and education to help them raise their children. It is important to remember that women with disabilities want to be good mothers, just like other women, and that there may be services available to assist these mothers. If your child welfare agency does not offer such services, there may be a disability service organization in your locality that does.

There are numerous beliefs that contribute to people's prejudice against mothers with disabilities. It is important for you (and your staff) to examine your own attitudes to see whether you believe some of them. More common beliefs include:

- Disabled women are extraordinarily dependent on other people. In fact, most disabled people lead independent, productive lives. Physically disabled mothers may need personal assistants to help with some activities (e.g., bathing, dressing), but they independently direct these assistants.
- Disability is somehow contagious or inherited. This is a remnant of the belief that people with disabilities are sick or unhealthy. People then wonder why a person with a disability would want to have a child. In fact, there are very few disabling conditions that are inherited, and none are contagious. Most mothers with disabilities are no more likely to have disabled children than other mothers.
- Being disabled is such a depressing and dreary existence that a disabled mother should not bring a child into that world. Few disabled people dwell on their disability. They are involved in working, homemaking, and other activities that non-disabled people enjoy. Disability is just one aspect of the person, who has the same desire to love and raise children as non-disabled people.
- Physical mobility or being able to see or hear is essential to child rearing. Because disabled women have not been portrayed in the mother role, it is difficult for some people to understand how a child can be reared by someone with mobility restrictions. In fact, with adaptive equipment, many physically disabled mothers can pick up, carry, dress, diaper, and bathe their children. Women with other disabilities may need other adaptive equipment or support people to help them. However, these things are assistive only the mother remains the mother.

Prejudice and discrimination are barriers to accessibility for mothers with disabilities. A social worker's assumption that a woman with a disability cannot be a good mother can prevent her from obtaining AFDC benefits or cooperating with a CPS worker. We believe that if you remain open to the idea that mothers with disabilities are similar to other mothers, you will better serve the women who need your services.

#### **IV. Women with Disabilities and Work-Welfare Requirements**

Women with disabilities who are on welfare may face a dilemma with respect to the work-welfare requirements now in place in most states, and with the emerging requirements under the Personal Responsibility and Work Opportunity Reconciliation Act. Their disabilities may prevent them from being able to participate in standard educational and training services, either because the services are not physically accessible, or because the women have cognitive or learning disabilities that prevent them from successfully completing training programs. On the other hand, their disabilities may not be severe enough to make them eligible for vocational rehabilitation services, the service system that serves persons with disabilities, because many state rehabilitation systems now have a mandate to serve only those with severe disabilities. The ADA requires that educational and training services be made accessible to persons with

disabilities (see section below), but many schools and private training institutes lag greatly in implementing accommodations. As a social worker, the more you understand about the needs of women with disabilities, the more you can advocate to help them obtain the accessible services to which they are entitled.

## **V. Social Services and the ADA**

The Americans with Disabilities Act (ADA) is civil rights legislation that was signed into law July 26, 1990. It is based on the Civil Rights Act of 1964 and the Rehabilitation Act of 1972 (commonly referred to as Section 504). It provides protection to persons with disabilities. While there have been previous laws that sought to increase access for persons with disabilities, the ADA is the most comprehensive law to date.

The ADA has a three-prong definition of who is a person with a disability. The first prong protects those with a physical or mental condition that substantially limits a major life activity (like walking, seeing, hearing, learning, breathing, caring for yourself, etc.). The second prong covers those with a record of having such a condition (such as persons who have had cancer that has gone into remission or a history of a mental disability). The third prong offers protection to those regarded as having such a condition, even if it doesn't limit a major life activity (such as persons with facial disfigurements).

The ADA also protects persons based on association with persons with disability. For instance, if a woman were denied an employment opportunity because her brother or sister had a disability and the employer felt that would mean she would require additional leave time, or if a business refused to serve someone because she volunteered at a AIDS hospice center, she would be protected under the ADA.

### ***Titles of the ADA***

Laws have titles like books have chapters. Title I of the ADA law offers protection related to employment. Title II outlines the requirements for state and local governments to ensure their services do not discriminate based on disability. Title III sets forth the requirements private businesses must follow to make certain they not discriminate based on disability in the sale of goods or services to the public. The ADA covers transportation and requires transportation services be accessible and available to persons with disabilities. If the transportation is offered by a government entity the mandate comes under Title II, and if the transportation is offered by a private business, then the obligation is through Title III.

### ***What is Mandated by the ADA***

Being accessible to persons with disabilities means there cannot be eligibility criteria that have the effect of barring or limiting the availability of programs to persons because of disability. It also means there can be no communication barriers so, for instance, spoken information must be made available in another format to persons with hearing impairments; or printed information must be made available in another format to persons with vision or cognitive impairments.

## **Services Offered by Governmental Entities**

AFDC and CPS programs are covered under Title II of the ADA. When services are offered by a local governmental agency, there must be an assurance of "program access." That means that a service must be readily accessible to and usable by persons with disabilities when viewed in its entirety. When viewed in its entirety means taking the whole program into account. Suppose a county had AFDC intake offices in six facilities, and only three of the facilities were accessible. Would the county have to modify the other three facilities to become accessible? Perhaps not. If the facilities were situated so residents didn't have to travel a greater distance to get to an accessible site, and if identical services were offered in each site, the county may not have to make the other facilities accessible because when viewed in its entirety, the AFDC program was accessible. If different services were offered in some of the inaccessible facilities, or they were not equally distant, then the county might have to make more or all of the facilities accessible to persons with disabilities.

A government agency need not make architectural changes to make services accessible. Depending on the nature of the service, it could be moved to a location that is accessible when accessibility is needed, or in some cases it could be offered as a home service (as long as it remains equal). Offering parenting instruction to CPS clients in their homes may not be equal to allowing them to participate in an inaccessible group program, because the interaction with the other parents is an important benefit of participating in the program. In such a case, the program would probably have to be offered in an accessible setting to be equal.

## **VI. Accessibility Needs Differ for Women with Different Disabilities**

Becoming accessible to women with disabilities is not merely a matter of removing architectural barriers, although that is usually the first thing that people think of when they hear the word "accessible." Physical access is important for women with mobility impairments, but accessibility needs differ for women with different disabilities. Very often accommodations do not have to be expensive or complex it may mean taking the time to do things a little differently. Below, we lay out some general ideas based on various broad disability groupings however, these are rough guidelines only. It is important to remember that women with disabilities are diverse and have diverse needs. Even two women with the same disability (e.g., blindness) may differ in what they need. In order to make your services more accessible for a particular woman, you are required to take her request for particular accommodations into consideration.

While there are many ways to categorize disability, we will discuss the following broad categories of disabilities: physical disabilities, hearing disabilities, visual disabilities, developmental disabilities, learning disabilities, psychiatric disabilities, and hidden disabilities (including chronic health conditions). Some mothers may have more than one disability. We will give a general overview of each of these broad categories of disability, as well as some suggestions for accommodations that a woman may require in order to use your services.

## **Physical Disabilities**

The most common types of physical disabilities are those commonly referred to as "mobility impairments," where moving, walking, grasping, and physical coordination may be affected.

There are about 12.4 million people who have mobility impairments in the U.S.[6] Some mothers may use electric or manual wheelchairs, others may use canes or other mobility aids, and others may not use any. Examples of conditions that cause physical disabilities include: cerebral palsy, spinal cord injuries, muscular dystrophy, multiple sclerosis, and spina bifida. Physical disabilities can occur in utero, at birth, or as the result of a chronic health condition or accident. To use your services, a mother with a physical disability may require wheelchair access to your building, accessible restrooms and transportation, and personal assistance services to participate in activities such as parent groups. A speech impairment may accompany a physical disability such as cerebral palsy. Some women may use a communication board, while others may have a high-tech device such as a computerized voice synthesizer. However, most will use their own voice, but have speech patterns that are difficult to understand at first. Respect the mode of communication used by each woman she knows that you will need to get used to her form of communication. Ask her how you can best communicate with her. If you do not understand what is being said, ask the woman to repeat. Never pretend that you understood what she said when you didn't.

In addition to mobility and speech impairments, physical disabilities also include chronic health conditions that may be associated with fatigue, the need for medication, and weakness in various limbs. Others include disfiguring conditions that do not interfere with physical functioning but cause problems in social relations. Finally, physical disabilities may include the inability to use one or both hands or arms. While physical disabilities may cause a mother to need more assistance with child rearing tasks than non-disabled mothers, they do not affect her desire to follow the rules of the AFDC system or participate in activities mandated by CPS workers. With accommodation, her participation will be just as great as among non-disabled mothers.

## **Hearing Disabilities**

Hearing disabilities include partial hearing loss and deafness. Hearing impairments, including deafness and being "hard of hearing" limit the activities of 1.2 million non-institutionalized individuals in the U.S.[7] Some types of hearing loss are hereditary, but ninety percent of deaf children have hearing parents. Deafness and hearing loss can be present at birth, or acquired later through illnesses such as meningitis. Women with hearing disabilities will have different proficiencies at speaking, depending on when the disability occurred. Those who were deaf at birth generally have speech that is more difficult to understand than those who became deaf later in life. Also, the type of communication method the woman uses will differ depending on where and when she was educated: she may use the Oral-Aural method, which uses amplification and residual hearing (through the use of hearing aids) and oral speech; Signed English, which uses a manual method of translating spoken English; or American Sign Language (ASL), which is a visual language not based on English. If a deaf woman was born into a family with deaf parents or other family members, she probably learned ASL as her first language, and English (or another language of her culture) may be her second language.

When you as a social worker or AFDC intake worker do not know ASL or Signed English, it is important to establish another way to communicate with the hearing impaired or deaf mother. It is commonly believed that many deaf people communicate by lip reading, but in fact lip reading is not very accurate or an effective way of communicating. Even experienced lip readers accurately understand about only 30% of what is being said.[8] Under the ADA, a business or government agency has a duty to provide effective communication. For drop-ins or simple exchanges, writing notes back and forth may provide effective communication. But if the information exchange is complex in nature, involves several people, or will be a long conversation, then it will probably require another form of communication. Some people with hearing disabilities may request an ASL interpreter or real-time captioning. It is very important that you communicate with the woman to find out her preference in communicating in person.

Many mothers with hearing disabilities will use a Telecommunication Device for the Deaf (TDD) to communicate over the phone. TDDs are like small typewriters that translate typed characters into phone signals. In order to use a TDD, both parties must have the device, or a relay service can be used. TDDs are very easy to learn to use. They do not require a different phone line; the phone is simply placed in a special cradle on top of the TDD. Conversations are then typed back and forth. If you are serving a deaf mother, this is often the best way to communicate with her. Under the ADA, public agencies are required to have TDD access; therefore, you and your staff should make sure you are trained in how to use the TDD.

## **Visual Disabilities**

About 4.3 million non-institutionalized Americans have severe visual disabilities; 12% of them are blind in both eyes.[9] Some women who are legally blind (defined as having 20/200 vision or less in both eyes, not correctable with glasses) may have some ability to see shapes, shadows and degrees of light and darkness. Visual impairment and blindness may be caused by glaucoma, detached retina, or traumatic eye injuries. Some women may have been born with a visual impairment, others may have become visually impaired as a result of an injury or illness. Assistive devices used by women with visual disabilities include white canes, guide dogs, and glasses. Some women may also use very strong hand magnifying lenses or closed circuit TV to make print large enough to read. Others may use "talking" calculators and watches, computers, Braille, audio tapes, or Opticons, a device that electronically reads printed material and displays touchable raised letters that can be read.

A woman who is visually impaired and uses public transportation will need services in a site near public transportation. Initially, she will need very clearly described directions to get to your office on her own. She may also require being shown around (oriented to) your building. Ask the mother to tell and show you how she would prefer to be oriented to the environment. Written materials will need to be adapted to a mode which works for her e.g., in large print, tapes, Braille or computer disk, and she may want different kinds of materials in different formats. The mother may need you to help her fill out forms. The best approach is not to make assumptions about what she can or cannot see and what kind of help she may or may not need.

## Developmental Disabilities

The term developmental disability refers to a disability that occurs in utero, at birth, or before the age of 21 that affects or delays the individual's development. In common usage, developmental disability is a term that is often used to refer specifically to persons with mental retardation or other conditions that impair cognitive functioning to the degree that they affect activities of daily living.[10] Developmental disabilities range from mild to severe.

People with developmental disabilities are particularly stigmatized in our society, which looks down upon individuals with below average intelligence. There are many negative and false stereotypes about people with developmental disabilities, including that they are to be treated like children regardless of their age, and that they cannot hold a job. They are often the target of very cruel treatment.

Mothers with developmental disabilities will typically function at a lower level of understanding than other women their age. They may have trouble with large muscle coordination or fine motor skills and have chronic health conditions. Some mothers with developmental disabilities may live independently, and others live with their families or in group homes. They may have trouble understanding the changing needs of their children as they grow, and therefore usually need assistance in parenting through a specialized service system that understands their unique needs. Every state has an agency that assists people with developmental disabilities. Accommodation needs for developmentally disabled mothers will vary. They can include taking more time to explain things, and giving very clear step-by-step instructions on a one-to-one basis. Written materials may need to be adapted to her level of comprehension and/or put on audio tape. The AFDC eligibility process is a very complicated one, and these mothers may need you to explain it more than once. They will most likely need help filling out forms and understanding their responsibilities for participating in periodic reviews. When mothers with developmental disabilities are court-ordered to undergo counseling as a result of child abuse or neglect, it is important to make sure that the referral agency understands the mother's disability-related needs. As with all disabilities, you should find out what each individual mother needs to be able to participate in your services.

## Learning Disabilities

Learning disabilities affect between 5-10% of the population, and may range from mild to severe.[11] They can affect receiving and processing information, reading, writing, reasoning, or mathematical skills. Persons with learning disabilities have average or above average intelligence they are not mentally retarded. There are many different kinds of learning disabilities, each of which can result in the need for you to present information in a different way or to allow a little extra time for the mother to understand information. For example, a woman may have difficulty interpreting facial expressions, gestures, and tone of voice, or she may have trouble understanding directions or written materials.

Chances are that some of the mothers you already serve may have learning disabilities, some of which may be undiagnosed, but you may not realize it unless it is revealed by the mother or deduced through repeated misunderstandings of written or verbal information. Because people with learning disabilities are at high risk of dropping out of school and being unable to support

themselves, many turn to AFDC for support. It is estimated that as many as 40% of women on welfare have undiagnosed learning disabilities.[12]

A mother with a learning disability may require an alternative form of receiving written information; for example, she may favor materials written in large print or put on audio tape. She may need you to repeat instructions, to give her notices in two forms (e.g., to read it aloud while she looks at the printed notice), or make written communications more accessible by using lots of white space and different colors or typefaces to set off different information. Women with learning disabilities may have a hard time keeping track of appointments without frequent reminders, and will need checklists to help them remember all the steps associated with applying for benefits or the duties of her reunification plan. When the mother knows that she has a learning disability, she usually knows what she needs in the way of accommodation when asked.

## **Psychiatric Disabilities**

Women with psychiatric disabilities can vary considerably both in terms of the nature and the severity of their disabilities. Women may have problems in emotional functioning either as a transitory reaction to a stressor in their lives, or as a long-term consequence of psychiatric disorders such as bipolar disorder (also known as manic-depressive disorder), depression, or schizophrenia. Women with the latter kinds of disorders may exhibit behaviors that are not considered to be appropriate, or have problems building or maintaining interpersonal relationships. A commonly-held belief about people with psychiatric disabilities is that they are dangerous and commit more crimes than the general population, which is not true. A woman with an emotional disability may receive mental health counseling, medication, and additional support and assistance from specialized personnel to help her maintain a relationship with her children.

Psychiatric disabilities, like learning disabilities (see above) and others described below, are hidden disabilities, and may not be apparent unless there is a problematic interaction or the mother discloses her disability. Women with this kind of disability may be impulsive, or quite shy; they may appear very different at different times. Child welfare workers who are aware of the possibility that a mother has a psychiatric disability can assist the mother by remaining calm, providing structured interactions, and talking with the mother one-on-one. Mothers with psychiatric disorders who are accused of abusing or neglecting their children usually need specialized assistance beyond parenting classes and counseling in order to regain custody. They may need referrals to mental health departments for medication management and outpatient treatment suited to their needs. Mothers with psychiatric disabilities who receive appropriate treatment and support can successfully parent their children.

## **Chronic Conditions Leading to Hidden Disabilities**

Women with many disabling health conditions do not appear to be disabled the way a woman who uses a wheelchair does. Nonetheless, they have conditions that may affect their functioning, such as epilepsy, diabetes, head injury, asthma, chronic fatigue syndrome, multiple chemical sensitivity or environmental illness, HIV, attention deficit disorder (ADD), or heart disease. Women may not tell you about their chronic health conditions or want them disclosed to anyone else. You should respect their right to confidentiality and ask the mother to tell you about accommodations she might need, if any, to enable her to participate in your services. For

instance, a mother with multiple chemical sensitivity may ask you to request that people not wear scented products to the parenting group. A mother with ADD may need reminders about when it is time to come for a counseling appointment or eligibility review.

There are national organizations that can provide more in-depth information about different kinds of disabilities and chronic health conditions; most can be contacted through your local Independent Living Center. Learning more about different disabilities will help build understanding among you and your staff about the needs of disabled women. Greater tolerance of differences brought about by disabilities is the first step in accommodation and full inclusion of mothers with disabilities in your programs.

## **VII. How to Make Your Program More Accessible to Mothers With Disabilities**

Here are some suggestions to make your program accessible to disabled mothers. Working with local consultants is one of the best ways to make sure that you meet the needs of women in your area. You can refer to the "Resources" section at the end of the booklet for organizations that will put you in touch with women in your locality.

-- Challenge your own attitudes and assumptions about disabled mothers. This will be the most important effort you make to make your service accessible to women with disabilities. Reading this booklet is the first step. Reading books and watching videos by and about disabled mothers can also help. (See the "Resources" section at the end of the booklet.) Locate women with disabilities who can work with you and your staff to explore attitudes and fears about serving mothers with disabilities, respond to your questions, and problem-solve solutions to difficult inclusion situations you may encounter. Remember, your willingness is the first and most important step you will take when attempting to serve mothers with disabilities.

-- Include women with disabilities on your Advisory Committees, to assist your program on an ongoing basis with accessibility issues.

-- Get accurate information on physical and program access. It is important that social services providers get correct information about accessibility, which is now required by law under the ADA. Accurate information can save you a lot of money and effort. Most accommodations we've already discussed will have no costs attached. A small task force can easily review forms and procedures to see how they might be confusing to women with learning or cognitive disabilities, and make suggestions for revisions. Making forms available in Braille or large print is essential for women with visual impairments. Training all staff in using a TDD will make services accessible to deaf women. Many government offices already have physical accessibility, but it is essential to investigate agencies to which you refer mothers for parenting education classes or counseling, in order to ensure that they are accessible as well.

-- Become familiar with disability laws and learn about disability resources in your community. We have included basic information about the ADA and how social services programs are covered by this federal law. However, this overview is not meant to be a comprehensive overview of the ADA. You can get further information by calling the numbers in the "Resources" section. Also, local agencies can help you find creative solutions to your dilemmas and serve as resources for mothers in your program who may not be well informed.

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## Appendix A: Suggested Readings

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## Video

"Mothers with Disabilities: An Introduction to the Issues" This is a 16-minute video about mothers with physical disabilities; six mothers are interviewed about their experiences. It is distributed by the Health Resource Center for Women with Disabilities at the Rehabilitation Institute of Chicago (312-908-7997).

## Newsletter

"Parenting with a Disability" This newsletter, which offers tips on parenting issues and adaptive equipment, is published by Through the Looking Glass, a community non-profit agency that offers clinical and support services to families in which one or more members has a disability, and runs the Research and Training Center on Families of Adults with Disabilities in conjunction with BPA and the World Institute on Disability. To get on the mailing list for the newsletter, which is published three times a year, contact TLG at: 2198 Sixth St., Suite 100, Berkeley, CA 94710. Telephone: (800) 644-2666 (voice/TDD) or (510) 848-1112. Fax: (510) 848-4445.

## **Appendix B: Resources**

### **Accessibility Information and Resources**

Disability and Business Technical Assistance Centers To assist businesses, governmental entities and persons with disabilities understand how the ADA applies to specific situations, the National Institute for Disability Rehabilitation and Research (NIDRR) funds ten regional technical assistance programs. These are called Disability and Business Technical Assistance Centers (DBTACs). For additional information on the Americans with Disabilities Act, call (800) 949-4232. This number will reach the DBTAC in your region.

#### **Disability Rights Education and Defense Fund, Inc. (DREDF)**

2112 6th Street, Berkeley, CA 94710  
(510) 644-2555 (voice)  
(510) 644-2626 (TDD)

DREDF is a national law and policy center dedicated to furthering the civil rights of people with disabilities. Offers training, information and legal advocacy to parents of children with disabilities to help them secure appropriate educational and other services. Offers information and referrals by phone.

#### **Americans With Disabilities Information Hot Line**

(800) 466-4232 (voice)  
(800) 644-2555 (TDD)

DREDF operates an ADA information hot line funded by the Department of Justice. It provides information to persons with disabilities, businesses, state and local government and general public programs to help them understand their rights and responsibilities under Titles II and III of the ADA.

### **Training Resources**

#### **Consultants/Public and Professional Training**

Unfortunately, national organizations of disabled women consultants do not presently exist. However, the National Council on Independent Living (NCIL) and national organizations representing specific disabilities may be a referral source for these consultants. Most provide educational information and public and professional training regarding various disabilities issues.

#### **National Council on Independent Living (NCIL)**

2111 Wilson Blvd. Suite 405  
Arlington, VA 22201  
(703) 525-3406 (voice)  
(703) 525-3407 (TDD)

NCIL is the national membership association of local Independent Living Centers. NCIL is the only cross-disability grassroots national organization run by and for people with disabilities. Contact NCIL to find out the location of the nearest Independent Living Center. Because

Independent Living Centers are primarily run by persons with disabilities, it is most probable that they will be able to either accommodate requests for disabled women trainers or refer staff to independent consultants. Independent Living programs are an excellent resource for locating members for boards of directors, advisory groups, parent groups, disabled job applicants, assistance with outreach and for general information and referrals about other disability related organizations and programs throughout the country.

## About the Project

"Meeting the Needs of Women with Disabilities: A Blueprint for Change" was designed to promote increased access for women and girls with disabilities to services that meet their needs. We focused on access to nine different mainstream (non-disability) service systems that provide services to women and girls and have barriers to effectively serving women and girls with disabilities: Adoption, AFDC Benefits and Services, Aging Services, Child Care, Child Protective Services, Reproductive Health Services, Substance Abuse Services, Violence and Abuse Services and Youth Programs. Since this was a knowledge dissemination project, we conducted extensive reviews of the literature, consulted with knowledgeable women with disabilities in our areas of study, and interviewed program staff and administrators about barriers to access and levels of disability awareness.

As part of our grant activities, we have developed materials designed to promote accessibility and inclusion about these service systems for women with disabilities, mainstream program operators, and policy makers. We also conducted a national survey of women with disabilities to identify which of these service systems have the greatest priorities for further research and dissemination efforts.

The other titles available from this project include:

- Including Girls with Disabilities in Youth Programs
- Including Older Women with Disabilities in Senior Programs
- You May Be Able to Adopt! A Guide to the Adoption Option for Women with Disabilities and Their Partners
- Multiplying Choices: Improving Access to Sexual and Reproductive Services for Women with Disabilities
- Fostering Recovery for Women with Disabilities: Addressing Barriers to Alcohol and Other Drug Services
- When a Mother Has a Disability: Dealing with Disability in the AFDC and CPS Systems
- Caretaker Abuse and Domestic Violence in the Lives of Women with Disabilities
- Open Minds, Open Doors: Technical Assistance Manual to Assist Domestic Violence Service
- Providers Become Physically and Attitudinally Accessible to Women with Disabilities [produced by the National Coalition Against Domestic Violence]
- Priorities for Future Research: Results of Berkeley Policy Associates' Delphi Survey of Disabled Women
- Information about Women with Disabilities in the United States
- Meeting the Needs of Women with Disabilities: A Blueprint for Change Bibliography

*Please contact Berkeley Policy Associates for more information.*