



Disability Rights
FLORIDA



Photograph by
Chris Mendicino

PREPARING FOR YOUR SUCCESSFUL TRANSITION TO ADULTHOOD

A toolkit for Florida youth with disabilities

Dedication



Painting by
Luz “Lucy” Aponte

Luz “Lucy” Aponte was born with intellectual, developmental and significant physical disabilities and passed away at the age of 39. In her lifetime, she helped transform how people with disabilities are perceived and was in the vanguard of the battle to provide transition-age youth with disabilities appropriate services to support their success as adults.

Disability Rights Florida represented Lucy in a due process proceeding in connection with the failure of a school board to provide appropriate services for a successful transition to independent living and employment. *L.E.A. v. School Board* recognized the use of the discovery profile as an alternative to a traditional vocational evaluation in Florida. Eventually, a transition Individualized Education Program (IEP) included a goal to establish a retail business selling various products featuring Lucy’s abstract artwork.

Supported employment makes it possible for all people, especially those once considered too disabled, to set and achieve their own employment aspirations. Lucy’s self-employment goal required supports and ongoing assistance in the day-to-day running of the business. Time-limited support services could be provided by the Division of Vocational Rehabilitation (DVR). Extended services or ongoing support could be provided under the Florida Developmental Services Waiver. This usual two-phase model does not typically work with self-employment, though. So, Lucy, together with Disability Rights Florida, advocated that DVR consult with Griffin-Hammis Associates (GHA), a recognized pioneer in the field of self-employment services for people with disabilities, to create a Policy on Self-Employment and Small Business.

Lucy’s innovative use of services and supports was then a model for the Florida Freedom Initiative, a demonstration project based on the Tom Nerney, of the Center for Self-Determination, article “The System of the Future.” Working from a self-determination paradigm, the Florida Freedom Initiative provided participants the opportunity to earn income and save for targeted goals—including homeownership, postsecondary education, transportation, self-employment and assistive technology—while maintaining their Supplemental Security Income and Medicaid benefits.

Thanks to Lucy and the tireless advocacy on her behalf, transition services in Florida fundamentally shifted toward supporting self-determination in transitioning to independent living and employment. We dedicate this guide in her honor and commit to carrying on her legacy for future generations of people with disabilities to pursue their dreams, whatever they may be.

Preparing for the Journey

For hundreds of years cultures around the world have held “rites of passage” rituals and “coming of age” ceremonies to mark the transition from youth to adulthood. In more modern times, preparation through education and development of employment skills have also become critical elements in this important phase of life.

Federal laws recognize the importance of preparing young people for the new roles and responsibilities of adulthood. The goal of this guide is to help you unlock your potential for a great future by explaining your rights and opportunities under these laws. In this context, it addresses a range of issues—from finances to working to voting and everything in between.

In Florida, transition officially starts at the age of 12 through the delivery of transition services. These services encompass a coordinated set of activities designed to help a child with a disability successfully move from school to post-secondary activities, including higher education, employment, independent living and community participation.

Every student with a disability is entitled to transition assistance. What that looks like is based on the unique needs of you, the student. Whatever those needs may be, we are here to help. The mission of Disability Rights Florida is to advocate, educate, investigate and litigate to protect and advance the rights, dignity, equal opportunities, self-determination and choices for all people with disabilities. **This includes you.**

This is an important time in your life. You will be faced with all types of decisions, each very important in laying a strong foundation for your future. Knowing your rights is a critical first step. As you navigate your path forward, keep your expectations high. Only you can define your goals for the future, but help is always available—and a key part of adulthood is knowing when and how to ask for it. If you have questions or require assistance at any time, please contact us at 800-342-0832 or www.disabilityrightsflorida.org.

It is our sincerest hope that this guide will assist you on your journey to adulthood.

Sincerely,

Peter Sleasman
Executive Director
Disability Rights Florida

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We hope this toolkit will assist you in your journey.

Education Transition Planning

Transition to adulthood begins in school, and effective planning is the key to success. To ensure a smooth transition from school to higher education or employment, it's important to understand the different types of plans designed to assist in transition planning, who is involved in developing them, the different aspects they cover and how to self-advocate for your needs.

SCHOOL-BASED TRANSITION PLANS

Generally, four official types of school-based plans have been created under federal law to protect young people with disabilities in education and employment. Depending on which laws cover them and what stage of transition they're in, young people with disabilities will have one or more (probably at least two) of these four types of plans, known by the acronyms or abbreviations below:

- 1 IEP
- 2 504 Plan
- 3 TIEP
- 4 IPE

Individualized Education Program (or Plan) (IEP)

The Individual Educational Program (or Plan) (IEP) is a detailed, legal document that indicates the supports and services a student with a disability will receive in order to be provided a free and appropriate public education.

The Individuals with Disabilities Education Act (IDEA) requires that all the students it covers—that is, students in special education—have IEPs, which are written by teams that vary in composition according to the needs of each student. The IEP team is required to meet the following composition of Florida Rule 6A-6.03028 by including at least one general education teacher if the student is or may be participating in the regular education environment, at least one special education teacher, one

representative of the school district (local education agency (LEA)), an individual who can interpret the instructional implications of evaluation results, and other individuals invited by the parent or the school district who may have special knowledge of the student. IEPs are updated at least every year. If you feel your plan needs to be changed or clarified you can request an interim review.

Also, in this rule an IEP team member may be excused if the parent of a student with a disability and the school district agree in writing that the member's attendance is not necessary because their area of the curriculum or related services is not being modified or discussed in the meeting. Any such member of the IEP team may also be excused from attending an IEP team meeting, in whole or in part, when the meeting involves a modification to or discussion of the member's area of the curriculum or related services, if the parent and the school district consent, in writing, to the excusal and the member submits, in writing to the parent and the IEP team, input into the development of the IEP prior to the meeting.

Students between the ages of 3 and 22 are evaluated by the appropriate professionals and are determined by a multidisciplinary team to be eligible for an IEP because of one or more of the 13 specific categories of disability. These are:

- Autism Spectrum Disorder.
- Deaf-Blindness.
- Deafness.

- Emotional Disturbance.
- Hearing Impairment.
- Intellectual Disability.
- Multiple Disabilities.
- Orthopedic Impairment.
- Other Health Impairment.
- Specific Learning Disability.
- Speech or Language Impairment.
- Traumatic Brain Injury.
- Visual Impairment, Including Blindness.

Those who are covered by IDEA are also eligible for assistance under Section 504 of the Rehabilitation Act, but during the person’s school years, the requirements of IDEA are more specific. To be sure a child receives the services they need, IDEA spells out a concrete and specific process. That process guarantees that useful steps will be taken to give the child equal access to an education.

504 Plans

Students with disabilities who are not covered by IDEA—that is, students who need accommodations in education but do not need specially designed instruction—have a plan similar in purpose to the IEP. Because it comes from Section 504 of the Rehabilitation Act, it is most often called a “504 Plan.”

A 504 Plan, like an IEP, specifies the steps to be taken to give the young person an equal chance to be educated. It describes the kind of education that is right for them and the accommodations to make it possible. Section 504 of the Rehabilitation Act covers people who have a physical or mental disability that substantially limits one of the legally defined major life activities (among them walking, seeing, hearing, speaking, breathing, learning, working, caring for oneself or performing manual tasks) but do not need the special instruction and related services that are covered by IDEA.

The 504 Plan can and should be handled as carefully and thoroughly as the law requires for an IEP. The person with a disability, their parents or surrogate parent, and an advocate have a right to insist on a thorough process and all necessary services and benefits for which the student is eligible.

Transition Individual Educational Plan (TIEP)

By age 16 or younger, IDEA requires a student’s IEP team to address transition services the student needs to achieve their post-school desired outcomes. When transition services are addressed, the IEP becomes a Transition Individual Educational Plan (TIEP). Florida law requires that transition planning begin at age 12 or in the seventh grade, whichever comes first. Florida law also requires the TIEP to be implemented by the first day of the first year the student enters high school. Students who have 504 Plans are not legally required to have separate transition plans, but they are entitled to transition planning as part of their 504 Plans.

Individualized Plan for Employment (IPE)

The student who attends school with an IEP or a 504 Plan is likely to leave school with a new kind of plan—an Individualized Plan for Employment (IPE). The IPE is a blueprint for successful employment for the person who uses the services of the Florida Division of Vocational Rehabilitation (DVR) or the Division of Blind Services (DBS). A student who is eligible for vocational rehabilitation (VR) services has a right to an IPE developed by DVR or DBS before they leave school. Without the IPE, the student can’t gain access to services from DVR or DBS. It is a roadmap to reach their desired and appropriate employment goals in adult life.

WHAT SHOULD THE PLANS COVER?

All four types of plans are designed individually and should reflect each person’s vision and values.



Education

IEP and 504 Plan



Transition

TIEP (or transition portion of a 504 Plan)



Employment/Vocational Rehabilitation

IPE



The Education Plans – IEP and 504 Plan

IEPs and 504 Plans ideally begin in childhood, the earlier the better, and deal primarily with the child’s education. Early planning is the bedrock of the transition plan. Even if the 504 Plan is developed later, it still provides the necessary structure for the transition plan. An IEP or 504 Plan should be reviewed at least annually (and can be reviewed anytime, upon request) to reflect the student’s progress and evolving situation, and to stimulate ideas about what will help them take advantage of new services and technology as they become available.

An IEP or 504 Plan should spell out:

- All the student’s educational needs related to their disabilities.
- The services to be provided and when they are expected to start and end.
- Which agencies or individuals will provide the services and who will pay for them.
- Measurable goals for the student, with dates to begin working toward them and to reach them (assessments conducted by professionals can be a basis for the goals, and new assessments periodically can measure the progress and inspire new goals).
- Program modifications and supports that will be needed to help the student reach the goals in the least restrictive environment. “Least restrictive environment” means that, as much as possible, the student learns in the regular curriculum, learns alongside other students (those who have disabilities and those who do not) and participates in extracurricular activities with other students (those who have disabilities and those who do not).
- Technology or other assistance that might make it possible for the student to participate fully and equally in mainstream school life, and who, or what agency, will supply it.



The Transition Plan – TIEP (or Transition Portion of a 504 Plan)

Adulthood brings new needs, rights and opportunities. As a student transitions to adulthood, their IEP could change significantly, and thus the transition plan should play an ever-larger role in this process.

In order to ensure quality transition planning and services, IEP teams shall begin the process of identifying transition services needs of students with disabilities, to include consideration of the student’s need for instruction or the provision of information in the area of self-determination to assist the student to be able to actively and effectively participate in IEP meetings and self-advocate, beginning no later than age 12, so that needed postsecondary goals may be identified and in place by age 16.

Self-determination skills are those skills needed to manage your own life. In schools, students’ needs for self-determination instruction are identified and documented in the IEP. The Florida State Board of Education Rule 6A-603028(3)(h)9 indicates that the need for self-determination instruction should be identified early so that students will be prepared for self-advocacy as they plan their futures.

The transition plan will cover not only schooling but also vocational training and living skills—in short, whatever the young person will need to make a successful transition to adult life. The transition plan, whether a TIEP or a portion of a 504 Plan, should spell out:

- The high school program the student needs and the type of diploma the student is working towards.
- The student’s desired post-school outcome.
- The kind of work the student wants to do and can do with the right training, supports and services, and how they will prepare for that work.
- Any job training the student will need, whether it will be in a formal classroom setting, in the community or both.
- Post-school adult living arrangements.
- Functional vocational assessments, if needed.
- Any life skills the student has yet to learn.
- Services or assistive technology devices the student will need and which agencies can supply them.

Your educational rights under Part B of IDEA, which were safeguarded by your parent or legal guardian, transfer to you at the age of 18 if you are not under a guardianship or guardian advocacy. Once you turn 18, you are considered an adult, and you have the right to enter contracts and make your own decisions. Make sure you read documents

completely before you sign or agree to them, and never sign anything if you do not agree or understand it. Rather, ask a trusted friend or family member to explain it to you until you do understand.

The Vocational Rehabilitation/Employment Plan - IPE

The IPE states the student's employment goal and the services they will need to achieve it. It is important for a student with a disability and their VR counselor to choose an employment goal specific enough to make it clear which services are needed to reach it. The goal should not be, for example, "health care." Rather, it should be a particular job in health care, such as nurse's aide, records technician or surgeon. Instead of "business," the goal should be receptionist or comptroller. Instead of "law enforcement," it should be security guard, detective or prosecutor. The goal can always be changed if it proves to be too much, too little or simply in the wrong direction.

With a specific goal, an IPE can then list in detail the services that are needed to reach it and who will pay for them. These services can include further education, transportation, mental health therapy, medical treatment, technology and anything else necessary for the student to succeed. The IPE can also specify responsibilities of the young person, such as reporting progress to the counselor or regular attendance at classes. The plans are designed individually and reflect each person's vision and values.

What Is the Purpose of Each Plan?

- Education plans should be detailed strategies for achieving the best possible adult life.
- A transition plan has the same purpose but looks ahead to the needs, changes and possibilities of adulthood.
- A vocational rehabilitation/employment plan focuses on preparing for work as an adult.
- An independent living plan builds self-sufficiency and the self-confidence needed to successfully enter the adult world.

WHO PLANS THE EDUCATION TRANSITION?

Who plans the transition? The student's team, composed of the student, their main advocate (a family member or other determined advocate), and all professionals necessary to provide educational and other services.

Florida Rule 6A-6.03028 states that the student should be included, if appropriate, and in all cases where a purpose of the meeting will be the identification of their transition services needs or consideration of postsecondary goals and the transition services needed to assist in reaching those goals. If the student does not attend the IEP meeting to identify transition services needs or consider postsecondary and career goals and transition services, the school district shall take other steps to ensure that the student's preferences and interests are considered.

The IEP Team

Under IDEA, the IEP transition team should include the student, parents (or persons acting as the parent), and school staff who know the student, as well as representatives of every agency that might play a role in meeting the student's needs. These agencies can include:

- Developmental services agencies.
- Alcohol, drug abuse and mental health programs.
- Community colleges.
- Florida Division of Blind Services (DBS).
- Florida Division of Vocational Rehabilitation (DVR).
- Deaf service centers.
- Children's medical services.
- Children and family services.
- Community mental health services.
- Centers for Independent Living (CILs).
- Social Security programs.
- Speech-language programs.
- Any other agency with services or programs that might contribute to the student's successful transition to adult life.

The 504 Plan Team

The composition of the 504 Plan team is less formally dictated by law than the IEP team, but it's a good idea to have the same sort of mix to cover all the services and opportunities the student might need and want. The student or anyone responsible for that person can request the participation of experts.

The Transition Team

The transition can be planned by the members of the IEP or 504 team, plus additional contributors such as professionals in the fields of higher education, adult living arrangements and employment.

IPE Team

The IPE plan is written by the student and their VR counselor, who enters the picture when the student is determined eligible for services from DVR or DBS. The counselor will be more valuable, however, if they have been involved in the student's education planning from early on. Any involved family members and other members of the student's IEP or 504 team should contribute to drafting the plan, but it's the student and VR counselor who must agree on the final version.

PREPARING FOR IEP MEETINGS

IDEA states if the purpose of the IEP meeting is to consider your postsecondary goals and transition services you should be invited to the meeting. Since these meetings are so important to your future, the more you can be part of them, the better the team will work together. Everyone wants you to be successful.

As you go through transition, it's important for you and your IEP team to communicate well. The IEP maps out what you will learn in school and what you need to learn it. It tells your teachers how they can best help you learn and prepare for what you will do when you leave school. Your IEP could include goals such as balancing a checkbook, improving your reading skills or socializing with groups of people. Depending on your unique goals, your IEP team will plan, step by step, how to get you there.

It is important that your IEP team uses a person-centered planning (PCP) process that helps you plan for your future while also promoting self-determination. PCP helps you provide alternatives to traditional approaches to convey your strengths, preferences, interests and needs. Typically, a team of people, usually family, friends and sometimes service providers, work together over time to assist you in defining and reaching your goals. The team works collaboratively through informal meetings to identify your priorities and assist you in attaining your self-determined quality of life.

One of the things you can do to take charge of your success and outcomes is to learn to lead your IEP team meetings. At first you may just lead the introductions and make sure everyone knows what goals are important to you. As you get older you may decide that you want to lead parts or all of IEP team meetings.

Before the meeting:

- Get a copy of your IEP and go over it with your caregivers, teachers or other trusted adults until you understand it.
- Ask questions about the parts you don't understand.
- Think about what you want to do. Write out your ideas ahead of time, and practice what you want to tell your team about your goals.
- Do your homework by learning what classes or training you need to achieve your goals.
- Invite someone you trust to attend the meeting to encourage and support you. It could be a relative, friend, guardian ad litem or attorney.
- Be sure you get enough sleep the night before and eat a good breakfast the day of your IEP meeting.

During the meeting:

- Discuss with your team how your disability will affect your goals and plans.
- Know your strengths and your weaknesses.
- Focus on your abilities and possibilities, but be realistic.

- Know your rights. What will you do if your IEP team makes a decision you don't agree with? You have dispute resolution options, which include asking for a facilitated IEP meeting, asking for mediation, filing a state complaint or filing for an impartial due process hearing. To read more about these options you may go to the Florida Department of Education dispute resolution website at www.fldoe.org/academics/exceptional-student-edu/dispute-resolution/http://www.fldoe.org/academics/exceptional-student-edu/dispute-resolution.
- Believe in yourself and your success.

Tips

Here are a few tips for having a successful IEP meeting:

- Read and get familiar with the laws that cover the youth's rights. Bring copies to the meetings.
- If an agency representative says, "It's not our job," research the issue, and you may be able to respond, "Yes, it is."
- Know the agencies and organizations that are equipped to help. Some will give you invaluable information, some will provide services and some will advocate to enforce the law if necessary. Others may need prodding.
- Remember that any of the plans can be amended to add services whenever necessary. Should you learn of one that would help you attain your goal, get it written into the plan.
- Make your requests in writing and get the answers in writing. If you are denied services, request in writing that the decision, its reason and the grounds for denial be provided in writing.
- Go up the chain of command. If an agency representative denies a service and you disagree, go to that person's supervisor, then to the agency head. Then follow the agency's appeal procedures. If you don't know the rules and procedures, ask for them. They should be available in writing.
- If dealing with denial of services and other problems, you can obtain information and referral, and possibly legal representation, from Disability Rights Florida or your local legal aid program.
- Make certain the plans contain measurable goals. Without measurability, it is difficult to determine if you are making adequate progress toward your goal.
- Ask for an assessment to show the need for services. For example, instead of requesting speech therapy, request a speech assessment. Then, if you disagree with the assessment, in the school setting, you have the right to an independent educational evaluation at public expense.
- Ask for assessment reports prepared by professionals who can accurately measure needs and abilities. Future assessments will measure progress. Services should be provided based on the assessment findings. Assessments are mandatory for students covered by IDEA and are both desirable and available for students with 504 Plans. Youth in state care with a mental health diagnosis or severe behavioral problems, should have a current Functional Behavioral Assessment (FBA); if they don't, request that one be provided.
- Ask for a copy of all assessments before any meeting at which one will be discussed. Study the assessment and be ready to proceed with it or ask for another if it doesn't seem adequate and correct.
- Take other stakeholders to the planning meetings. While advocating you'll be more effective if you're not alone. Take experts who will back up your judgment, friends or counselors who can speak knowledgeably about the situation, professionals who know the system, and other advisers who can help the team stay on track. Your companions may not need to



Tip

Ask for a copy of all assessments before any meeting at which one will be discussed. Study the assessment and be ready to proceed with it or ask for another if it doesn't seem adequate and correct.

speak at all, yet may nonetheless give weight to your analysis of the situation.

- Don't back down to please the professionals working with you. Back down only when you decide you've been wrong about needs and strengths.
- Generally, you'll accomplish more if you show respect for the professionals, even if they become impatient with you— but respect does not mean you have to agree with them. You may go online and read the websites of advocates and lawyers who have worked successfully with people with disabilities. Many of their tips are excellent.
- Remember that most decisions are not final. Stick with what works. Keep your written records in order. Should you encounter resistance, call another meeting, ask for another assessment, be persistent, quote the laws again and/or pull out the regulations. If you have tried to resolve the conflict yourself and have been unsuccessful, contact Disability Rights Florida for advocacy and legal help.

HOW LONG CAN STUDENTS WITH DISABILITIES STAY IN SCHOOL?

High School

All students who are covered by IDEA may receive a standard diploma. Until they receive a standard diploma, they are entitled to remain in school until their 22nd birthday. However, many schools often choose to continue services until the end of the semester or school year in which the student turns 22. You can check on which policy covers your student's school district at www.beessgw.org/#/spp/institution/public.

A student who has earned a standard diploma or has reached the age of 22 usually forfeits the right to a "free and appropriate public education" or an IEP unless they are entitled to some form of compensatory education.

Courts sometimes order compensatory education for a student who did not receive free and appropriate education services at the appropriate time. When that happens, educational services may be delivered after the student turns 22 or receives a standard diploma.

Unless compensatory education is ordered, public schools are not responsible for determining and meeting a student's educational needs if they have a standard diploma or are older than 22.

After High School

After high school, a student may seek a postsecondary education at a college, university or trade school, but the school will be responsible only for education and any accommodations necessary to achieve equal access under the law. IDEA does not apply to postsecondary education. Once you are in postsecondary education, Section 504 of the Rehabilitation Act and the Americans with Disabilities Act (ADA) may apply for reasonable accommodations and equal access to education and vocational training programs.

A postsecondary educational program will not usually conduct meetings or write plans but will support students with disabilities via arrangements such as a reduced course load, recording devices, sign-language interpreters, readers, extended time for testing, or adaptive software and hardware for computers.

To receive accommodations, the student must notify the school that they have a disability and require certain accommodations, services or technology.

The postsecondary school is not required to lower its academic standards for a student with a disability. The school may be required to allow more time to take a test, for example, but is not required to alter the content of the test, nor is it required to fundamentally alter the nature of its programs or accept excessive financial burdens for students with disabilities.

There are many more opportunities for students with disabilities to participate in 18-to-22-year-old transition programs. For information on assisting students with disabilities to participate in postsecondary options that fit their interests and aptitudes, please see the Project 10: Transition Education Network site at <http://project10.info/DPage.php?ID=314>.

The Florida Center for Students with Unique Abilities, located at the University of Central Florida, was created by the Florida Legislature in 2016. The purpose of the center is to increase independent living, inclusive and experiential

postsecondary education and employment opportunities for students with intellectual disabilities. Funding is available to help colleges set up new programs and for student scholarships to attend these programs.

How Do I Keep My Academic Records Private?

The Family Educational Rights and Privacy Act (FERPA) is a federal law that protects the privacy of student education records. The law applies to all schools that receive funds under an applicable program of the U.S. Department of Education.

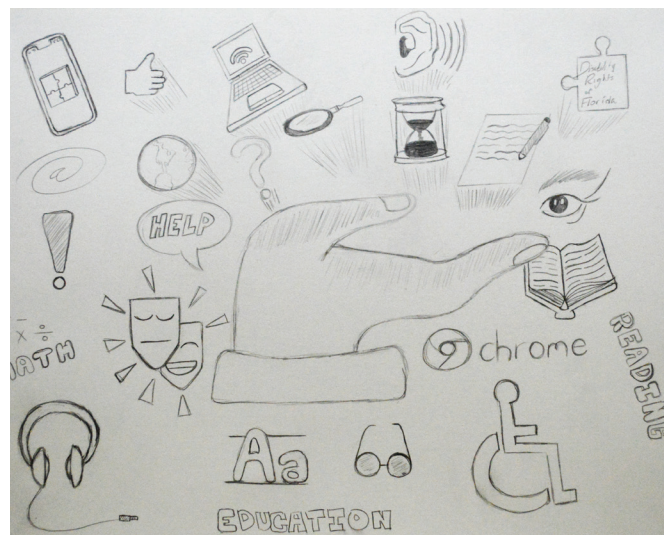
FERPA gives parents certain rights with respect to their children's education records. These rights transfer to the student when they reach the age of 18 or attend a school beyond the high school level. Students to whom the rights have transferred are "eligible students."

- Parents or eligible students have the right to inspect and review the student's education records maintained by the school. Schools are not required to provide copies of records unless, for reasons such as great distance, it is impossible for parents or eligible students to review the records. Schools may charge a fee for copies.
- Parents or eligible students have the right to request that a school correct a record they believe to be inaccurate or misleading. If the school decides not to amend the record, the parent or eligible student then has the right to a formal hearing. After the hearing, if the school still decides not to amend the record, the parent or eligible student has the right to place a statement with the record setting forth their view about the contested information.
- Generally, schools must have written permission from the parent or eligible student in order to release any information from a student's education record. However, FERPA allows schools to disclose those records, without consent, to the following parties or under the following conditions:
 - School officials with legitimate educational interest;
 - Other schools to which a student is transferring;
 - Specified officials for audit or evaluation purposes;

- Appropriate parties in connection with financial aid to a student;
- Organizations conducting certain studies for or on behalf of the school;
- Accrediting organizations;
- To comply with a judicial order or lawfully issued subpoena;
- Appropriate officials in cases of health and safety emergencies; and
- State and local authorities, within a juvenile justice system, pursuant to specific state law.

Schools may disclose, without consent, "directory" information such as a student's name, address, telephone number, date and place of birth, honors and awards, and dates of attendance. However, schools must tell parents and eligible students about directory information and allow parents and eligible students a reasonable amount of time to request that the school not disclose such information about them. Schools must notify parents and eligible students annually of their rights under FERPA. The actual means of notification (special letter, inclusion in a parent bulletin, student handbook, or newspaper article) is left to the discretion of each school.

Illustration by
Tyler Asuncion



Assistive Technology

Assistive Technology (AT) is a term used to describe any device or system that helps maintain or improve the capabilities of someone with a disability and the training or other support to ensure its availability. AT may be “high-tech” or a basic, every day item used in a repurposed way to help someone with a disability. Either way, the overall goal is to help people with disabilities live more independently, whether at home, school, work or play.

EXAMPLES OF AT

Just a few examples of AT include:

- Augmentative communication systems, such as talking computers, voice output devices, software or hardware and magnifiers.
- Assistive listening devices, such as hearing aids, personal FM units, closed-captioned TV and teletype machines/Telecommunications Devices for the Deaf (TDDs).
- Specially adapted learning games, toys and recreational equipment.
- Computer-assisted instruction (Learning Ally or Bookshare).
- Electronic tools, including scanners with speech synthesizers, tape recorders, word processors, laptops, smart pens, etc.
- Curriculum and textbook adaptations (audio, digital, large-print, Braille).
- Adaptation of the learning environment, such as special desks, modified learning stations, switches, computer touch screens or modified computer keyboards.
- Durable medical equipment (wheelchairs, hospital beds, Hoyer lifts, etc.).

OBTAINING AT



The Florida Diagnostic and Learning Resources System (FDLRS) can assist teachers and students with identifying and obtaining appropriate AT for school and learning purposes. For more information, see www.fdlrs.org.



For adults with disabilities, the Florida Alliance for Assistive Services and Technology (FAAST) provides guidance, resources and comparisons of different types of AT, and can help you understand options for paying for it. For more information, see www.faast.org.

Payment for AT may come from several sources. Determining who pays depends on each person's disability, age and individual circumstances. If a school-aged student requires AT to be educated in the least restrictive environment, as required by law, then the school may have the responsibility to pay.

AT and IEPs/Section 504 Plans

When an Individualized Education Program (IEP) team is determining whether to place a student with a disability in a general education classroom, before considering other placements, they must assess how the use of supplementary aides and services, including AT, may help the student succeed in the least restrictive environment.

Florida law requires that if an IEP team makes a recommendation in accordance with state Board of Education rules for a student with a disability to receive an AT assessment, it must be completed within 60 school days.

A student's IEP or 504 team will determine the need for AT based on a professional evaluation. The IEP team must consider the need for AT and discuss it at every IEP meeting. If the student needs AT to access the curriculum, socialize, increase independent functioning, study at home or transition to adulthood, the school may pay for both the equipment and training to use it. A student with a disability may also need, and has a right to, AT to fully participate in school activities. In that situation, Section 504 of the Rehabilitation Act may require that the school provide it, as well as any training necessary to use it.

AT and Work Experiences/Employment

The Florida Division of Vocational Rehabilitation (DVR) and Division of Blind Services (DBS) assist eligible individuals with disabilities, including youth, prepare for and obtain employment, including transitioning youth. This may include AT services, such as evaluation, maintenance, repair and training.

Overall, it is important to know that if you need AT in order to participate in work experiences, afterschool activities or at home to complete homework, the school must provide it. When it comes to work experiences and employment preparation, schools should work hand-in-hand with providers such as DVR and DBS to ensure students have what they need to be successful in their transition plan. If these agencies do not provide the needed AT, the IEP or 504 team must reconvene to determine how to best meet the student's needs.

Other means for financing assistive technology may include health insurance (Medicaid, Medicare or private policies). Evaluations, referrals and prior authorizations may be necessary before being determined eligible for AT through health insurance.

RESOURCES

In addition to FDLRS (www.fdlrs.org) and FAAST (www.faat.org), you can get AT guidance and resources (including related to Learning Ally or Bookshare) from Technology and Learning Connections (www.tlc-mtss.com) and from local Centers for Independent Living (CILs) (www.floridacils.org). CILs may also be a source for loaner equipment.



Illustration by
Jonah Bienhoff

Vocational Rehabilitation

Just like their peers without disabilities, students with disabilities may choose to start working after high school or seek a wide variety of postsecondary education options, among them college or vocational training programs. If transition planning has gone well, youth will move onto the next stage seamlessly, with a combination of services working together to help them reach their fullest potential.

WHAT IS VOCATIONAL REHABILITATION (VR)?

Anybody with a disability who wants to work can, with the right supports and services. Two Florida state agencies provide these services, which are called VR services: the Division of Vocational Rehabilitation (DVR) and Division of Blind Services (DBS). DVR serves people with all sorts of disabilities, while DBS serves people with bilateral vision impairments. Both DVR and DBS offer a broad range of services based on an individual's goals and barriers to employment. To make the most of these services, a student should have a DVR or DBS representative on their team long before leaving school.

VR services include not only help training for and obtaining a job, but also things such as transportation assistance, tuition, books and fees, physical and mental restoration services, assistive technology, vehicle and home modifications, equipment, tools, uniforms, durable medical equipment, family care services, help establishing a small business, job coaching/supported employment and more. Most importantly, VR services should be customized to each person's unique needs.

According to the Rehabilitation Act of 1973, a person is eligible for VR services if they are determined by qualified personnel to require services because of a physical, mental or emotional disability that interferes substantially with employment. Those who receive Social Security benefits (Supplemental Security Income (SSI) or Social Security Disability Insurance (SSDI)) based on their own disabilities are presumed to be eligible for VR unless there is clear and convincing evidence that they are too significantly disabled to benefit from them.

If you are eligible for VR services, you have the right to choose to receive them from either a public or private provider. You can ask for a vendor list, which may include doctors, medical professionals and others who are approved to accept DVR and DBS fees. You can also choose among many private providers, including Employment Networks (ENs), which are providers certified under the Social Security Administration (SSA) Ticket to Work Program to provide employment services to Social Security beneficiaries with disabilities. ENs only receive payment when their clients are able to work at a sustained level, however. If you are not willing or able to work at this level, ENs may not be willing to serve you. ENs have the right to choose not to work with you, just as you have the right to choose not to work with them.

Other resources for employment services include American Job Centers, which provide job referrals and placement assistance, occupational counseling, testing, job development, labor market information, employment skills workshops and other support services. Often, DVR and DBS will contract with one or more of these organizations to provide services. In some cases, a client may work with one or more without being involved with one of the state agencies.

For more information, see:

Florida Division of Vocational Rehabilitation
www.rehabworks.org

Florida Division of Blind Services
dbs.fldoe.org

Starting the Process as a Student

The time to apply for VR should be specified in a student's Individualized Education Program (IEP) or Section 504 plan, or a state VR counselor can recommend the best time. Either way, it's best not to wait until your senior year to apply. Being declared eligible for VR services often takes much longer than the official guidelines suggest. The student, parent or advocate should stay in close touch with education and DVR or DBS officials to know when to apply.

If the VR agency is prepared to participate in the student's transition process, an early application can make an important difference in the outcome. In Florida, DBS is ready with transition programs and effective counseling when the student is 14; DVR services generally start later.

In any scenario, preparation for VR takes time—to apply for services, undergo any evaluations that may be required, be found eligible and assigned a counselor, formulate a strategy, and write and negotiate the employment plan, or Individualized Plan for Employment (IPE).

As a result, some students have benefited from applying as early as age 14. Others, especially those seeking services from DVR instead of DBS, have found that applying in the junior year of high school leaves enough time to benefit from the entire transition process. That can change, though, so it's always a good idea to discuss timing with school counselors and the state agencies.

A student who does not apply for VR services while in school can still apply later and be approved. There is no age limit for eligibility, but in most cases, the sooner services begin, the greater likelihood of successful outcomes.

Individualized Plan for Employment (IPE)









Once you are found eligible for services with DVR, you and your VR counselor will develop an IPE within 90 days. If you are working with DBS, the IPE must be created within 60 days. All IPEs must be reviewed and updated annually. The IPE should be consistent with the individual's strengths, priorities, concerns, capabilities, career interests and informed choice.

Your IPE will include your employment goal as well as all services needed to meet it. For example, if you want to be a 3rd grade teacher, your IPE goal might show a goal of "Kindergarten and Elementary School Teacher," and

the services might include tuition, books and supplies, a computer, and any other service you might need to be successful pursuing a degree in education.

Financial Participation

DVR will consider your financial ability to participate in VR services. Federal regulations require state VR programs to be able to provide the full range of vocational services to eligible individuals. Florida's DVR program has opted to execute an "Order of Selection" process that establishes categories based on degree of disability to determine who will receive services. Florida's three categories are described as:

	Category 1
	Most Significantly Disabled.
	
	Category 2
	Significantly Disabled.
	
	Category 3
	Disabled.

The VR counselor makes these determinations, which can be reconsidered at any time. Also, you have the right to provide new information that may lead to a new designation.

Your VR counselor will also review your prior year tax returns or those of your family at least annually to confirm your status as a dependent and to confirm household income. DVR must follow strict confidentiality guidelines to protect tax return information. Services are provided under two broad categories: exempt and non-exempt services. If your income is below certain federal guidelines, you will be determined exempt, and VR will cover the costs of the agreed upon services. Individuals who receive SSDI, SSI, public assistance (Temporary Assistance for Needy Families (TANF)), SNAP (Food Stamps), and/or other general assistance) are exempt.

You can forgo providing tax return documentation; however, this will limit you to non-exempt services. A list of services for each of these categories can be viewed online at www.rehabworks.org under "Financial Participation." For more information about tax returns, access the IRS interview tool at www.irs.gov/help/ita/do-i-need-to-file-a-tax-return.

VR Transition Youth Services

VR Transition Youth Services help students with disabilities train for a job, continue their education or find a job after high school. Under this program, every youth will have the opportunity to participate in sponsored career counseling, work readiness training and fully integrated work experiences in the community. These services are delivered while youth are still in high school and establish the foundation for a seamless transition to individualized training, education and employment upon graduation.

Frequently Asked Questions

Below are frequently asked questions about VR services for transitioning youth:

Who should be referred to VR?

All students ages 14-21 with disabilities. Your disability must be documented by an IEP, Section 504 plan or some other means. Students or young people who don't need academic or physical accommodations in high school, but may need them later, should also consider applying, as should students thinking about dropping out of high school.

Who qualifies for VR Transition Youth Services?

Students ages 14-21 with disabilities who are still in high school or attending postsecondary school (trade, college or university).

When should you apply?

You should apply as soon as you are between 14-21 and ready to plan and participate in services.

What happens after you apply for transition services?

You meet with a VR counselor to start the application process and determine eligibility. Once eligibility is established, you will be placed in the appropriate Order of Selection category. When your case is ready to be processed from the waiting list, your counselor will work with you to develop an IPE. Your IPE addresses the services you need for a successful transition to the agreed upon employment outcome.

How do you apply?

You can contact the Client Assistance Program (CAP) at Disability Rights Florida to complete the application for you.

How long will the eligibility process take?

DVR must decide on eligibility within 60 days. You will be presumed eligible if you are receiving SSI or SSDI, however. Once you are determined eligible, DVR has 90 days to complete the IPE for services to begin. DBS must also make a decision on eligibility within 60 calendar days, and then the IPE must be developed within 60 calendar days of being found eligible.

What laws help students with disabilities in school?

There are several laws that can help students with disabilities be successful in school and their career. The Individuals with Disabilities Education Act (IDEA) guarantees that students with disabilities have access to a free and appropriate public education. A student may receive Exceptional Student Education (ESE) services under IDEA if their disability adversely affects their educational performance. Section 504 of the Rehabilitation Act prohibits discrimination against youth with disabilities and ensures they have equal access to education. The Workforce Innovation and Opportunity Act (WIOA) ensures that VR makes Transition Youth Services available to all high school students with disabilities. VR's Transition Youth Services are based on components of all of these laws.

What are Pre-Employment Transition Services (the STAR program)?

Under WIOA, Pre-Employment Transition Services (Pre-ETS) (also called the STAR program in Florida) must be offered to students with disabilities without requiring that they apply for or be determined eligible for them. These students are not traditional VR customers but have been referred to VR by school districts for limited (pre-employment) services. VR is the primary agency for preparing youth with disabilities for employment while the youth are still in high school or attending postsecondary school (trade, college or university). VR will deliver specific Pre-ETS including:

- 1 **Job Exploration** – Explores career path options that are best suited to your skills, abilities, aptitudes and interests.
- 2 **Work Readiness Training** – Focuses on employability and related skills that prepare you to work. Resume writing, mock interviews and searching and applying for jobs are part of the training.
- 3 **Self-Advocacy Training and Peer Training** – Teaches you how to talk about your needs and make decisions about your own life to become more independent.
- 4 **Postsecondary Educational Counseling** – Provides information about continuing education options, school choice, accessing financial aid and more.
- 5 **Work-Based Learning Experiences** – Provides practical exposure to different careers and hands-on training for employability skills. These experiences focus on practicing social skills and building relationships.



Nicholas and Dr. Oksana Hagerty PhD, Director of the Center for Student Success Learning Specialist & Academic Advisor

Advocacy in Action: Nicholas's Story

Throughout his life, Nicholas has faced obstacles, among them others' expectations for him and his future.

He's also continually overcome them. He attended a private high school for students with disabilities that provided specialized instruction and services. While there, he worked hard, with strong support from his family.

When it came time to consider college, Nicholas and his family explored various options. They lived near Beacon College, which specializes in teaching individuals with disabilities, and Nicholas wanted to attend. He applied to the Division of Vocational Rehabilitation (DVR) and went through the evaluation process to assess his skills and determine eligibility for services, including tuition assistance. But DVR denied Nicholas's request based on his test scores.

Nicholas was told he needed to score above a fourth-grade level for college support. He and his family were disappointed, but not deterred, because he had already proven many people wrong. He had applied for a job at a Chick-Fil-A on his own and was hired on the spot. He had also been told he would never be able to get his driver license, but successfully did and drove himself to school and work.

Beacon College offered a summer transition program, which he attended. After that, he decided to give Beacon a try and, if successful, go back to DVR for reevaluation based on his success. During his first semester, he achieved a 3.5 grade point average. As planned, he went back to DVR. DVR agreed to reevaluate him, and this time he increased his scores. So, he was surprised when he was denied support again. In fact, the assessment organization recommended Nicholas drop out of college and advised him to seek a job as a dishwasher or warehouse worker.

This confused Nicholas given his demonstrated success. Moreover, Beacon College was an approved vendor of DVR. Unclear about how to navigate the process, Nicholas sought assistance. He felt like DVR had moved the figurative goal post. He contacted Disability Rights Florida, and its Client Assistance Program (CAP) advocated for DVR to provide the requested support. To start, he and CAP appealed DVR's decision, and it went to administrative review. Again, DVR denied the assistance. Nicholas and CAP then filed for an administrative hearing. During this hearing, two experts and a representative from the college testified on his behalf, stating that Nicholas could be successful at Beacon due to his abilities and the school's unique programming and support. Finally, Nicholas prevailed. An Administrative Law Judge determined that Beacon College was appropriate for him, and that, as a result, DVR should assist with tuition, books and supplies.

Nicholas was thrilled with the outcome, and his hard work is already paying off. He is currently taking 16 credit hours and has straight A's, while also working part-time. Nicholas did not let anyone's low expectations get in his way. He also knows the importance of asking for help when needed, whether in school or in understanding his rights.

Employment

Working is a big part of adult life, and gaining work experience while young offers many benefits beyond getting paid. If you're working or plan to work in the future, it's important to understand that, by law, you may be entitled to reasonable accommodations to help you perform the essential functions of your job. It's also important for you to understand what a current or prospective employer may and may not ask you about your disability.

WHAT IS THE ADA?

The Americans with Disabilities Act (ADA) is landmark civil rights legislation that prohibits discrimination against people with disabilities across community life, including employment. In addition to prohibiting discrimination against qualified job applicants and employees on the basis of disability, the ADA requires covered employers to provide reasonable accommodations for applicants or employees with disabilities when requested, unless to do so would impose undue hardship. The ADA applies to private employers with 15 or more employees. It also applies to local and state government agencies, regardless of the number of people they employ.

AM I PROTECTED BY THE ADA?

The ADA does not include a list of medical conditions that constitute disabilities. Instead, it includes a general definition of disability that each person must meet. Specifically, it says that a person with a disability is someone who:

- ✓ Has a physical or mental impairment that substantially limits one or more major life activities,
- ✓ Has a history or record of such an impairment, or
- ✓ Who is perceived by others as having such an impairment.

A substantial impairment is one that significantly limits or restricts a major life activity such as hearing, seeing,

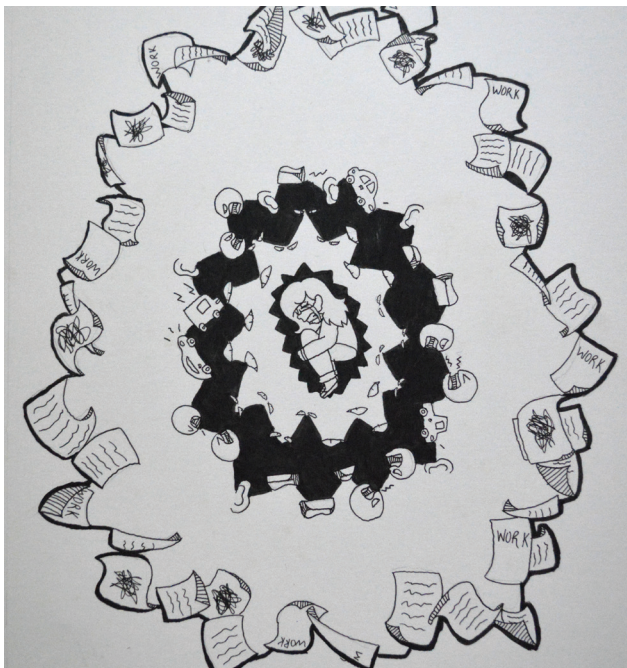
speaking, walking, breathing, performing manual tasks, caring for yourself, learning or working. It is important to note that the ADA does protect people with nonvisible disabilities (for instance chronic health conditions such as diabetes and asthma or mental health conditions such as anxiety and depression).

It is also important to note that the ADA's employment provisions protect qualified individuals with disabilities. Qualified in this case means that you satisfy the job-related requirements of the position you hold (or are applying for) and can perform its essential functions, with or without a reasonable accommodation.

WHAT ARE REASONABLE ACCOMMODATIONS?

A reasonable accommodation is considered any change to the work environment, or the way a job is done, that enables someone with a disability to apply for or perform a job. For example, an employer may need to provide a sign language interpreter during a job interview for an applicant who is deaf or adjust the layout of a workstation for someone who uses a wheelchair. A flexible schedule to assist in managing medical appointments might also be considered a reasonable accommodation. Just as each person is unique, so is each accommodation. Employers or employees seeking assistance with determining effective accommodations can contact the Job Accommodation Network (JAN) at www.AskJAN.org or 800-526-7234 (Voice) or 877-781-9403 (TTY).

Illustration by
Elizabeth Antonelli



CAN AN EMPLOYER REQUIRE MEDICAL EXAMINATIONS OR ASK ABOUT A DISABILITY?

During the job application process, an employer cannot ask you if you are disabled or about the nature or severity of a disability. They can, however, ask if you can perform the duties of the job with or without a reasonable accommodation. They can also ask you to describe or demonstrate how, with or without reasonable accommodation, you would perform your job duties.

An employer cannot require you to take a medical examination before you are offered a job. After extending a job offer, they can require you to take a medical examination, but only if all entering employees in that job category must take the examination. However, they cannot then rescind the offer based on information about your disability revealed by the medical examination, unless the reasons for doing so are job-related and necessary for the conduct of the employer's business. Also, once officially employed, your employer cannot require you to take a medical examination or ask questions about your disability unless they are job-related and necessary for the conduct of the employer's business.

In short, an employer cannot fire you or refuse to hire you because of your disability if you can perform the essential functions of the job, with or without a reasonable accommodation.

HOW DO I REQUEST A REASONABLE ACCOMMODATION?

If you need a reasonable accommodation in order to apply for employment or perform essential job functions, you should inform your employer (or prospective employer). As noted earlier, employers covered by the ADA are required to provide reasonable accommodations for qualified individuals with disabilities, but it is the employee's responsibility to request one.

You will need to let your employer know that you are requesting a reasonable accommodation due to a disability. Furthermore, it is recommended that you put your request in writing so that you have a record of having made the request. Your employer may ask you to provide medical documentation to support your request, and if you do not provide it, they can deny your request. There is no set amount of time in which they must respond to your request, but it should be within a reasonable timeframe.

If your employer feels they cannot provide your requested accommodation, they should participate in an "interactive process" with you, meaning a back-and-forth discussion in attempt to identify a solution that works for you without creating an undue hardship for them.

Also, the ADA requires that an employer cover the cost of a reasonable accommodation. If the cost would be an undue hardship, you must be given the choice of providing the accommodation yourself or paying for the portion that causes undue hardship.

WHAT SHOULD I DO IF MY EMPLOYER DENIES MY REQUEST?

If your employer denies your request, you can seek assistance from Disability Rights Florida or file a complaint with the Equal Employment Opportunity Commission (EEOC), which enforces the employment provisions of the ADA. Also, it is illegal for an employer to retaliate against you for requesting an accommodation or otherwise asserting your rights under the ADA. If you believe you have been retaliated against in this regard, also contact Disability Rights Florida or an employment attorney or file a complaint with the EEOC. See www.eeoc.gov/field-office for contact information for EEOC offices in Florida or call 800-669-4000 (Voice), 800-669-6820 (TTY) or 844-234-5122 (ASL/Video).

Self-Determination and Self-Advocacy

As you transition from youth to adulthood, you'll increasingly make your own decisions about how you want to live your life, including setting and achieving your own goals. This is called self-determination, and a key part of it is learning to advocate for yourself. For all youth, both with and without disabilities, the process of developing self-determination and self-advocacy skills happens over time. The key is to feel confident making decisions for yourself, but also know that it's always okay to ask for help.

MAKING YOUR OWN DECISIONS

Self-determination and self-advocacy go hand in hand. Together, they encompass the skills to set and achieve goals, solve problems on your own and operate independently. All of these are rooted in effective decision making, the key to which is taking the time to learn the facts and consider your options.

You should never rush into making an important decision. This includes deciding to sign a contract. It is important to understand that generally, once you are 18, signing an agreement or contract makes it legally binding. You may not be able to cancel the agreement or contract, for instance, if there is not a clause that allows for cancellation. Different types of services (real estate, sales agreements, car purchases) have different rules.

Federal as well as Florida laws offer some protection for consumers, with different rules applying to different types of transactions. When asked to sign something, read the document very carefully. If you do not understand something, you have the right to ask questions and/or have a trusted family member, friend, advocate or attorney review it with you before signing. If you are in a situation where you feel someone is trying to force you to sign something you do not understand or agree to, respectfully ask to stop the process. Request additional time and to take a copy of the document with you so that you can read it at your home. Do not sign a document if you feel pressured.

ADVOCATING FOR YOUR NEEDS

There will be many situations in which you will need to self-advocate, and learning to do so is a critical part of adult life, for people both with and without disabilities. To help, here are 10 tips to keep in mind:

- 1 Believe in yourself!**
- 2 Know that you are entitled to equal rights under the law.**
 - Learn your rights.
 - Educate yourself with reliable information using libraries, the internet, email groups and social networking.
 - Join peer-run, family and community support programs; use referral or crisis hotlines; join advocacy groups; and seek out service providers.
 - Take free classes or workshops.
 - If you do not understand information or explanations provided, say so.
 - Ask for the information to be accessible and for reasonable accommodations, if needed, to participate.
- 3 If you have questions and concerns, do not be afraid to bring them up!**

- To help, prepare ahead of the meeting; write an outline of points you want to make and any questions you may have. Raise your questions and concerns by phone, in person or by sending a letter or email.
- Schedule a meeting.
- Dress for the occasion and be on time.
- Bring any support you may need, such as a friend, family member or advocate.
- Remember to introduce yourself and anyone you bring with you and to use other people's names to help clarify a point.

4 Be effective on the phone.

- Prepare key points ahead of time.
- Write down your most important questions.
- Be clear and focused.
- Listen carefully to what others are saying.
- Write down each person's name and position.
- Ask when you can expect action or an answer.
- If the person you are talking to cannot help you, ask who can.
- Thank the person for being helpful!
- Keep a record of your call (time, date, who you spoke with and what they said).
- Follow up at the agreed upon date and time.

5 Put things in writing. (If it was not written down there is not proof it happened!)

- Send a letter or email to confirm what you think you heard is accurate. It is always best to have something in writing.
- Include information that you think you agreed on.
- Keep it to the point; do not make it too long.
- Begin and end by stating your request or concern.

6 Get information and decisions in writing.

- If someone tells you something, ask them to put it in writing or send you documentation.

- Read the document, including all details and the "fine print."
- If someone tells you something is a law, policy or procedure, ask for a copy.
- If you disagree with a decision, ask for it in writing, along with the reasons for the decision.

7 Use the chain of command.

- If you are not getting a straight answer, say "thank you" and ask to speak to someone who can address your concern.
- Follow the chain of command to find the next supervisor or a different person who may be able to help you.

8 Know your appeal rights and responsibilities.

- If you are not getting a satisfactory answer or decision, what then?
- Ask the person you are talking to what you need to do next to resolve the dispute or appeal the decision.
- Find out the process to review decisions; most organizations and government agencies are required to have one in place.
- Request written information about the dispute resolution process.

9 Follow-up and say thank you.

- Thank people along the way. If you are polite, you are much more likely to succeed in getting the information you need to help yourself.
- Remember to tell someone about individuals who helped you. They are employees and always benefit when someone says they did a good job.

10 Ask for help if you need it.

If you need assistance resolving a dispute, contact Disability Rights Florida (www.disabilityrightsflorida.org) or another advocacy or community organization to request information or assistance.

Supported Decision Making

At Disability Rights Florida, we are proponents of Supported Decision Making. Supported Decision Making is an alternative to guardianship that allows persons with disabilities to better understand, consider and communicate decisions that impact their lives.

UNDERLYING PRINCIPLES

At the heart of Supported Decision Making is four underlying principles: Self-Determination, Informed Choice, Person-Centered Planning and someone's Circle of Support. An understanding of these principles, and how they can be implemented, can help people with disabilities achieve more successful outcomes through increased personal control over decisions impacting their lives.

Self-Determination

Self-determination is a philosophy referring to the right for all persons to determine their own economic, social and cultural development. Often, people with disabilities face limitations on their choices about where to live, who to live with, and how to spend their time and money. Having the right, opportunity and power to make meaningful choices are key to self-determination. Self-determination means the freedom to define ourselves, create for ourselves and speak for ourselves. To achieve self-determination, people with disabilities must have ownership over their lives.

Informed Choice

According to Nebraska Vocational Rehabilitation (VR), "informed choice results from a rational and systematic decision-making process that occurs in a context that is free from duress and coercion and that is characterized by:

- ✓ Identification of available alternatives or options;
- ✓ Identification of the consequences (both favorable and unfavorable) of pursuing each alternative or option;
- ✓ Selecting an alternative option after weighing and

deliberating each one and its consequences in terms of a personal scale of values; and

- ✓ Commitment and action to pursue the selected alternative or option."

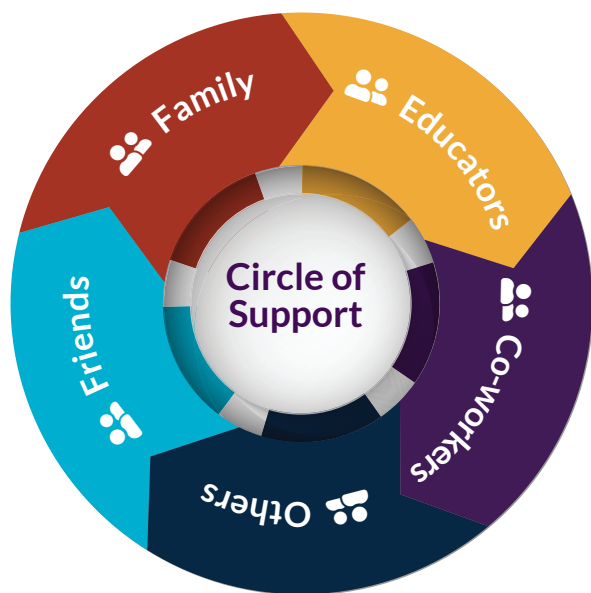
People with disabilities, like all people, need to make informed choices about things that impact their lives. Real choice is about being able to choose from the same wide variety of lifestyles, goals and preferences that others have. Even if someone receives Supported Decision Making assistance, they must have the final say over the decisions that are made and, ultimately, be allowed to face the consequences of those decisions. In other words, individuals with disabilities should be able to fully experience the dignity of risk.

Person-Centered Planning

Person-centered planning respects the values of human rights, independence, choice and social inclusion, and is designed to enable people to direct their own services and supports. With this approach, planning is done by and with the individual, and the process is geared to their desires and personal wishes.

Circle of Support

The diagnosis of a disability does not automatically mean that a person needs formal decision-making assistance. We all rely on assistance from family, friends, educators, co-workers and others when making decisions. The people you value in your life who help you to set and achieve your goals are your Circle of Support. It is important for families and professionals to work together to provide the right balance between protection and support. It is also important to remember that decision making is a learned skill, and people with disabilities need opportunity to build it.



Resources to assist in understanding Supported Decision-Making include:

National Disability Rights Network
www.ndrn.org/resource/supported-decision-making-and-health-care

Disability Rights Florida
 Episode 5: Supported Decision-Making
 Turning 18, Guardianship & Other Options

National Resource Center for Supported Decision-Making
www.supporteddecisionmaking.org

National Council on Disability
www.ncd.gov/sites/default/files/NCD_Turning-Rights-into-Reality_508_0.pdf

Florida WINGS
www.stetson.edu/law/wings/

Disability Rights Texas
www.disabilityrightstx.org/en/category/sdm

Equip for Equality
www.equipforequality.org/issues/self-determination-guardianship

Florida Developmental Disabilities Council, Inc.
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Florida Power of Attorney
www.floridabar.org/public/consumer/pamphlet13

Center for Public Representation
www.supporteddecisions.org

American Bar Association
www.americanbar.org/groups/law_aging/resources/guardianship_law_practice

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www.aaid.org/education/education-archive/2017/09/28/default-calendar/guardianship-and-supported-decision-making

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www.health.ucdavis.edu/mindinstitute/centers/cedd/sdm.html

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www.fddc.org/sites/default/files/PA_Book_final_3-5-12-1.pdf

Guardianship and Guardianship Alternatives

Turning 18 can be an exciting time of life. Once you turn 18, you are not only considered an adult, but also legally able to make decisions about your life, unless a court has ruled otherwise. In such cases, the court may choose someone else to make some or all decisions for you. This is called guardianship. But many alternatives to guardianship exist that support people with disabilities to have more control over their own lives.

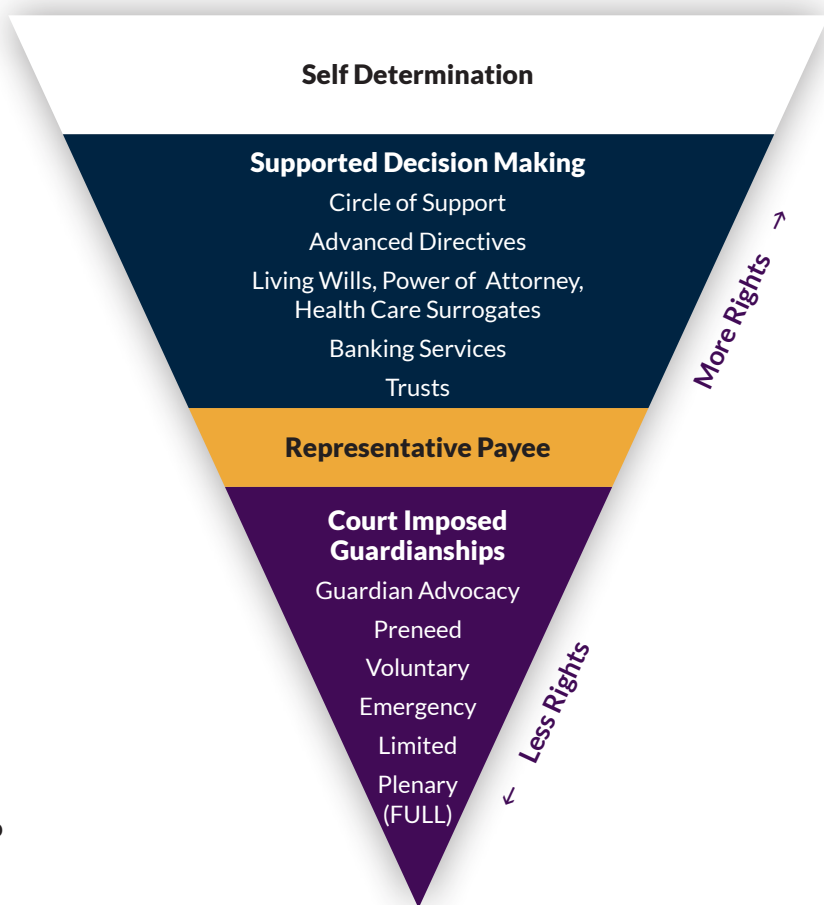
WHAT IS GUARDIANSHIP?

If a court finds that a person does not have the ability to safely manage the things that belong to them and/or meet their basic health, safety and self-care needs, the court will rule that this person is incapacitated. In many cases, after a court decides that a person is incapacitated, they will choose someone else to make some or all the decisions for the incapacitated person. That person becomes the person's guardian, and the situation is called a guardianship.

Guardianships are restrictive and may be unnecessary. They result in the loss of an individual's right to make their own life choices. There are many other options that can be put into place to help individuals make safe choices about their life and the things that belong to them. In fact, a guardianship should only be considered when all the other options, called alternatives to guardianship, do not safely meet the needs of an individual. A guardianship is a last resort.

ALTERNATIVES TO GUARDIANSHIP

If you can receive important information and use it to safely make and communicate decisions about your life,



you probably do not need a guardianship. By using the guidance, advice and support offered through alternatives to guardianship, you can keep your freedom to live as independently as possible. There are many different alternatives to guardianship that can be put into place to help you understand the risks and benefits associated with the decisions you make about your life.

Supported Decision Making

Supported Decision Making is a process that we all use to make choices in our lives. Everyone needs help making decisions every day. If someone we want services from uses a specialized term for their business or procedure, it's very hard to understand, almost like a foreign language. So, we ask for help from friends, family members, advocates and other trusted people. Once we get all the necessary information, we can make a good decision. This is Supported Decision Making, and it benefits everyone.

Supported Decision Making can be formalized in an agreement in which you detail all the areas of your life with which you would like help making decisions. In the agreement, you can say who you want to support you in each area, and how you do and do not want to be supported. For example, you might want to make your uncle your supporter for deciding where to live. You could state that your uncle will help you make a list of things you want in an apartment, find a realtor, visit apartments with you and help you set up automatic payments for rent. You could also state that you don't want your uncle to talk to your landlord without you.

We all have some trouble making decisions. You have the right to make choices, but you can ask for help doing so. This means that you will be making the decision, not someone else. In Supported Decision Making, the person or people who will support you are chosen by you. They can help you make informed decisions by:

- Collecting and communicating with you about information related to a decision.
- Helping you understand and explore your options.
- Explaining the risks and benefits of different options.
- Giving guidance and recommendations.
- Assisting you in communicating and carrying out your decision.

Ultimately, the final decision is up to you. A Supported Decision Making agreement can be written out and signed by all parties, but this is not required.

In Florida, at least one court has found that Supported Decision Making agreements are a powerful alternative to guardianship. To learn more, listen to this podcast interview with a Disability Rights Florida client who was able to end his guardianship and enter a Supported Decision Making agreement that allowed him to keep all his rights: www.disabilityrightsflorida.org/podcast/story/episode_5_supported_decision_making.

For more information, see this guide's section on Supported Decision Making. If you think a Supported Decision Making agreement sounds right for you, contact Disability Rights Florida at www.disabilityrightsflorida.org or 800-342-0823.

Advanced Directives (Living Wills, Health Care Surrogate, Power of Attorneys, Etc.)

Living Will – A living will is a legal document that expresses a person's wishes regarding the providing, withholding or withdrawal of life-prolonging procedures in the event of a terminal condition, end-stage condition or persistent vegetative state.

Health Care Surrogate – A Health Care Surrogate is a legal document that gives permission to another person, known as the surrogate, to receive an individual's health information and make health care decisions for them. The Health Care Surrogate serves as preparation in the event an individual is no longer able to physically or mentally make informed health care decisions. The writing can provide for this authority to take effect immediately, or upon the legal determination of incapacity.

The advantages of a Health Care Surrogate are:

- Can be completed without an attorney.
- Offers an opportunity to use the Supported Decision Making process.
- Allows someone to speak on an individual's behalf in the event they are unable to do so.

Florida Statute §765.102 provides "that every competent adult has the fundamental right of self-determination regarding decisions pertaining to his or her own health, including the right to choose or refuse medical treatment." Florida also provides suggested designation forms for

Health Care Surrogates:

- Form for Adults: www.leg.state.fl.us/statutes/index.cfm?App_mode=Display_Statute&URL=0700-0799/0765/Sections/0765.203.html
- Form for Minors: http://www.leg.state.fl.us/Statutes/index.cfm?App_mode=Display_Statute&Search_String=&URL=0700-0799/0765/Sections/0765.2038.html

Power of Attorney – A Power of Attorney is a legal document that gives someone else the power to act in the place of another person. This means that another person has the authority to carry out activities they believe the other person would do for themselves. In order for a Power of Attorney to be created, the individual must be able to understand how it can be used and the effect it can have on their property.

In Florida, a Power of Attorney must be signed before two witnesses and a notary public to be considered a legal, binding document. If the individual later becomes incapacitated, the Power of Attorney can be revoked, unless the individual specifically agreed to allow the Power of Attorney to continue after a finding of incapacity. This is known as a Durable Power of Attorney.

A Durable Power of Attorney is a special kind of Power of Attorney because it remains intact, or “durable,” even if a person suffers mental incapacity in the future. A Durable Power of Attorney can, in addition to handling all financial decisions, authorize medical care. That includes consent to proceed with or terminate all medical and surgical procedures on your behalf, including an agreement that falls under the Life-Prolonging Procedures Act of Florida. Again, a Durable Power of Attorney lets someone act on your behalf if you cannot due to mental incapacity.

Banking Services – Banking services can be utilized to assist an individual with managing money. A joint bank account or being a co-signor on an account and using online banking for direct deposits and online bill paying are all examples of banking services that may assist an individual who needs support in managing their finances.

Trust Accounts – Trust accounts can also be utilized to assist individuals with disabilities in planning and maintaining quality of life. Revocable trusts and irrevocable trusts, such as Special Needs Trusts, are examples that can maintain one’s eligibility to receive

public benefits. Please contact an attorney that specializes in setting up trusts to get more information on how they can be administered to protect the best interests of an individual with a disability.

Representative Payee

If a person is receiving benefits from the Social Security Administration (SSA) and SSA determines that they are unable to manage their finances, a Representative Payee can be designated to receive and disperse the benefits in the best interest of the beneficiary. SSA determines if the individual needs a Representative Payee. When that determination is made, the Representative Payee will receive the individual’s payments and use the money to pay for their needs. SSA requires the Representative Payee to report how the money is spent. If an individual believes that their Representative Payee is misusing or stealing their benefits, an investigation can be conducted to determine if a new Representative Payee is needed.

TYPES OF GUARDIANSHIP

If someone believes that guardianship is the only option, and none of the alternatives to guardianship can meet the needs of an individual with a disability, it is important to know about the different types of guardianships under Florida law. Guardianships must be specific to the needs of the individual (referred to as a “ward” once someone is placed in a guardianship) and should not be any more restrictive than necessary.

Preneed Guardian

This means an adult who has capacity may select a person to serve as their guardian in the event that they become incapacitated in the future. The individual must express this decision in writing and file it with the court.

Voluntary Guardianship

When an individual has capacity but needs assistance with handling self-care and the management of property because of their age or physical condition, they can ask the court to place them into a voluntary guardianship. Under a voluntary guardianship, the court will appoint a guardian to manage some or all of the ward’s property. A licensed physician must specify that they have examined the individual and that the individual is able to understand

the nature of the guardianship. A voluntary guardianship may be terminated at any time by the ward. The ward may do this by filing a notice with the court of their decision to be released from the voluntary guardianship.

Emergency Temporary Guardianship

When a court is in the process of deciding whether someone is incapacitated, there are specific instances when an emergency temporary guardian is needed. The court will place someone in an emergency temporary guardianship if they believe someone may be in immediate danger or if someone's property is at risk of being wasted, misappropriated or lost unless immediate action is taken. There has to be specific findings of this type of danger. The court will also specifically list the duties of the emergency temporary guardian in a written order. This type of guardianship has time limitations.

Limited Guardianship

A court of law may place an individual in a limited guardianship when it finds that they are only partially incapacitated. To be partially incapacitated means that an individual can make some, but not all, decisions necessary to care for themselves and/or their property. Under a limited guardianship, the guardian only has the authority to take the specific actions decided by the court. The ward will keep all of the rights that are not specifically taken away in the court order.

Guardian Advocate for Individuals who have a Developmentally Disability (Florida Statute § 393.12)

A person who has a developmental disability can be placed in a guardianship under a guardian advocate even when a court has not determined them to be incapacitated. A person has a developmental disability if they have been diagnosed with an intellectual disability, cerebral palsy, autism, spina bifida, Down syndrome, Phelan-McDermid syndrome or Prader-Willi syndrome. Only the specific rights which a person cannot manage are removed. The court may look at the individual's support plan, their Individualized Education Plan (IEP) and/or other supporting documents to determine the level of disability and need for assistance. The common areas that guardian advocates assist individuals with include:

- Giving informed consent for medical procedures and mental health treatment;

- Managing money and/or property;
- Applying for governmental benefits or entitlements; and
- Deciding on residential choices.

Florida law requires that guardians and guardian advocates consider the ward's wishes and allow them to participate in decisions affecting their life. Furthermore, Florida law places a duty upon guardians to notify the court if they believe that the ward has regained capacity and/or one or more of the rights that have been removed should be restored.

Guardian Advocate for Individuals receiving Mental Health Treatment (Florida Statute § 394.4598)

The administrator of a facility may petition the court for the appointment of a guardian advocate upon the opinion of a psychiatrist that the patient is incompetent to consent to treatment. If the court finds that a patient is incompetent to consent to treatment and does not already have a guardian with the authority to consent to mental health treatment in place, the court shall appoint a guardian advocate. A person who is appointed as a guardian advocate must agree to the appointment.

When selecting a guardian advocate, the court shall give preference to a Health Care Surrogate, if one has been designated by the patient. If the patient has not previously selected a Health Care Surrogate, the court shall select a guardian advocate from the list of individuals below (in order), unless reason is given as to why the individuals would not serve as a guardian advocate:

- 1 The patient's spouse.
- 2 An adult child of the patient.
- 3 A parent of the patient.
- 4 The next closest adult family member of the patient.
- 5 An adult friend of the patient.
- 6 An adult trained and willing to serve as guardian advocate for the patient.

The following people cannot be appointed as a patient's guardian advocate:

- A professional providing clinical services to the patient under this part.

- The licensed professional who initiated the involuntary examination of the patient.
- An employee, administrator or board member of the facility providing the examination of the patient.
- An employee, administrator or board member of a treatment facility providing treatment of the patient.
- A person providing any substantial professional services, excluding public and professional guardians, to the patient, including clinical services.
- A creditor of the patient.
- A person subject to an injunction for protection against domestic violence under Florida Statute § 741.30, whether the order of injunction is temporary or final, and for which the patient was the petitioner.
- A person subject to an injunction for protection against repeat violence, stalking, sexual violence or dating violence under Florida Statute § 784.046, whether the order of injunction is temporary or final, and for which the patient was the petitioner.

The facility requesting must provide sufficient information so the guardian advocate can decide whether to give express and informed consent to the treatment, including information that the treatment is essential to the care of the patient, and that the treatment does not present an unreasonable risk of serious, hazardous or irreversible side effects. Before giving consent to treatment, the guardian advocate must meet and talk with the patient and the patient’s physician in person, if at all possible, and by telephone, if not.

If a guardian with the authority to consent to medical treatment has not already been appointed, or if the patient has not already designated a Health Care Surrogate, the court may authorize the guardian advocate to consent to medical treatment, as well as mental health treatment, and have the same abilities to make health care decision as a health care proxy. However, the guardian advocate cannot consent to the following procedures unless they have received express court approval:

- Abortion.
- Sterilization.
- Electroconvulsive treatment.

- Psychosurgery.
- Experimental treatments.

The guardian advocate shall be discharged when the patient is discharged from an order for involuntary outpatient placement or involuntary inpatient placement or when the patient is transferred from involuntary to voluntary status. During an involuntary placement, upon sufficient evidence, the court may restore, or the hearing officer may recommend that the court restore, the patient’s competence.

Full (Plenary) Guardianship

When the court finds that an individual is unable to perform all of the tasks necessary to care for themselves or property, the court will rule that the individual is totally incapacitated. This is known as a full or plenary guardianship. This is the most restrictive type of guardianship, and few people require it.

When someone is placed in a full guardianship, the guardian can make the following decisions for the ward:

- To enter into contracts.
- To sue and defend lawsuits.
- To apply for government benefits.
- To manage the ward’s property.
- To decide where the ward will live.
- To agree to medical and mental health treatment.
- To make decisions about the ward’s social environment or other aspects of their life.

When someone is placed in a full guardianship, they may lose the following rights, but these rights cannot be given to the guardian:

- To marry.
- To vote.
- To personally apply for government benefits.
- To have a driver license.
- To travel.
- To seek or retain employment.

There are some rights that may never be taken away, even if someone is placed in a full guardianship. These include:

There are some rights that may never be taken away, even if someone is placed in a full guardianship.

- To have an annual review of the guardianship report and plan.
- To have continuing review of the need for restriction of the ward's rights.
- To have their rights restored at the earliest possible time.
- To be treated humanely, with dignity and respect, and to be protected against abuse, neglect and exploitation.
- To have a qualified guardian.
- To remain as independent as possible, including having the ward's reasonable preference as to place and standard of living honored.
- To be properly educated.
- To have their property managed in a responsible way, and to be informed about how their property is managed.
- To receive services and rehabilitation necessary to maximize the quality of life.
- To be free of discrimination related to their incapacity.
- To have access to the courts.
- To be represented by an attorney.

The guardian cannot make the following decisions unless the court specifically allows it:

- Commit the individual to a facility, institution or licensed service provider without going through formal placement proceedings.
- Consent to experimental biomedical or behavioral procedures.
- Petition to dissolve the individual's marriage.
- Consent to termination of the individual's parental rights.
- Consent to a procedure for sterilization or abortion.

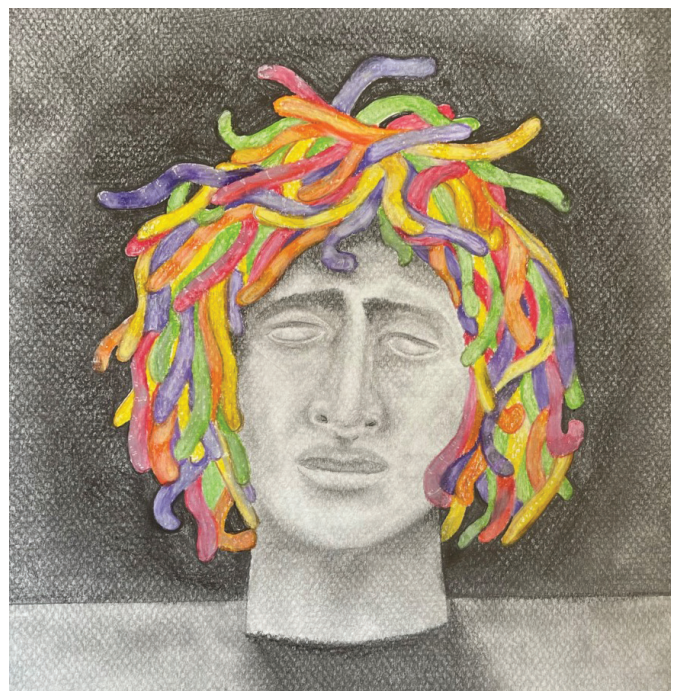
Restoration of Rights After a Determination of Incapacity

In Florida, if a person who was previously determined to be incapacitated later regains the ability to make willful and knowing decisions about their life, that person, or another interested person, may ask the court to restore capacity. This is called a suggestion of capacity. Under Florida Statute §744.464, once a person files a suggestion of capacity with the court, the court will send a physician to examine the ward and make a recommendation regarding their capacity.

The court will also notify the guardian about the suggestion of capacity. The guardian has the option to object or disagree with the suggestion of capacity. If there are no objections filed, and the physician establishes that all or some of the ward's rights should be restored, the court will enter an order to restore the rights that were previously taken away in accordance with the physician's findings.

If someone files an objection with the court, or if the physician finds that restoration to capacity is not appropriate for the ward, the case will move forward to a hearing. During the hearing, an attorney will represent the ward, and the court will weigh all evidence to determine if the suggestion of capacity shall be denied or if the ward's rights should be restored.

Illustration by
Daniella Young



Additional Considerations for Youth with Disabilities in Foster Care

Youth with disabilities in foster care have additional considerations when moving from adolescence to adulthood, especially when it comes to decisions around education, transition planning, finances and continued support past the age of 18.

EDUCATION FOR YOUTH IN STATE CARE

When children are in state care it may not be clear which person is the parent for educational decision making. It is important for someone to be designated as the educational decision maker.

Who Can Be a Parent for Educational Decision Making?

Under Florida education law, the term “parent” includes parents, guardians, person in a parental relationship to a student or “any person exercising supervisory authority over a student in the place of a parent.” Foster parents, relatives and non-relative caregivers fall under the last category, but group home workers do not.

Birth/Adoptive Parent if Parental Rights Were NOT Terminated – Parents of youth in the dependency system have the right to participate in educational decision making for their children unless that right was specifically taken away. That means that parents have the right to receive notice of and participate in all meetings and decisions in the same manner as parents whose children are not in state care. If the parents are not willing or available to participate in the youth’s education, then someone else must fill that role.

Parental Rights Terminated or Educational Rights Removed – Parents cannot participate in making decisions for their children after their parental rights are terminated. Parental rights are terminated through a court process called termination of parental rights (TPR). Parents

may also be prohibited from making decisions, such as educational decisions, for their children if the court specifically orders that they may not make such decisions.

Youth Living with Relatives and Fictive Kin (Non-Relatives)

– Many youth in state care live with grandparents, aunts, uncles or cousins. Others live with adults who are like family. The adults responsible for caring for those youth are considered parents for education purposes and can make the same educational decisions as parents if the parent is not available. But if the caregiver is not willing or available to participate in the youth’s education, then someone else must fill that role.

Foster Parents – Foster parents can be considered parents for education purposes. Foster parents who have cared for a child for only a short time, or are not interested in the child’s education, should not be considered as parents for special education purposes, and someone else must fill that role.

Surrogate Parents Who are Educational Decision Makers Only – A surrogate parent is an adult who has been appointed to represent the educational interests of an exceptional student who does not have a parent or guardian. A surrogate parent does not have to live with the child but should be someone who has or develops a relationship with the child. A surrogate parent has all the rights and responsibilities of a parent in the educational process. Surrogate parents can, for example:

- ✓ Observe the student in school.
- ✓ Review the student’s records.

- ✓ Meet with teachers.
- ✓ Participate in Individualized Education Program (IEP) and other meetings concerning the youth.
- ✓ Help make decisions about the youth's education.
- ✓ Develop a Transition Plan.
- ✓ Give or withhold consent for actions proposed by the school district.
- ✓ Ask the school to take actions related to the student's education.
- ✓ Sign permission slips for field trips, records and photograph releases.
- ✓ Invoke the procedural safeguards of the law (requesting due process hearing for example).

A surrogate parent can be appointed either by the school board or the dependency court. Many students with disabilities in state care have a surrogate parent appointed through the school system. Youth and their advocates should seek the appointment of a surrogate parent if there is no adult serving in that role.

Who CAN be a Surrogate Parent? – The basic requirement is that the person be over the age of 18 and complete training that shows that they have the knowledge, skills and experience to do the job. Guardians ad litem are eligible to be surrogate parents.

Who CANNOT be a Surrogate Parent? – People who work for the state or public school district and people who work for any agency responsible for caring for the youth are not eligible. This includes employees of the Department of Children and Families (DCF), Juvenile Justice, the Agency for Persons with Disabilities, Community Based Care child welfare providers and sub-contracted agencies.

This means that case workers, group home staff and school-based counselors cannot be surrogate parents. But a foster parent, case worker or caregiver at a group home may act as a parent in the school setting by approving participation in school activities such as sports, field trips and clubs, attending events, and providing excuses for absences.

However, the fact that a foster parent, relative or non-relative caregiver works for a state agency or public school does not prevent them from acting as an educational decision maker for children who live with them.

When youth are in state care there is often a great deal of confusion as to who is responsible for acting as the parent for educational purposes. The dependency court is supposed to identify the educational decision maker at each judicial review hearing. Those hearings take place at least every six months but may happen more frequently if the court wishes. At the judicial review, the court issues a written order that should identify the educational decision maker. The case worker can provide a copy of the order if the child does not already have one. If a decision maker has not been identified, or if the person should be changed, any party can ask the court to decide who the educational decision maker should be. The child's attorney or guardian ad litem can make a motion, or any person can ask the attorney for DCF for help getting a decision. All youth in state care should have a designated educational decision maker.

TRANSITION PLANNING FOR YOUTH IN STATE CARE

Florida requires that the DCF provide youth and young adults with opportunities and services that are appropriate for their age and special needs in order to build life skills and increase the ability to live independently and become self-sufficient.

When it comes to transition planning for youth in state care, there are three main types of plans:



Independent Living Skills Plans –

Independent Living Skills Plans address what skills children need to learn on their path to adulthood. They are documented in the child's case file, but not a formal part of the Case Plan. They begin at age 13.



Case Plans – All child welfare cases have a Case Plan that address both the parents and all the children in the family.



Transition Plans – Transition Plans address what will happen after the child turns 18 and what is needed to get there. The Transition Plan is required in addition to the Case Plan.



Independent Living Skills Plans

Independent living skills are best acquired in normal day to day activities in natural living environments. Florida expects the caregivers of children in foster care to help children acquire the skills they need for a successful transition to adulthood. DCF will support caregivers to help them build life skills for the children in their care. Florida has a formal process for documenting skill acquisition and planning for how to build skills that children need.

Informal Assessments and Independent Living Skill Plan with Caregiver – Starting at age 13, the case worker is supposed to conduct an informal assessment of independent living skills each month. This is done during typical interactions and by observation at monthly visits. The case manager and caregiver use a Life Skills Progress Documentation log to track what skills the child is working on. The child and adult supporters who have concerns can talk to the case worker and caregiver about what skills the child needs and how they can be acquired.

Formal Assessments and Independent Living Skill Plan with Youth – Beginning at age 16, the state uses a standard assessment tool to assess the young person's independent living skills. When that assessment is done, a meeting is held with the youth, caregiver, guardian ad litem and supportive adults selected by the youth to help the youth set specific, measurable goals for an Independent Living Skills Plan.

Independent Living Skills Plans must include:

- ✓ Goals for acquiring the skills that the assessment showed as needing more work;
- ✓ Activities, steps or demonstrated behaviors for achieving the goals; and
- ✓ Resources to assist in completing the activities.



Case Plans

A Case Plan includes a description of the youth's needs and a description of how the state is going to provide services to address those needs. The Case Plan has a number of required components. Case Plans must be approved by the dependency court. The case worker is supposed to explain the Case Plan and provide a copy to children.

Any child who does not know what is in the Case Plan should ask the case worker for a copy. All children can participate in case planning. Younger children are not always included but beginning at age 14, young people must be invited to participate in case planning. Youth can bring a supportive adult to the case planning meeting. It is very important for children to participate in the case planning. Important decisions about what services the child needs and plans for the future are part of the Case Plan.

Starting when a child turns 13, the Case Plan should include a "written description of the programs and services that will help the child prepare for the transition from foster care to independent living." The youth's Independent Living Skills Plan should be used as the basis for this section of the Case Plan.

At age 16, DCF and the Community Based Care lead agency must meet with the young person, their caregiver and supportive adults to develop a Transition Plan in addition to the Case Plan.



Transition Plans

A Transition Plan sets out the youth's goals and choices. It also describes the services necessary to successfully transition to adulthood. Transition Plans are created by the youth with adult supporters. The Transition Plan should be coordinated with any Transition Plans created in school or with vocational rehabilitation (VR) if the youth is receiving VR services.

Each plan must address:

- ✓ Short-term goals (school, work, driver license, study habits, etc.)
- ✓ Long-term goals (education, career, travel, self-sufficiency, relationships, etc.)
- ✓ Housing (where youth will live after age 18; this might include Extended Foster Care or Postsecondary Educational Services and Supports.
- ✓ Health Insurance.
- ✓ Education.
- ✓ Financial Literacy.
- ✓ Driver License.
- ✓ Workforce Support/Employment.

The Transition Plan may also address establishing and maintaining naturally occurring mentoring relationships.

Each youth should have a Transition Facilitator (who may be the Independent Living Specialist). That person is responsible for getting to know the teen and developing a relationship with them. The Transition Facilitator brings everyone together to create and update the Transition Plan.

The transition planning process also includes making sure the youth has all of their important documents. Those documents include their birth certificate, Social Security card, driver license or state identification card, Medicaid/other health insurance card, and many other important items.

Court Oversight

The dependency court has a role in making sure that young people involved in the child welfare system get the help they need to prepare for adulthood. Beginning at age 16, at court hearings the judge will ask the young person to give input on how they are doing and what help they need in the transition to adulthood. Also, the state is required to report on how the young person is doing with gaining independent living skills.

The dependency court will also consider whether a young person might need assistance with decision making after age 18. If that is a possibility, the court can start the process for having a team of people to consider the level of assistance needed. The process should be started early enough to have a plan in place before the young person turns 18.

USING FINANCIAL RESOURCES WISELY

Many youth in state care receive government benefits each month. Often, though, the money is not used to meet the youth's specific needs.

Children with disabilities who are in state care often receive funds from the Social Security Administration (SSA). Most of these youth receive Supplemental Security Income (SSI) but others may receive other Social Security benefits from a parent such as retirement, disability or death benefits. (DCF refers to these benefits as SSA.)

Still other youth might receive Veterans benefits, private insurance benefits or child support. Money received by the state for the youth is placed into a "Master Trust" fund that is held either by DCF or the Community Based Care lead agency.

Representative Payees

Some children may have a caregiver or other adult who receives the money rather than DCF. This person is called a Representative Payee. Caregivers can use the money for current needs including food, shelter and medical needs. They can also use the money for personal needs such as clothing and recreation. They can save the rest of the funds for future use. The Representative Payee must keep records about how the money is spent.

Children should discuss their needs with their Representative Payee. SSA can change the Representative Payee to a different person if the person is not acting in the child's best interest. Ask the case worker, guardian ad litem or attorney for help in getting such a change made—because those funds belong to the youth and should be used to benefit the youth.

Current and Long-Term Needs

Also, funds are to be used for both current and long-term needs. The case manager is supposed to balance the current and long-term needs of children in planning for how the money is used. Youth and their advocates should work with the case manager to create a spending plan that balances those needs. There is not a specific time that the case manager is required to discuss spending with youth, but youth can ask their case manager to talk about spending at any time.

Each month that a child gets money added to the Master Trust account, the state takes some of that money to pay itself back for the cost of care. The cost of care is the amount paid to the foster parent or group home. Cost of care is considered a current need. If the money that comes in that month is less than the cost of care, the state can take it all, minus the "personal allowance" amount. But it will not take money that is already in the account to make up the difference.

The case worker, child and other adults supporting the child should also advocate for funds to be used for the other current and long-term needs. Current needs can

include things like tutoring, sports, music/drama/dance lessons, scouts, camp, assistive technology, art supplies, electronics, transportation and clothing. Anything that that can benefit the child (and is not illegal) can be requested. Long-term needs can include things such as security and utilities deposits, furniture, educational and vocational items, uniforms, safety equipment and tools.

Ensuring Youth Know How Money is Being Spent and How to Request Funds

The child welfare case worker is required to notify children about all purchases made with their money. If the purchase is \$500 or more, the case worker must also notify the child's parents and guardian ad litem.

The state must notify children about their right to request funds from their Master Trust account at least twice a year. That notice is a document called "Notice of Fee Assessment and Rights of Foster Child." That document should be provided to the youth, their attorney, guardian ad litem and parents at the time of each judicial review. It should:

- Notify the youth, the child's guardian ad litem and attorney, and others of the intent to deduct cost of care.
- Leave at least \$15 a month in "personal allowance" in the fund.
- Provide the youth with a form to seek a waiver of cost of care or request to increase personal allowance.
- Youth and their advocates don't have to wait for the next judicial review. They can ask the case manager to provide information about their account and how to request funds at any time.

Advocating for Use of Funds to Benefit the Youth

Youth and their advocates should make sure that Master Trust funds are used to help youth with services and supports to address their disability, promote the ability to have a normal childhood and successfully transition to adulthood.

Youth and their advocates can use the waiver form attached to the Notice of Fee Assessment to request funds relating to specific needs. They can also seek an increase in "personal allowance" to pay for monthly expenses, or

they may ask to waive all cost of care for several months to save for a specific purpose (for instance, summer camp, or the deposit on an apartment). There is no limit to the number of times a youth can make a request or the amount they request. But it is important to note that waiver requests that explain what the money will be used for are more likely to be granted than requests that do not provide an explanation.

If the request for a waiver is denied, the youth may seek a fair hearing with DCF. The notice of denial will have information on how to request a fair hearing. If the youth does not already have an attorney, they can ask their guardian ad litem or case manager for help finding one. Many legal aid programs are willing to represent youth who have been denied a waiver. However, most denials occur because the request did not provide enough information about the reason the money was needed and how it would be spent. So before appealing, it might be faster and easier to find out why it was denied and try to fix the problem.

Because SSI is an income-based program, it does not pay benefits to people who have \$2,000 in assets (in their Master Trust account.). That means if there is more than \$2,000 in the youth's account then the SSI payments will stop. If the account builds up, the youth should work with their case manager to plan how to spend some of the money to meet current or long-term needs. All youth who exit care should seek a waiver so that they can have the full \$2,000 available for transition expenses when they turn 18. The youth does not have to pay income tax on that money. If the money in the Master Trust comes from sources other than SSI, the account can have more than \$2,000 in it.

Florida law requires that the money in the account be provided to the youth when they turn 18 or to the caregiver if the youth's child welfare case is closed before age 18. The child's attorney, guardian ad litem or other advocate should ask for a court order to make sure that happens. Otherwise, the money will be sent back to SSA, and it can take months before it will be given to the youth.

INDEPENDENT LIVING BENEFITS

Most former foster youth are eligible for financial assistance after they turn 18. You can read about these

benefits below and in the Health Care Benefits and Social Security Benefits sections of this guide.

Tuition Assistance

Florida offers former foster youth free tuition for education after high school at public colleges and universities. This tuition and fee exemption is available until the student turns 28 years old.

Eligibility – In order to be eligible for the exemption, the student must have been:

- ✓ In the custody of the DCF (foster care) at age 18;
- ✓ Living with a relative on their 18th birthday because the youth was placed there by a dependency court;
- ✓ Placed in a guardianship by the dependency court after spending at least 6 months in the custody of the department after reaching 16 years of age; or
- ✓ Adopted from DCF after May 5, 1997.

What is Covered – All tuition and fees charged by the Florida College System, State Universities, and workforce education programs run by public school districts. This includes undergraduate, graduate and professional school tuition. There is no limitation or maximum number of credits that are covered.

How to Use the Tuition and Fee Exemption – In order to use the exemption, the student must present an eligibility form to the school. Schools have different processes, so you should ask the school's Financial Aid Office where to take the form to get started. If you do not have the form, contact the Independent Living Specialist for the Community Based Care lead agency where the child welfare case was open. DCF maintains a list of those contacts at: www.ilru.org/projects/cil-net/cil-center-and-association-directory-results/FL.

Medicaid

Young people who age out of care with an open child welfare case are eligible for Medicaid until they turn 26. Until age 21, the Community Based Care lead agency is responsible for ensuring the young person is enrolled in Medicaid. At age 21, the young adult must apply through

the DCF's ACCESS system. Young people who were adopted or placed into guardianship after age 16 but spent six months or more in licensed care prior to their adoption or guardianship are eligible for Medicaid until age 21.

Keys to Independence

The Keys to Independence is a program that assists youth in foster care with obtaining a driver license and auto insurance. All youth in out-of-home care are eligible to enroll in the Keys to Independence program starting at age 15. Young adults who are in Extended Foster Care or Postsecondary Educational Services and Support can also participate in the program. Other young adults who were enrolled in Keys to Independence as youth can remain in the program for up to six months after turning 18 or being adopted or placed into guardianship. The Keys to Independence program pays for the costs relating to obtaining a driver license, including driver education courses, licensing fees, practice driving and car insurance.

Extended Foster Care

Florida foster care is now extended to age 21 for all young adults and to age 22 for youth with disabilities. This is called Extended Foster Care (EFC).

Eligibility – In order to be eligible for EFC, the young person must have been living in licensed care (foster home, with a licensed relative or non-relative, group home or residential treatment) at age 18; and

- ✓ Attending school or a vocational education program;
- ✓ Participating in a program or activity to eliminate barriers to employment;
- ✓ Working at least part-time (80 hours a month); or
- ✓ Not able to participate in one of those activities due to a physical, intellectual, emotional or psychiatric condition that limits participation.

Living Arrangements – When possible, the young adult should be able to remain in the same place after turning 18. If that place is not available or the young adult does not want to remain there, they can live in a "supervised living arrangement" that is approved by DCF or the Community Based Care lead agency and acceptable to the

young adult. Examples include foster home, group home, dormitory, shared housing, apartment and other housing arrangements.

Support Included – Young adults in EFC enter into a Shared Living Plan that discusses:

- Household chores and daily living activities.
- Physical and behavioral health.
- Check-in/curfew and 24-hour crisis intervention.
- Financial resources (room and board, rent, utilities, expenses and allowance).

Postsecondary Education Services and Support

Postsecondary Education Services and Support (PESS) provides former foster youth with funds and services to help them obtain the education and training needed to become independent and self-supporting.

Eligibility – In order to qualify, the youth must:

- Be between 18 and 23 years old.
- Have spent at least six months in licensed care prior to their 18th birthday and either:
 - Is currently in licensed care or was in licensed care at age 18, or
 - Was adopted or placed into a dependency guardianship after the age of 16.
- Be a Florida resident.
- Be enrolled in a postsecondary school full-time. (This includes all Florida colleges, universities and trade schools that are eligible to receive Florida Bright Future funds. For purposes of PESS, only, full-time is a minimum of nine credit hours.) Youth who have a documented disability can enroll part-time (less than 9 hours).

Support Included – Students on PESS can receive a maximum of \$1,256 a month. Until the student can successfully manage the money, the Community Based Care lead agency will pay for housing and utilities and give the student the remaining balance. Students who remain in foster care or a group home will have that living expense paid for and will not get the money.

Youth with documented educational, medical, mental, developmental or physical disabilities are eligible for the same opportunities and services as youth without disabilities. The law requires DCF to provide reasonable accommodations and services to ensure equal opportunities.

Students with disabilities may attend school part-time and still receive full benefits. Youth must however, make satisfactory progress in order to continue receiving funds, whether they go full-time or part-time.

Aftercare Services

In order to qualify for aftercare services, the young adult must be between 18 and 23 years old and not be in EFC.

It provides financial assistance for things such as food, education supplies, transportation, security deposits, rent, utilities, furniture and household items. Aftercare services can also include:

- Mentoring and tutoring.
- Mental health services and substance abuse counseling.
- Life skills classes.
- Parenting classes.
- Job and career skills.
- Counselor consultation.
- Temporary financial assistance for emergencies. This includes things such as medical bills and emergency car repairs. The law does not place any limit on the amount that can be requested or the number of times requests can be made.

Note: Young adults who get PESS are only eligible to receive temporary financial assistance for emergencies.

Extended Guardianship and Adoption Subsidies

Parents and guardians of young adults who were formerly in foster care may be eligible to continue receiving financial assistance to support those young adults between ages 18 and 21. The amount of the subsidy is decided before the guardianship or adoption is final. Guardianship subsidies are usually \$333 a month, and adoption subsidies are at least \$416, but the subsidy amount may be higher if the young adult has special needs.

Eligibility – In order to qualify for extended payments, the young adult must have been adopted or placed into guardianship after the age of 16, and have previously been in licensed care at least six months. The young adult must also be:

- Attending school or a vocational education program;
- Participating in a program or activity to eliminate barriers to employment;
- Working at least part-time (80 hours a month); or
- Not able to participate in one of those activities due to a physical, intellectual, emotional or psychiatric condition that limits participation.

While the adoptive parent or guardian is receiving extended payments, the young adult cannot also receive PESS. Subsidy money goes to the parent or guardian who is responsible for providing care for the young adult, but money does not have to be provided to the child. The PESS payment of \$1,256 will often be higher than the subsidy

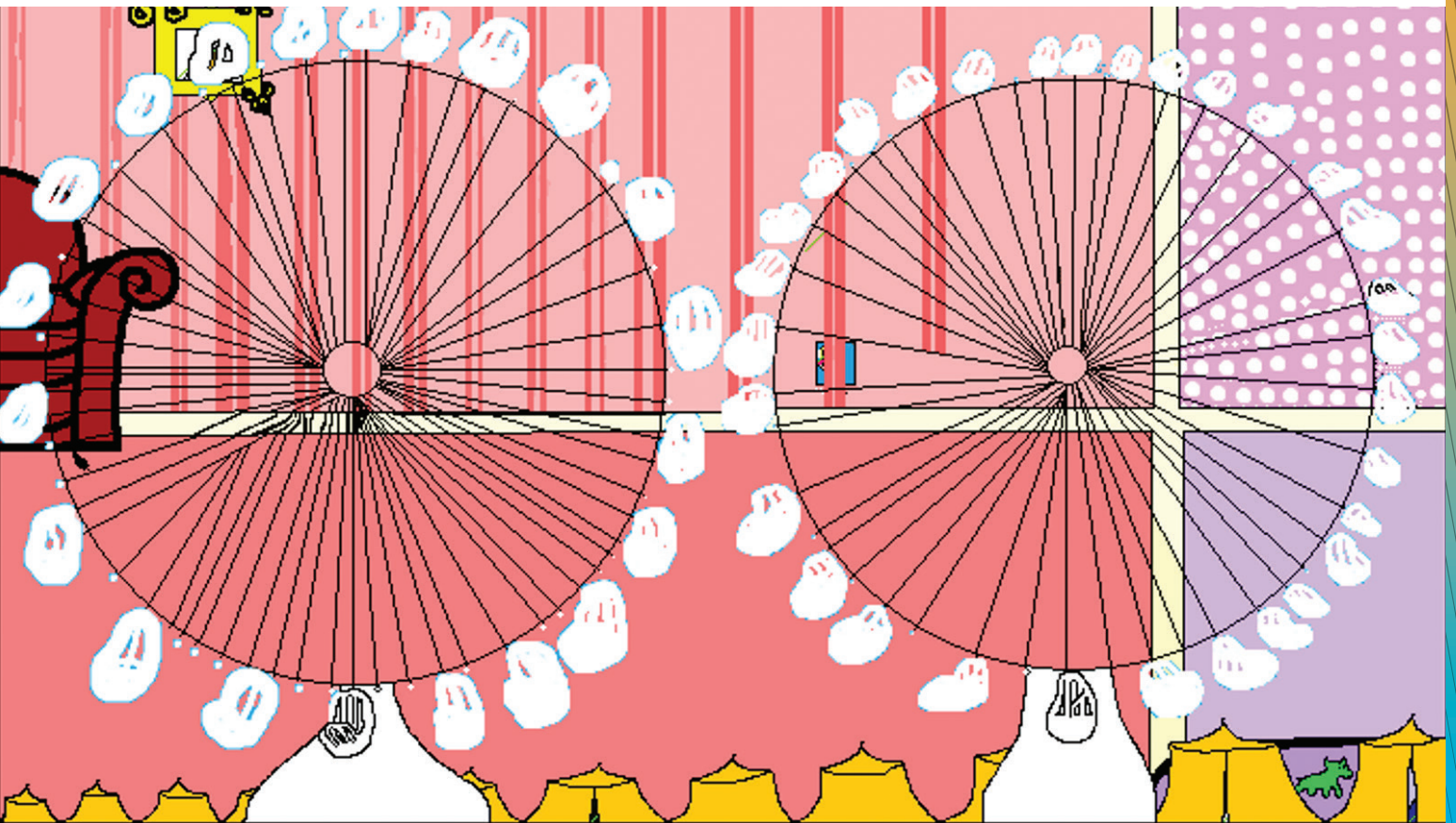
payment. However, young adults will have access to all of the money when they can successfully manage it. But until that time, the Community Based Care lead agency will pay the rent and utilities and give the young adult the remaining money.

Support Provided – The same monthly amount of the adoption subsidy or guardianship assistance payment that the parent or guardian received prior to age 18 is the amount paid until age 21. The young adult also remains eligible for Medicaid to age 21.

Office of Continuing Care

In 2021, DCF created a new Office of Continuing Care to support young adults who were formerly in foster care until age 26. Young adults who aged out of foster care between ages 18 and 22 are eligible for support. The office will provide a point of contact to help with getting housing, food, health care and educational services.

Illustration by
Madison Hongyee



Transition from Pediatric to Adult Health Care

As you get older, your rights and responsibilities related to health care change. As a young adult, you are more likely to manage your own appointments and medications, for instance. You will also want to ensure you have age-appropriate health care providers. As you begin to assume more responsibility for your own health care, you can certainly still ask others for help. In fact, doing so when needed is an important part of the transition to adulthood.

PEDIATRIC VS. ADULT HEALTH CARE

You might be wondering, what exactly is the difference between pediatric and adult health care? While physicians can provide basic care to all people, pediatricians are specially trained to care for infants, children and teens. As a result, they are less familiar with and experienced treating medical conditions that happen more commonly in adults. Also, a pediatric practice is oriented towards growth and development, while an adult practice focuses more on health maintenance and well-being.

REQUESTING ACCOMMODATIONS AND SUPPORTS

If you need an accommodation for your disability in the health care setting, you should inform your provider about how best to assist you. An example might be if you will need help transferring from your wheelchair onto an exam table. If you need special equipment (for example, a lower exam table, Hoyer lift or wheelchair scale) you may want to share this when choosing a provider, in order to find out what equipment they already have and assess general accessibility. Even if they do not have all of the equipment or services you need, they should communicate with you about providing assistance and accommodations. How effective they are at communicating with you about

these issues may impact which health care provider you prefer to use.

TRANSFERRING RECORDS

Once you have an adult health care provider, you will also need to transfer your records. You can start by asking your new provider if they have authorization documents for you to fill out or send to your former doctor or other health providers. Also ask if they need copies of any diagnostic images (e.g., mammogram, CT, MRI) or hospital records.

You may want to use this opportunity to request copies of your medical record for yourself as well. There are some differences when it comes to psychiatric, psychological or psychotherapeutic records, though. When these are requested by the patient or their legal representative, the provider may send a report of examination and treatment instead of copies of records.

The Health Insurance Portability and Accountability Act (HIPAA) entitles you to receive copies of your medical records, whether they're held by health care providers or your insurance company. Under this law, providers cannot deny your request for records. They also cannot charge you for having to locate and retrieve your records. Florida law allows a health care provider to charge no more than the actual cost of copying of records, which may include reasonable staff time or an

amount designated by the regulatory board. These fees vary from provider to provider.

Because there may be a significant wait time to receive or transfer your records, it's best to request your record in advance.

It is important to note that you are considered a legal adult at age 18 and thus are legally responsible for your

own health care. This means that parents and caregivers cannot access your medical information or stay with you during doctor's visits unless you agree. Finally, an important component to managing your own health care is health insurance, which is addressed in the next section of this guide.

Illustration by
Daniella Young



Health Care Benefits

One important aspect of transitioning to adulthood, for all youth, is assuming more responsibility for your own health care, which may include managing your own health care benefits (also referred to as health care insurance or just health insurance). For youth with disabilities, there may be additional considerations. It's important to understand the various options and how they may impact any disability benefits you may receive as well as plans for education and employment.

UNDERSTANDING HEALTH INSURANCE

Generally, you can think of health insurance options for transition-age youth with disabilities as falling into three different categories:

Government-Funded Health Insurance	Private Health Insurance	No Insurance
Examples include: <ul style="list-style-type: none">• Medicaid• Medicare• Tricare	Examples include: <ul style="list-style-type: none">• Job-Based Group Plans• College/University Student Health Plans• Affordable Care Act (ACA) Health Insurance Marketplace (Exchange) Plans	You pay all bills (there may also be a penalty or fine for not having insurance)

Health insurance is a product that pays for health care services and expenses. Every month, a patient pays an insurance premium. The premium is the cost of obtaining health insurance. If you get your health insurance through your job, your employer may pay a portion of the premium. If you have insurance through a state Health Insurance Marketplace, you pay the full premium yourself.

When you go to a health care provider, you will need to present your insurance card. You also may be asked to pay a deductible, co-pay or co-insurance, depending on the type of plan you have. There are different types of health insurance plans designed to meet different needs.

The most common plans are:

- **Health Maintenance Organization (HMO)** – A type of health insurance plan that usually limits insurance coverage to care from health care providers who work for or contract with the HMO.
- **Preferred Provider Organization (PPO)** – A type of health insurance plan where you pay less if you use providers in the plan's network.

A deductible is the total amount you have to pay for your health care before your insurance starts to cover part of the cost. A co-pay is a fixed amount that you pay for each

health care service. Your health care provider will submit a claim to your insurance company asking them to pay for the service that was provided.

All private insurers must provide a list of what benefits are included in your plan and the details of their coverage. Under the Affordable Care Act (ACA), certain essential benefits must be covered, regardless of whether you have met your annual deductible. After a claim is submitted to your insurance company, it will send you an explanation of benefits (EOB) explaining the cost of the treatment, how much of the cost was covered by the insurance company and how much you are responsible for paying.

Insurance companies may deny payment for a service by claiming it is not a medical necessity. When an insurance company does this, you have the right to challenge. The ACA states that health insurance plans must offer an internal appeals process. When you appeal a denial of coverage, the insurance company will do another review of your bill. You can also find out why a claim was rejected.

MEDICAID

Medicaid is a joint federal-state program that finances the delivery of primary and acute medical services, as well as Long Term Services and Supports (LTSS). Medicaid services in Florida are administered by the Agency for Health Care Administration (AHCA). Medicaid eligibility in Florida is determined either by the Department of Children and Families (DCF) or the Social Security Administration (SSA) (for Supplemental Security Income (SSI) recipients).

Generally, to be eligible for Medicaid you must meet both categorical and financial requirements.

States set individual eligibility criteria within federal minimum standards. Generally, to be eligible for Medicaid you must meet both categorical and financial requirements. Categorical requirements mean you are in a certain category of people (such as elderly, individuals with disabilities, children, pregnant women, parents and certain nonelderly childless adults). Financial requirements mean you have limited income and monetary assets.

Medicaid Category – Children

Parents and caretakers may apply for Medicaid on behalf of children under the age of 21 who live in their home, if the family's income is under the limit for the child's age group. Families may also apply for medical assistance for children only through Florida Healthy Kids (see below for more information on this program). Children who do not qualify for Medicaid under these programs may be referred to the Children's Health Insurance Program (CHIP) or Federally Facilitated Marketplace (FFM).

Medicaid Category – Elderly and Individuals with Disabilities

As mentioned earlier, Medicaid eligibility is determined by DCF, except for SSI recipients. Individuals who receive SSI are automatically eligible for Medicaid in Florida.

Medicaid programs that provide full benefits include:

- Medicaid for Aged and Disabled Individuals (MEDS-AD)
- Institutional Care Program (ICP)
- Hospice
- Home and Community Based Services (HCBS) Waiver Programs

Early Periodic Screening Diagnosis and Treatment

Early Periodic Screening Diagnosis and Treatment (EPSDT) entitles children to screening, diagnostic and treatment services to maintain, improve or correct health problems. EPSDT includes screenings (extensive checkups) that must be provided at pre-set intervals based on a child's age. EPSDT also entitles children to all medically necessary treatment services to "correct or ameliorate" conditions discovered by a screen. Treatment must include any service that is covered under federal Medicaid program guidelines, regardless of whether it is listed as covered (for adults) in a state's Medicaid plan. This includes not only basic services from physicians, hospitals and clinics, but also supportive services such as personal care and physical, occupational and speech-language therapy.

FLORIDA KIDCARE

Florida KidCare is the umbrella program for four government-sponsored health insurance programs—Medicaid for Children, MediKids, Florida Healthy Kids and the Children’s Medical Services (CMS) Health Plan—that offer a continuum of coverage for Florida children up to age 18. The latter three of these, MediKids, Florida Healthy Kids and the CMS Health Plan, comprise CHIP. CHIP is a partnership between federal and state governments that provides low-cost health insurance coverage to children in families that earn too much money to qualify for Medicaid.

Medicaid for Children

As noted earlier, Medicaid provides medical coverage to low-income individuals and families who meet both categorical and financial requirements. Families can apply for Medicaid for children only through Florida Healthy Kids.

MediKids

MediKids serves children ages 1 to 4. This component of Florida KidCare is financed by CHIP funds and administered by the AHCA. Most families pay a monthly premium of no more than \$20 depending on income, and there are no co-pays.

Florida Healthy Kids

Florida Healthy Kids is a statewide program for children ages 5 to 18 who are at or below 200% federal poverty level (FPL) and eligible for CHIP premium assistance. Florida Healthy Kids families pay a monthly family premium of \$15 (for family income above 133% up to 158% FPL) or \$20 (for family income above 158% up to 200% FPL), with co-pays for certain services.

Children’s Medical Services (CMS) Plan

CMS operates the CMS Network, a statewide specialty plan for children from birth to 21 years old who have serious and chronic physical, developmental, behavioral or emotional conditions. Children who are clinically eligible can choose the CMS Network as a benefit plan option if they meet income eligibility requirements for Medicaid or CHIP.

For more information visit. www.floridakidcare.org.

HOME AND COMMUNITY BASED SERVICES WAIVERS

Home and Community Based Services (HCBS) Waivers allow individuals to obtain long-term care services and supports in their home or community to avoid an institutional setting. States can waive certain Medicaid program requirements under HCBS Waivers. Waivers permit states to tailor services to meet the needs of a particular target group. Eligible individuals must demonstrate the need for a level of care that would meet the state’s eligibility requirements for services in an institutional setting. States choose the maximum number of people who will be served under a HCBS waiver program.

The Florida HCBS Waivers are:

- iBudget Waiver
- Statewide Medicaid Managed Care Long-Term Care (SMMC LTC) Waiver
- Model Waiver (specialty population waiver)
- Familial Dysautonomia (FD) Waiver (specialty population waiver)

Developmental Disabilities Individual Budgeting (iBudget) Waiver

The iBudget Waiver provides HCBS to individuals with developmental disabilities to live in their homes or the community as assessed by the Agency for Persons with Disabilities (APD) and financial eligibility determined by DCF. Individuals eligible are those who have a primary diagnosis of autism, cerebral palsy, spina bifida, intellectual disabilities, Down syndrome, Prader-Willi syndrome and Phelan-McDermid syndrome, as well as children ages 3-5 who are at a high risk of a developmental disability

Individuals must demonstrate the need for a level of care determination by APD. An iBudget Waiver applicant is likely to be placed on a waiting list due to lack of funded slots. There are 20,000+ individuals on the waiting list. Persons determined to be “in crisis” are placed at the top of the waiting list. The existence of the waiting list for enrollment should not deter individuals from applying.

Statewide Medicaid Managed Care Long-Term Care (SMMC LTC) Waiver

The SMMC LTC Waiver provides HCBS to individuals 18 or older who are eligible for Medicaid due to blindness or disability (or to individuals 65 or older who are eligible for Medicaid based on age) to live in their homes or the community as assessed by the Aging and Disability Resource Center (ADRC) and financial eligibility determined by DCF. Individuals must demonstrate the need for a “nursing facility level of care” as determined by the Department of Elder Affairs’ Comprehensive Assessment and Review for Long-Term Care Services (CARES). Applicants are given a priority rank, based on their assigned priority score, which signifies the assessed need for long-term care services and determines placement on the HCBS waiting list. The existence of the waiting list for enrollment should not deter individuals from applying.

MEDICARE

Medicare is a health insurance program for elderly individuals and certain Social Security disability beneficiaries. Social Security disability beneficiaries are eligible for Medicare after a 24-month qualifying period. There are premiums for Medicare, as well as co-pays and deductibles. If you have limited income and resources, you may be able to get help from a state Medicare Savings Program. If you don’t sign up for Medicare when you’re first eligible, you may have to pay a late enrollment penalty. Medicare comprises four-parts:

- Part A provides inpatient/hospital coverage.
- Part B provides outpatient/medical coverage.
- Part C provides an alternate way to receive Medicare benefits (“Medicare Advantage Plans” offered by private companies approved by Medicare).
- Part D provides prescription drug coverage.

TRICARE

TRICARE is the health care program for uniformed service members, retirees and their families. Biological and adopted children of uniformed service members can use TRICARE until their 21st birthday in most cases. At age 21, you may still qualify for TRICARE (TRICARE

Young Adult) if you are 26 or younger, unmarried or an adult-dependent child. There are premiums for TRICARE Young Adult.

If you do not qualify for TRICARE Young Adult, you may purchase insurance through TRICARE’s Continued Health Care Benefit Program. There are some exceptions to the age limit. These include:

- Full-time students.
- Adult children with disabilities if determined to be incapacitated. This means they must be unable to support themselves due to a severe mental or physical disability.

You can get TRICARE until your 23rd birthday or graduation (whichever is first) if enrolled full time at an approved college. In this case, your sponsor must provide at least 50% of your financial support while in college.

AFFORDABLE CARE ACT (ACA)

Under the ACA, young adults can stay on a parent’s health care plan until age 26. Family plans may also offer Dependent Disabled Adult coverage beyond this age if an adult child is incapable of self-sustaining employment due to disability and dependent on the policyholder for care and financial support.

The ACA also created the Health Insurance Marketplace (also called the exchanges) to help people who do not have insurance coverage. Deductibles and co-pays for health insurance purchased through the exchanges vary a great deal.

Health plans offered through the exchanges must cover certain essential benefits. Also, under the ACA, health insurance companies can’t refuse to cover you or charge you more just because you have a “pre-existing condition,” meaning a health problem you had before the date that new health coverage starts.

For more information, visit www.healthcare.gov.

ACCESS TO RECORDS

It is important to know that you have a right to your medical records under federal law. This means you have the right to ask to see and/or get a copy of your health

records from most doctors, hospitals and other health care providers, such as pharmacies and nursing homes, as well as from your health insurance plan. (There is an exception for psychotherapy notes. You still have a right to your therapist's records about other details, however, such as information about appointments and medications.)

You can get either paper or, if records are kept electronically, electronic copies of your records. You also have the right to have copies of your records sent to someone else. Also, a provider cannot deny you copies

of your records because you have not paid for services; however, they may charge for reasonable costs of copying and mailing them. They also cannot charge you for searching for or retrieving your records.

If you think information in your medical or billing records is incorrect or incomplete, you can request a change or amendment to them. Your health care provider or insurance plan must respond to your request, and complete or correct the information if it created it.

Illustration by
Elizabeth Antonelli



Mental Health

Good mental health is not just the absence of an illness or a mental health disorder. It's about emotional, psychological and social well-being. It involves learning how to adapt to change, develop fulfilling relationships, navigate the complexities of life, make healthy choices and use appropriate coping strategies when faced with challenges. It's important to understand that we all have mental health needs—and addressing them is a critical part of becoming an adult, for youth both with and without disabilities.

THE IMPORTANCE OF SEEKING HELP

It is normal for youth to experience a lot of emotions during adolescence, and they are not always positive. For example, you may experience nervousness, fear, worry or sadness at times. If you experience long-lasting sadness, irritability, extremely high and low moods, anxiety, excessive fear and worry, social withdrawal and isolation, it is important to talk to someone. These feelings may interfere with school, work and relationships.

For some people, the thought of talking to someone about their mental health is scary. But getting treatment for mental health conditions is important because they rarely go away on their own. Left untreated, mental illness can get worse and/or lead to other health problems.

Often, stigma prevents people from getting the support and help they need. Yet, mental illness is common. In fact, one out of every five people will experience some form of it in their lifetime. Deciding to talk to someone about how you're feeling is the first step on your journey to getting

better. Try not to be afraid to reach out for help. A case worker, teacher, school counselor, family doctor or other health professional is a good place to start. You will find that you are not alone. In fact, many people experience the same feelings.

What to Expect

When first talking to a doctor or other professional about mental health, it may be helpful to set reasonable goals beforehand. It is important to understand that diagnosing and treating mental illness takes time, and symptoms do not go away immediately. Examples of early goals might be to explain your symptoms to the doctor, learn about potential diagnoses and collaborate with them to develop a treatment plan.

It might also help to take time before your appointment to write down things to discuss. Try to explain physical, emotional and behavioral changes you've experienced. Also try to be conscious of how your mood affects your everyday life and discuss this with the doctor. You may also be asked to share personal information, such as other

The Baker Act

Florida's Baker Act (Chapter 394 of the Florida Statutes), also known as the Florida Mental Health Act, allows law enforcement, mental health professionals or medical professionals to request a voluntary or involuntary commitment of an individual who is at risk of serious injury to self or others. A person can "Baker Act" themselves in Florida; however, to be on voluntary status, that person must not only be willing to consent to admission and treatment, but also competent to do so.

conditions you have, medications you are taking, traumatic events you may have experienced in the past and/or stressful situations you're currently facing. Writing down questions you'd like to ask in advance will help you not forget them once at the appointment.

THE ORIGINS OF MENTAL HEALTH CONDITIONS

Mental health conditions arise from a combination of different biological and environmental factors. There are hereditary components, for example, meaning that mental illness can run in families. But a person's experiences also come into play. Regardless, mental health conditions are health conditions, not a sign of weakness. Indeed, being in tune with your mental health and taking steps to get help with problems arise is a sign of strength.

Childhood trauma is one factor that can affect mental health. Childhood trauma includes physical, sexual and/or emotional abuse, as well as general neglect, gun violence, interactions with law enforcement, having an incarcerated parent, family use of alcohol/drugs, serious accidents and natural disasters. While childhood trauma can contribute to mental health challenges, many people also develop significant resiliency in its wake. Resiliency is the ability to recover and adapt following a traumatic event. Attributes and actions that contribute to resiliency include optimism, flexible thinking, active coping skills, maintaining a supportive social network, taking care of yourself and embracing a set of strong personal values.

Prevalence and Types of Mental Health Conditions

There are a variety of different mental health diagnoses, and it may be helpful to have an understanding of them as you or someone you know seeks mental health services and supports. Some of the more common mental health conditions include:

- **Major Depressive Disorder** - A major depressive episode is a period of at least two weeks when a person experiences a depressed mood or loss of interest or pleasure in daily activities and has symptoms such as problems with sleep, eating, energy, concentration or self-worth. According to the National Survey on Drug Use and Health, in 2017, the percentage of people aged 18-25 with a major depressive episode was 13.1%.



13.1% of people aged 18-25 had a major depressive episode

- **Anxiety Disorders** - Anxiety disorders are the most common mental health condition, affecting 18.1% of the adult population, according to the Anxiety and Depression Association of America. These disorders involve more than temporary worry or fear, which all people experience from time to time. With anxiety disorders, the anxiety does not go away and can get worse over time, interfering with school, work and relationships. Symptoms may include feeling restless, wound-up or on-edge, fatigue, difficulty concentrating, irritability, having difficulty controlling feelings of worry, and sleep problems.
- **Bipolar Disorder** - Bipolar disorder, formerly known as manic depression, is a mood disorder that causes radical shifts in mood, energy and the ability to carry out everyday tasks. People with bipolar disorder experience periods of intense emotions and changes in behavior, called "mood episodes," which can last days to weeks. Depressive episodes have symptoms of a depressive disorder, meaning a strong sense of sadness with low energy and motivation. Manic episodes are the opposite, when someone may feel energetic, optimistic and even euphoric, which can in turn lead to irrational, impulsive decision-making. The type and intensity of symptoms varies from person to person. According to the National Institute on Mental Health (NIMH), adults with bipolar disorder represent 2.8% of the population.
- **Schizophrenia** - Schizophrenia is a serious mental illness that affects how a person thinks, feels and behaves. People with schizophrenia may at times seem like they have lost touch with reality, and if left untreated, symptoms can be persistent and disabling. People may experience hallucinations, such as hearing voices or seeing things that aren't there. They may also have delusions, which are firmly held beliefs not supported by objective facts, and experience paranoia and irrational fears that others are "out to get them." They may also have thought disorders that

include unusual thinking or disorganized speech. Treatments are available and can be very effective when delivered in a timely, coordinated and sustained manner. The National Alliance on Mental Illness (NAMI) reports that .25% - .64% of the population has schizophrenia.

- **Post-Traumatic Stress Disorder (PTSD)** – PTSD can occur after a person has been through a trauma, meaning a shocking and dangerous event someone experiences or witnesses. According to the National Center for PTSD, 7 to 8% of the population will have PTSD at some point in their lives. It's normal to have upsetting memories, feel on edge or have trouble sleeping after a traumatic event. At first, it may be hard to do activities of daily living, like go to work or school or spend time with people you care about. But most people begin to feel better after a few weeks or months. If someone's feelings persist longer than that and they have trouble functioning, they may have PTSD.
- **Eating Disorders** – There are different types of eating disorders. The most common are anorexia nervosa, body dysmorphic disorder, bulimia nervosa and binge eating disorder. The National Association of Anorexia Nervosa and Associated Disorders (ANAD) reports that 9% of the U.S. population will have an eating disorder in their lifetime.
 - Anorexia nervosa is not getting enough calories in, which leads to a significantly low body weight. There is also an intense fear of gaining weight or becoming fat.
 - Body dysmorphic disorder is characterized as an obsession with an imaginary defect in physical appearance or extreme concern with a slight physical blemish that others may not even recognize.
 - Bulimia nervosa is defined as repeated episodes of binge eating along with compensatory behavior. An episode of binge eating includes eating an amount of food larger than most people eat within a two-hour period with a lack of control over their eating during the episode. The person then compensates for the over-eating with fasting, self-induced vomiting, excessive exercise or use of laxatives, diuretics or other medications.

- Binge eating disorder is characterized by recurrent episodes of binge eating, meaning eating an amount of food that is larger than most people eat within a two-hour period with a lack of control over their eating during the episode. The person may feel they cannot stop eating or control what or how much they are eating. A binge eating episode may also include eating very rapidly, eating until feeling uncomfortably full, eating large amounts of food when not feeling hungry, eating alone because of embarrassment over how much someone is eating, and feeling disgusted, depressed or very guilty afterward.
- **Obsessive-Compulsive Disorder (OCD)** – OCD is a common, chronic and long-lasting disorder in which a person has uncontrollable, reoccurring thoughts (obsessions) and/or behaviors (compulsions) that they feel the urge to repeat over and over. People with OCD may have obsessions, compulsions or both. Obsessions are repeated thoughts, urges or mental images that cause anxiety. Common examples include fear of germs or contamination; unwanted forbidden or taboo thoughts involving sex, religion or harm; aggressive thoughts towards others or self; and needing to have things symmetrical or in a perfect order. Compulsions are repetitive behaviors that a person with OCD feels the urge to do in response to an obsessive thought. Common examples include excessive cleaning and/or handwashing; ordering and arranging things in particular ways; repeatedly checking on things (i.e., checking to see if the door is locked or that the oven is off); and compulsive counting. A person with OCD generally cannot control their thoughts or behaviors; spends at least an hour a day on these thoughts or behaviors; doesn't get pleasure when performing the behaviors or rituals (but may feel brief relief from the anxiety



1.2% of adults will have OCD at some point in their lifetime.

the thoughts cause); and experiences significant problems in their daily life due to these thoughts or behaviors. NIMH reports 1.2% of adults will have OCD at some point in their lifetime.



Illustration by
Anna Roth

MENTAL HEALTH RESOURCES

If you or someone you know is in crisis, free and confidential 24-hour support is available through the National Suicide Prevention Lifeline, at www.suicidepreventionlifeline.org or 800-273-TALK (8255), or the Crisis Text Line, at 741741.

988 has been designated as a three-digit dialing code that will route callers to the National Suicide Prevention Lifeline. While some areas may be currently able to connect by dialing 988, this dialing code will be available to everyone across the U.S. starting on July 16, 2022.

The Substance Abuse and Mental Health Services Administration (SAMHSA) also has a national helpline, at 800-662-HELP (4357), or TTY 800-487-4889. This is a confidential, free, 24-hour-a-day, 365-day-a-year information service (in English and Spanish) for individuals and family members facing mental and/or substance use disorders. It provides referrals to local treatment facilities, support groups, and community-based organizations. You can also find help by using SAMHSA’s online treatment locator at www.findtreatment.samhsa.gov or sending your zip code via text message to 435748 (HELP4U).

Additional resources include:

Mental Health America “Planning for College with a Mental Health Condition”

www.mhanational.org/whats-your-plan-college-mental-health-condition

National Alliance on Mental Illness

www.namiflorida.org

The Trevor Project – Saving Young LGBTQ Lives

www.thetrevorproject.org

Florida Department of Children and Families

www.myflfamilies.com/SAMH-Get-Help

Northern Florida

University of West Florida Counseling and Psychological Services - Pensacola

www.uwf.edu/academic-engagement-and-student-affairs/departments/counseling-and-psychological-services

Florida State University Counseling Services - Tallahassee

www.counseling.fsu.edu/students/counseling

Counseling Center - Tallahassee Community College

www.tcc.fl.edu/student-life/counseling-center

University of North Florida Counseling Services - Jacksonville

www.unf.edu/counseling-center

Central Florida

University of South Florida Counseling Services - Tampa
www.usf.edu/student-affairs/counseling-center

Hillsborough Community College Counseling Services
www.hccfl.edu/support-services/counseling

State College of Florida Counseling Services - Manatee - Sarasota
www.scf.edu/StudentServices/CounselingServices.asp

University of Central Florida Counseling and Psychological Services - Orlando
caps.sdes.ucf.edu

Santa Fe College - Gainesville
www.sfcollege.edu/counseling

University of Florida Counseling and Wellness Center - Gainesville
www.counseling.ufl.edu

Florida Southern College Counseling Services - Lakeland
www.flsouthern.edu/campus-offices/offices-directory/office-of-counseling-services

College of Central Florida Counseling Services - Ocala
www.cf.edu/go/assistance/counseling

Seminole State College of Florida - Sanford
www.seminolestate.edu/counseling/counseling

Florida Institute of Technology Counseling Services - Melbourne
www.fit.edu/student-counseling-center

Southern Florida

Florida Southwestern State College – Naples, LaBelle, Bonita Springs, Punta Gorda, Fort Myers
www.fsw.edu/counseling

Palm Beach State College Counseling Services
www.palmbeachstate.edu/counselingcenter/default.aspx

Florida Atlantic University Counseling and Psychological Services – Boca Raton
www.fau.edu/counseling

Florida Gulf Coast University Community Counseling Center – Fort Myers
www.fgcu.edu/mariebcollege/counseling/communitycounseling/

Barry University – Miami Shores
www.barry.edu/counseling-services

Miami Dade College
www.mdc.edu/student-wellness/resources/default.aspx

Florida International University Counseling and Psychological Services - Miami
dasa.fiu.edu/all-departments/counseling-and-psychological-services/index.html

University of Miami
www.counseling.studentaffairs.miami.edu

Sex, Sex Education and Sexual Assault

As you grow up, your body changes, and this shows in both visible and invisible ways. While changes to your outward appearance—such as the growth of facial hair on males and breast tissue in females—are likely obvious to others, transformations happening inside may not be. These include changes in thoughts and feelings. During this time, you may develop feelings of sexual attraction. This is normal for all youth, both with and without disabilities.

SHORTFALLS IN SEX EDUCATION

Despite the fact that youth with disabilities engage in sexual activity, there is a lack of both sex education and research related to sex and youth with disabilities, and this may contribute to higher incidents of negative consequences.

Why is there such limited education and research? One explanation is a lack of accessible and understandable materials for youth with different types of disabilities. For instance, some health curricula designed for students with intellectual/developmental disabilities (I/DD) don't address sex at all. This may lead youth to learn only from their parents, peers and the internet.

Although we all learn from resources beyond school, information obtained is not always reliable or comprehensive, or even available at all. Some parents or other caregivers may find the subject difficult to talk about or try to “protect” you from learning about sex and the related issues of pregnancy and sexually transmitted diseases. Of course, this not the case with all parents and caregivers, but research indicates it may be more common among parents of children with disabilities. Some parents and caregivers think that if they teach their youth with disabilities about sex, it will make them want to engage in sexual activity.

Research also reveals many misconceptions about sexuality and disability, such as the idea that people with disabilities (and especially women with disabilities)

are asexual. These misconceptions, along with the reality that some youth with disabilities have social skills deficits and experience isolation, means they have a more limited number of people to talk to and learn from about part of adult life, for all people.

OUTCOMES

As noted, a lack of sex education for youth with disabilities has unfortunately led to negative outcomes. These include:

Unplanned Pregnancy – About 40 percent of teen females with I/DD experience teen pregnancy, while the teen pregnancy rate for individuals without disabilities is 18 percent.

Sexually Transmitted Infections (STI) – Males with I/DD contract STIs at a rate of 3 percent, which is the same as the rate for males without disabilities. But for females with I/DD the rate is 26 percent, while the rate for females without disabilities is 10 percent.

Resources

Sexual and Reproductive Health Resources for Adolescents and Young Adults
www.adolescenthealth.org/Resources/Clinical-Care-Resources/Sexual-Reproductive-Health/Sexual-Reproductive-Health-Resources-For-Adolesc.aspx#Friendly

Sex Ed for Individuals with I/DD

www.ncil.org/resources/sex-ed-for-individuals-with-i-dd

Sex Ed for People with Disabilities

www.youtube.com/playlist?list=PLuEvYNNQ-dHeVhbyeJHx9s8oqsvBk621v

SEXUAL ASSAULT

According to the Merriam-Webster dictionary, sexual assault is “illegal sexual contact that usually involves force upon a person without consent or is inflicted upon a person who is incapable of giving consent (as because of age or physical or mental incapacity) or who places the assailant (such as a doctor) in a position of trust and authority.”

In other words, someone you know and trust could force you to participate in activities of a sexual nature even when you say no or are unable to say no. That is sexual assault, and it is wrong and against the law.

In fact, a research study conducted among people who were sexually assaulted found that the majority of their offenders were listed as family members, medical providers and caregivers. This study also revealed that 80 percent of the women with disabilities in the study had been assaulted at least once, and 50 percent had been assaulted 10 or more times. Based on these results, it is estimated that individuals with disabilities are four times more likely to be the victim of sexual abuse.

It is important to know that, regardless of who you are, you have a right to say no to any sexual advance, even if the person is someone you know and trust.

As discussed in this guide’s section on Relationship Violence, research and reporting on sexual assault of people with disabilities are limited, and thus there is very little data, including related differences based on gender, race or sexual orientation. Additional and more varied research is needed to ensure our society’s understanding of this issue is inclusive and sexual assault against people with disabilities, and all people, can be prevented.

It is important to know that, regardless of who you are, you have a right to say no to any sexual advance, even if the person is someone you know and trust. If someone has touched you inappropriately or forced you to participate in unwanted sexual activity, seek care and report the attack to law enforcement as soon as possible.

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Deschaine, M. (2011). How Developmental Disabilities Impact the Sexual Health of Young Adults. *Sexual Health Disparities Among Disenfranchised Youth*. www.oregon.gov/oha/PH/HEALTHYPEOPLEFAMILIES/YOUTH/YOUTHSEXUALHEALTH/Documents/SexualHealthDisparities-DevelopmentalDisabilities.pdf

Shapland, C. (2000). *Sexuality Issues for Youth with Disabilities and Chronic Health Conditions*. Healthy & Ready To Work (HRTW) Policy Brief. Center for Policy and Partnerships Institute for Child Health Policy. files.eric.ed.gov/fulltext/ED446401.pdf

Relationship Violence

As you get older, you may want to date and develop romantic relationships just like your non-disabled peers. Unfortunately, for youth both with and without disabilities, it is possible to connect with the wrong person and become the victim of domestic violence, also called relationship violence. Research shows that people with disabilities, however, have a greater possibility of being abused.

PREVALENCE

Estimates vary widely regarding the percentage people with disabilities who experience abuse. In a review of several studies, researchers found that estimates were between 40% to 67% for women with disabilities and between 44% to 65% for men with disabilities. The lack of accurate estimates is likely in part due to limitations on who can be recruited for a study and what questions can be asked. In addition, even when studies are conducted, there is often limited participation.

There is also limited abuse reporting, for a variety of reasons. These include victims' fear of not being believed, misconceptions among some health care providers that people would not abuse individuals with disabilities, and lack of accessible services and supports for victims. Additional concerns include fear of institutionalization if care support is removed, not being involved in care provider selection or having limited provider options.

It is believed that more vigilance on the part of health care providers to speak to individuals with disabilities alone and evaluate them for indicators of abuse is needed to not only gain a better idea of prevalence, but also increase opportunities to stop further abuse.

WHAT IS RELATIONSHIP VIOLENCE?

According to the National Domestic Violence Hotline, domestic violence (also referred to as Intimate Partner Violence (IPV), dating violence and relationship violence) is a "pattern of behavior used by one partner

to maintain power and control over another partner in an intimate relationship." Relationship violence goes beyond physical abuse to include sexual, verbal, emotional and financial abuse.

Relationship violence may also include disability-specific abuse such as disabling medical equipment or assistive technology, leaving someone in a soiled state, refusal to allow medical care and harming a support animal, to name a few examples.

In addition to understanding what relationship violence may look like, it's important to consider the people with whom you have an interpersonal/intimate relationship, such as personal care attendants and family caregivers. For some youth with disabilities, these individuals may have similar access to your body that an intimate partner would have, since they may provide assistance with bathing, toileting and dressing.

Warning Signs

The U.S. Department of Health and Human Services/ Office on Women's Health cites the following as possible warning signs of abuse:

- Suddenly being unable to meet essential day-to-day living needs that affect health, safety or well-being.
- Lack of contact with friends or family.
- Visible handprints or bruising on the face, neck, arms or wrists.
- Burns, cuts or puncture wounds.
- Unexplained sprains, fractures or dislocations.

- Signs of injuries to internal organs, such as vomiting.
- Wearing torn, stained, soiled or bloody clothing.
- Appearing hungry, malnourished, disoriented or confused.

Sources Used to Develop this Section

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National Coalition Against Domestic Violence (2020) Domestic Violence and Disabilities. www.hope-eci.org/_documents/disabilities.pdf

Florida Department of Children and Families (2020) Local Domestic Violence Centers www.myflfamilies.com/services/abuse/domestic-violence/find-your-local-domestic-violence-center

GETTING HELP

Everyone has the right to have healthy, non-violent, non-abusive relationships. If you or someone you love is in an abusive relationship, please seek help. You can call the National Domestic Violence Hotline at 800-799-7233 (TTY 800-787-3224) or contact one of the community-based organizations below.

Alachua County

Peaceful Paths Domestic Abuse Network
 Phone: 352-377-5690
 FAX: 352-378-9033
 Hotline: 352-377-8255
 SMS Text: 352-316-9958
 352-727-0948 Shelter 24/7
 TDD: 352-377-8255
 Website: www.peacefulpaths.org

Baker County

Hubbard House
 Phone: 904-354-0076
 FAX: 904-354-1342
 Hotline: 904-354-3114
 TDD: 904-354-3958
 Website: www.hubbardhouse.org

Bay County

The Salvation Army of Panama City Domestic Violence and Rape Crisis Program
 Phone: 850-769-7989
 FAX: 850-769-5346
 Hotline: 850-763-0706
 TDD: 800-252-2597
 Website: www.salvationarmypanamacity.org

Bradford County

Peaceful Paths Domestic Abuse Network
 Phone: 352-377-5690
 FAX: 352-378-9033
 Hotline: 352-377-5690
 SMS Text: 352-316-9958
 352-727-0948 Shelter 24/7
 TDD: 352-378-9033
 Website: www.peacefulpaths.org

Brevard County

The Salvation Army Brevard County Domestic Violence Program

Phone: 321-631-2766

FAX: 321-631-7914

Hotline: 321-631-2764

SMS Text: 321-450-4325

TDD: 321-631-2764

Website: www.salvationarmyncbrevard.org

Brevard County

Serene Harbor Inc.

Phone: 321-726-8282

FAX: 321-726-8588

Hotline: 321-726-8282

SMS Text: (321) 236 - 3211

TDD: 321-726-8282

Website: www.sereneharbor.org

Broward County

Women In Distress of Broward County

Phone: 954-760-9800

FAX: 954-832-9487

Hotline: 954-761-1133

TDD: 954-527-5385

Website: www.womenindistress.org

Calhoun County

The Salvation Army of Panama City Domestic Violence and Rape Crisis Program

Phone: 850-769-7989

FAX: 850-769-5346

Hotline: 850-763-0706

TDD: 800-252-2597

Website: www.salvationarmypanamacity.org

Charlotte County

Center for Abuse and Rape Emergencies

Phone: 941-639-5499

FAX: 941-639-7079

Hotline: 941-627-6000

SMS Text: 941-449-8534

TDD: 941-627-6000

Website: www.carefl.org

Chat: www.resourceconnect.com/care/chat

Citrus County

Citrus County Abuse Shelter Association

Phone: 352-344-8112

FAX: 352-344-0548

Hotline: 352-344-8111

TDD: 352-344-8111

Website: www.casaflo.org

Clay County

Quigley House

Phone: 904-284-0340

FAX: 904-284-5407

Hotline: 904-284-0061

TDD: 904-284-0424

Website: www.quigleyhouse.org

Collier County

The Shelter for Abused Women & Children

Phone: 239-775-3862

FAX: 239-775-3061

Hotline: 239-775-1101

TDD: 239-775-4265

Website: www.naplesshelter.org

Columbia County

Another Way

Phone: 386-719-2700

FAX: 386-719-2758

Hotline: 866-875-7983

TDD: 866-875-7983

Website: www.anotherwayinc.net

DeSoto County

Safe Place and Rape Crisis Center

Phone: 941-365-0208

FAX: 941-365-4919

Hotline: 941-365-1976

TDD: 941-365-1976

Website: www.sparcc.net

Dixie County

Another Way

Phone: 386-719-2700

FAX: 386-719-2758

Hotline: 866-875-7983

TDD: 866-875-7983

Website: www.anotherwayinc.net

Duval County

Hubbard House
Phone: 904-354-0076
FAX: 904-354-1342
Hotline: 904-354-3114
TDD: 904-354-3958
Website: www.hubbardhouse.org

Escambia County

FavorHouse of Northwest Florida
Phone: 850-434-1177
FAX: 850-434-9987
Hotline: 850-434-6600
TDD: 850-434-6600
Website: www.favorhouse.org

Flagler County

Family Life Center
Phone: 386-437-7747
FAX: 386-437-4938
Hotline: 386-437-3505
TDD: 386-437-3505
Website: flcfv.org

Franklin County

Refuge House
Phone: 850-922-6062
FAX: 850-413-0395
Hotline: 850-681-2111
TDD: 850-386-6036
Website: www.refugehouse.com

Gadsden County

Refuge House
Phone: 850-922-6062
FAX: 850-413-0395
Hotline: 850-681-2111
TDD: 850-386-6036
Website: www.refugehouse.com

Gilchrist County

Another Way
Phone: 386-719-2700
FAX: 386-719-2758
Hotline: 866-875-7983
TDD: 866-875-7983
Website: www.anotherwayinc.net

Glades County

Abuse Counseling and Treatment
Phone: 239-939-2553
FAX: 239-939-4741
Hotline: 239-939-3112
TDD: 239-939-3112
Website: www.actabuse.com

Gulf County

The Salvation Army of Panama City Domestic
Violence and Rape Crisis Program
Phone: 850-769-7989
FAX: 850-769-5346
Hotline: 850-763-0706
TDD: 800-252-2597
Website: www.salvationarmypanamacity.org

Hamilton County

Another Way
Phone: 386-719-2700
FAX: 386-719-2758
Hotline: 866-875-7983
TDD: 866-875-7983
Website: www.anotherwayinc.net

Hardee County

Peace River Center Domestic Violence Shelter
Phone: 863-413-2708
FAX: 863-413-3079
Hotline: 863-413-2700
TDD: 863-413-2700
Website: www.peacerivercenter.org

Hendry County

Abuse Counseling and Treatment
Phone: 239-939-2553
FAX: 239-939-4741
Hotline: 239-939-3112
TDD: 239-939-3112
Website: www.actabuse.com

Hernando County

Dawn Center of Hernando County
Phone: 352-684-7191
FAX: 352-684-7941
Hotline: 352-686-8430
TDD: 352-686-8430
Website: www.dawncenter.org

Highlands County

Peace River Center Domestic Violence Shelter

Phone: 863-413-2708

FAX: 863-413-3079

Hotline: 863-413-2700

TDD: 863-413-2700

Website: www.peacrivercenter.org

Hillsborough County

The Spring of Tampa Bay

Phone: 813-247-5433

FAX: 813-247-2930

Hotline: 813-247-7233

TDD: 813-248-1050

Website: www.thespring.org

Holmes County

The Salvation Army of Panama City Domestic Violence and Rape Crisis Program

Phone: 850-769-7989

FAX: 850-769-5346

Hotline: 850-763-0706

TDD: 800-252-2597

Website: www.salvationarmypanamacity.org

Indian River County

SafeSpace Domestic Violence Svcs. Inc.

Phone: 772-223-2399

FAX: 772-223-5842

Hotline: 772-228-7023

TDD: 772-228-7023

Website: www.safespacefl.org

Jackson County

The Salvation Army of Panama City Domestic Violence and Rape Crisis Program

Phone: 850-769-7989

FAX: 850-769-5346

Hotline: 850-763-0706

TDD: 800-252-2597

Website: www.salvationarmypanamacity.org

Jefferson County

Refuge House

Phone: 850-922-6062

FAX: 850-413-0395

Hotline: 850-681-2111

TDD: 850-386-6036

Website: www.refugehouse.com

Lafayette County

Another Way

Phone: 386-719-2700

FAX: 386-719-2758

Hotline: 866-875-7983

TDD: 866-875-7983

Website: www.anotherwayinc.net

Lake County

Haven of Lake and Sumter Counties

Phone: 352-315-0591

FAX: 352-315-0462

Hotline: 352-753-5800

TDD: 352-753-5800

Website: www.havenlakesumter.org

Lee County

Abuse Counseling and Treatment

Phone: 239-939-2553

FAX: 239-939-4741

Hotline: 239-939-3112

TDD: 239-939-3112

Website: www.actabuse.com

Leon County

Refuge House

Phone: 850-922-6062

FAX: 850-413-0395

Hotline: 850-681-2111

TDD: 850-386-6036

Website: www.refugehouse.com

Levy County

Another Way

Phone: 386-719-2700

FAX: 386-719-2758

Hotline: 866-875-7983

TDD: 866-875-7983

Website: www.anotherwayinc.net

Liberty County

Refuge House
Phone: 850-922-6062
FAX: 850-413-0395
Hotline: 850-681-2111
TDD: 850-386-6036
Website: www.refugehouse.com

Madison County

Refuge House
Phone: 850-922-6062
FAX: 850-413-0395
Hotline: 850-681-2111
TDD: 850-386-6036
Website: www.refugehouse.com

Manatee County

HOPE Family Services
Phone: 941-747-8499
FAX: 941-749-1796
Hotline: 941-755-6805
TDD: 941-755-6805
Website: www.hopefamilyservice.org
Chat: www.hopefamilyservice.org

Marion County

Ocala Domestic Violence/Sexual Assault Center
Phone: 352-351-4009
FAX: 352-351-9455
Hotline: 352-622-8495
TDD: 352-622-8495
Website: www.ocaladvshelter.org

Martin County

SafeSpace Domestic Violence Svcs. Inc.
Phone: 772-223-2399
FAX: 772-223-5842
Hotline: 772-228-7023
TDD: 772-228-7023
Website: www.safespacefl.org

Miami-Dade County

Miami-Dade Advocates for Victims
Phone: 305-285-5904
FAX: 305-250-9161
Hotline: 305-758-2546
TDD: 305-751-3752
Website: www.safespacefoundation.org

Monroe County

Domestic Abuse Shelter
Phone: 305-743-5452
FAX: 305-289-1589
Hotline: 305-743-4440
TDD: 305-296-6245
Website: www.domesticabuseshelter.org

Nassau County

Micah's Place
Phone: 904-491-6364
FAX: 904-225-9979
Hotline: 904-225-9979
SMS Text: 904-225-9979
TDD: 904-225-9979
Website: www.micahsplace.org

Okaloosa County

Shelter House
Phone: 850-243-1201
FAX: 850-243-6756
Hotline: 800-442-2873
TDD: 850-863-4777
Website: www.shelterhousenwfl.org

Okeechobee County

Martha's House
Phone: 863-763-2893
FAX: 863-763-6712
Hotline: 863-763-0202
TDD: 863-763-0202
Website: www.marthashouse.org

Orange County

Harbor House of Central Florida
Phone: 407-886-2244
FAX: 407-886-0006
Hotline: 407-886-2856
TDD: 407-886-2856
Website: www.harborhousefl.com

Osceola County

Help Now of Osceola
Phone: 407-847-3260
FAX: 407-847-8121
Hotline: 407-847-8562
TDD: 407-846-2472
Website: www.helpnowshelter.org

Palm Beach County

Aid to Victims of Domestic Abuse

Phone: 561-265-3797

FAX: 561-265-2102

Hotline: 800-355-8547

TDD: 800-355-8547

Website: www.avdaonline.org**Palm Beach County**

YWCA of Palm Beach County,

Also Known As: Harmony House

Phone: (561) 640-0050

FAX: (561) 640-9155

Hotline: (561) 640-9844

TDD: (561) 965-8530

Website: www.ywcapbc.org**Pasco County**

The Salvation Army Domestic Violence

Program of West Pasco

Phone: (727) 856-6498

FAX: (727) 857-1907

Hotline: (727) 856-5797

TDD: (727) 364-6132

Website: www.salvationarmywestpasco.org**Pasco County**

Sunrise Domestic and Sexual Violence Center

(also known as Sunrise of Pasco)

Phone: (352) 521-3358

FAX: (352) 521-3099

Hotline: (352) 521-3120

Website: www.sunrisepasco.org**Pinellas County**

The Haven of RCS (also known as RCS Pinellas)

Phone: (727) 584-3528

FAX: (727) 461-4702

Hotline: (727) 442-4128

SMS Text: (727) 465-6549

TDD: (727) 223-4946

Website: www.rcspinellas.org**Pinellas County**

Community Action Stops Abuse (CASA)

Phone: (727) 895-4912 (Ext. 100)

FAX: (727) 821-7101

Hotline: (727) 895-4912 (Ext. 1)

TDD: (727) 828-1269

Website: www.casa-stpete.org**Polk County**

Peace River Center Domestic Violence Shelter

Phone: (863) 413-2708

FAX: (863) 413-3079

Hotline: (863) 413-2700

TDD: (863) 413-2700

Website: www.peacerivercenter.org**Putnam County**

Lee Conlee House

Phone: Outreach: (386) 325-4447

FAX: (904) 201-3991

Hotline: (386) 325-3141 (TTY accessible)

SMS Text: (386) 546 - 9260

TDD: (386) 325-3141

Website: www.leeconleehouse.org**Santa Rosa County**

FavorHouse of Northwest Florida

Phone: (850) 434-1177

FAX: (850) 434-9987

Hotline: (850) 434-6600

TDD: (850) 434-6600

Website: www.favorhouse.org**Sarasota County**

Safe Place and Rape Crisis Center (SPARCC)

Phone: (941) 365-0208

FAX: (941) 365-4919

Hotline: (941) 365-1976

TDD: (941) 365-1976

Website: www.sparcc.net**Seminole County**

SafeHouse

Phone: (407) 302-5220

FAX: (407) 302-1080

Hotline: (855) 655-7233

TDD: (855) 655-7233

Website: www.safehousefl.com

St. Johns County

Safety Shelter of Saint Johns County
(also known as Betty Griffin Center)

Phone: (904) 808-8544

FAX: (904) 808-8338

Hotline: (904) 824-1555

TDD: (904) 824-1555

Website: bettygriffincenter.org

St. Lucie County

SafeSpace Domestic Violence Svcs. Inc.

Phone: (772) 223-2399

FAX: (772) 223-5842

Hotline: (772) 288-7023

TDD: (772) 288-7023

Website: www.safespacefl.org

Sumter County

Haven of Lake and Sumter Counties
(also known as Haven)

Phone: (352) 787-5889

FAX: (352) 787-4125

Hotline: (352) 753-5800

TDD: (352) 753-5800

Website: www.havenlakesumter.org

Suwannee County

Vivid Visions

Phone: (386) 364-5957

FAX: (386) 364-1732

Hotline: (386) 364-2100

TDD: (386) 364-2100

Website: www.vividvisionsinc.org

Taylor County

Refuge House

Phone: (850) 922-6062

FAX: (850) 413-0395

Hotline: (850) 681-2111

TDD: (850) 386-6036

Website: www.refugehouse.com

Union County

Peaceful Paths Domestic Abuse Network

Phone: (352) 377-5690

FAX: (352) 378-9033

Hotline: (352) 377-8255

SMS Text: 352-316-9958

352-727-0948 Shelter 24/7

TDD: (352) 377-8255

Website: www.peacefulpaths.org

Volusia County

Beacon Center (also known as Domestic Abuse Council)

Phone: (386) 257-2297

FAX: (386) 248-1985

Hotline: (386) 255-2102

TDD: (386) 255-2102

Website: www.mybeaconcenter.com

Wakulla County

Refuge House

Phone: (850) 922-6062

FAX: (850) 413-0395

Hotline: (850) 681-2111

TDD: (850) 386-6036

Website: www.refugehouse.com

Walton County

Shelter House

Phone: (850) 243-1201

FAX: (850) 243-6756

Hotline: (800) 44-Abuse (442-2873)

TDD: (850) 863-4777

Website: www.shelterhousenwfl.org

Washington County

The Salvation Army of Panama City Domestic Violence and Rape Crisis Program

Phone: (850) 769-7989

FAX: (850) 769-5346

Hotline: (850) 763-0706

TDD: (800) 252-2597

Website: www.salvationarmypanamacity.org

LGBTQ+ Youth

Disability impacts people from all backgrounds and all walks of life. What's more, disability is only one part of someone's identity. There are many things that make you who you are, and some youth with disabilities, just like some youth without disabilities, identify as lesbian, gay, bisexual, transgender or queer, commonly referred to as LGBTQ+. As with all LGBTQ+ youth, LGBTQ+ youth with disabilities should be aware of laws and regulations that protect them from discrimination based on their sexual orientation or gender identity.

THE LEGAL LANDSCAPE

On June 26, 2015, the U.S. Supreme Court struck down all state bans on same-sex marriage, legalizing it in all 50 states and requiring states to honor out-of-state same-sex marriage licenses. Five years later, on June 15, 2020, the U.S. Supreme Court ruled that an employer who fires someone merely for being gay or transgender violates Title VII of the Civil Rights Act. This landmark civil rights legislation, passed in 1964, prohibits discrimination based on race, color, religion, sex, national origin, and now—because of the 2020 ruling—sexual orientation and gender identity.

In 2021, the Florida Commission on Human Relations determined it would enforce state civil rights laws that prohibit sex discrimination and that, due to the U.S. Supreme Court decision *Bostock v. Clayton*, their protections apply to individuals who are LGBTQ+. In this case, the U.S. Supreme Court affirmed that it is illegal to discriminate against LGBTQ+ individuals under the Civil Rights Act. Also, in 2021, President Biden issued an Executive Order prohibiting discrimination on the basis of sexual orientation and gender identity, making clear its policy to protect the LGBTQ+ community wherever federal law provides protections based on sex.

Given these actions, it is now illegal in the state of Florida to discriminate against someone in employment, housing and public accommodations based on sexual orientation and gender identity. In other words, according to state law, you cannot fire someone, evict them from housing,

Florida has passed more local nondiscrimination laws than any other state in the country, and every single one of them includes sexual orientation and gender identity protections.

or deny them service at a restaurant or store just because they are LGBTQ+. Also, Florida has passed more local nondiscrimination laws than any other state in the country, and every single one of them includes sexual orientation and gender identity protections. These human rights ordinances are listed on the Equality Florida website at www.eqfl.org.

The U.S. Equal Employment Opportunity Commission (EEOC) is the federal agency responsible for enforcing federal laws prohibiting discrimination against a job applicant or employee based on race, color, religion, sex (including pregnancy, transgender status and sexual orientation), national origin, age (40 or older), disability or genetic information. Most employers with at least 15 employees are covered by the laws that EEOC enforces (in the case of age discrimination cases, the threshold is 20). Most labor unions and employment agencies are also covered by these laws. Moreover, these laws apply to all aspects of employment, including hiring, firing, promotions, harassment, training, wages and benefits.

SUPPORT

Many LGBTQ+ individuals, both with and without disabilities, are happy and thriving in Florida. For youth, key predictors of success are attending a school that provides a safe and supportive learning environment and having a caring and accepting support system. Unfortunately, LGBTQ+ youth are more likely than their heterosexual peers to experience discrimination and, as a result, negative health and life outcomes. Negative attitudes toward LGBTQ+ youth lead to increased risk for bullying, teasing, harassment and physical assault. These safety concerns may result in LGBTQ+ youth not attending school, which in turn can lead to low graduation rates and long-term consequences related to higher education, vocational education, employment, mental health, suicide and substance abuse.

LGBTQ+ youth are more likely than their heterosexual peers to experience discrimination.

Illustration by
Tyler Asuncion



To learn more about LGBTQ rights, contact one of the resources below. For assistance with mental health and substance abuse, whether for you or a loved one, whether LGBTQ+ or not, please also see this guide's section on Mental Health.

LGBTQ+ Rights Resources

Equality Florida

www.eqfl.org

The Trevor Project – Saving Young LGBTQ+ Lives

www.thetrevorproject.org

U.S. Equal Employment Opportunity Commission (EEOC)

www.eeoc.gov

American Civil Liberties Union (ACLU)

www.aclu.org/know-your-rights/LGBTQ+-rights

Human Rights Campaign

www.hrc.org/resources/federal-legislation







Lambda Legal




www.lambdalegal.org

Social Media





Today, social media is all around us and can be used in many ways, whether to connect with friends and family or follow the news and popular culture. Many businesses now advertise on social media platforms, and government agencies use them to share important updates and alerts. If you're active on social media, it is important to remember that once something is posted, it is not always easily removed, and even if you do remove something, copies may remain. As with most things in life, there are both positives and negatives of social media.

PROS AND CONS






Pros:	Cons:
 Social media spreads information rapidly.	Not all information on social media is reliable.
 Social media allows you to expand your connections, as well as remain in touch with friends and family including those who are far away.	Not all people on social media are who they claim to be; some are scammers looking to take advantage of others.
 Social media offers an outlet to express yourself.	Not all people will like what you have to say, and, in some cases, negative comments may trigger stress, anxiety and depression.
 Social media lets you join and connect to groups with similar interest and hobbies.	Social media can deter you from other important tasks or cause you to lose focus on daily life and track of time.
 Social media can expand your professional network and expand your business relations.	Potential employers, associates and admissions committees may judge you based on your social media content.
 Social media offers the opportunity to engage in face-to-face and virtual interaction.	Social media can lead to social isolation, and excessive use can lead to a sedentary lifestyle and reduce time outdoors.

Pros:	Cons:
 <p>Social media can help you make new connections and explore new locations and events.</p>	<p>Social media can lead to an invasion of privacy and virtual hacking.</p>
 <p>Social media may empower individuals and lead to positive personal and community changes.</p>	<p>Social media can lead to cyberbullying and cyberstalking.</p>
 <p>Social media lets you quickly share content and help you build an audience.</p>	<p>Content can easily go viral.</p>

Positive examples of social media use:

-  Celebrities such as Justin Bieber, Shawn Mendes, Halsey and The Weekend were discovered due to their social media uploads.
-  In 2014, the Ice Bucket Challenge went viral and helped raise national awareness and funding for Amyotrophic Lateral Sclerosis (ALS) research.
-  During the COVID-19 pandemic social media allowed friends and families to remain close and participate in events remotely, such as birthday parties and graduation ceremonies.
-  Social media has helped people reunite with relatives and pets, find organ donors and solve crimes.

Negative examples of social media use:

-  In 2020, a college football recruit lost his scholarship and acceptance due to a racial slur posted on Snapchat.
-  In 2019, a university admission was rescinded after a trail of racist and derogatory Facebook posts from previous years was found on the applicant's social media platforms.
-  In 2013, a public relations executive posted a racist and insensitive tweet before boarding an 11-hour flight. While on the flight the tweet went viral, and the executive was fired shortly after landing even after attempting to delete the tweet.
-  In 2015, a day-care center employee posted on Facebook how much she hated her job. The post spread in her community, eventually making its way to her employer, who then fired her.
-  In 2020 a, a police officer was fired after posting a picture on Instagram with the caption "Let's start a riot."

Overall, social media posts have led to job offers being rescinded, criminal investigations being started and lost child custody battles. So, while responsible and appropriate use can have benefits, it's important to avoid potential negative consequences, which can be serious and lasting. A key thing to keep in mind is that, once content is posted, you cannot take it back. Thus, when using social media, it's important to be judicious and consider the impact of a post, comment or other engagement not just in the moment, but long term.

Community Integration, Service Animals and Transportation

People with disabilities have the right to full participation in all aspects of community life. As you transition from school to adulthood it's important to understand this, and how to advocate for yourself when needed in order to ensure equal access to facilities and services. Some of the main laws that provide protections are the Americans with Disabilities Act (ADA), Fair Housing Act and Section 504 of the Rehabilitation Act, among others. Together, these laws work to help ensure more inclusive communities, for everyone.

PLACES OF PUBLIC ACCOMMODATION

Let's start with public places such as restaurants, stores, movie theaters, basically anywhere the public is welcome. Title III of the ADA protects your right to access such places of "public accommodation."

For example, public places should have accessible parking, which in Florida means a 12-foot-wide spot with a 5-foot-wide striped access aisle next to it. One access aisle may be shared by two accessible parking spaces. This aisle provides the extra space needed for a wheelchair lift if a vehicle has one. No one is allowed to park in these access aisles, and vehicles should be carefully parked outside of the striped area.

The appropriately marked accessible parking spaces for people with disabilities are only for those who have a disability parking placard issued by the state or a disability (wheelchair) license plate. For additional information about obtaining a disabled parking permit, visit www.flhsmv.gov/motor-vehicles-tags-titles/disabled-person-parking-permits. People who park in accessible spaces without a permit can be ticketed, and fines can be as high as \$500.

From the parking lot into the business, there should be an accessible route that includes curb cuts, ramps and an entrance with a minimum of 32-inch clearance. Many places have automatic door openers, motion detectors or push buttons. While these are very helpful, it is not required under the law to have any automatic doors. However, the pressure it takes to open interior, sliding or folding doors cannot exceed five pounds. For comparison purposes, things that weigh about five pounds might be a butternut squash, chihuahua or laptop computer.

Once inside, any goods and services provided to the public should also be available to you. In a store, for instance, if there is a problem with narrow aisles, products out of your reach, or some other issue that prohibits access, employees should provide assistance upon request. If at a restaurant you need an accommodation, such as someone to read a printed menu, ask the server for assistance. Places of public accommodation must provide reasonable accommodations, but it is your responsibility to ask for them.

If a request is unreasonable, a place of public accommodation is not required to provide it. Some examples include help with eating, dressing or going to

the restroom. Many stores may have electric carts to assist customers with mobility disabilities; however, these are not actually required under the ADA. So, an individual may need to bring their own mobility device (wheelchair, scooter, walker, crutches, etc.) If you need a mobility device, speak with your physician. Your health insurance may cover the cost of a mobility device. You can also contact your local Center for Independent Living (CIL), because many have devices available for loan. You can find your local CIL by visiting www.floridacils.org.

SERVICE ANIMALS

Individuals with disabilities who have service animals have the same equal access rights as those who do not have service animals.

Some service animals are trained through an organization, while others are trained by the individual person. Under the ADA, the definition of a service dog is “any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability. Other species of animals, whether wild or domestic, trained or untrained, are not service animals for the purposes of this definition.” If they meet this definition, dogs are considered service animals under the ADA, regardless of whether they have been licensed or certified by a state or local government.

In addition to its provisions about service dogs, the ADA also has separate provision about miniature horses that have been individually trained to do work or perform tasks for people with disabilities. Miniature horses generally range in height from 24 to 34 inches measured to the shoulders and generally weigh between 70 and 100 pounds. No other animal can be considered a service animal under the definition, and thus other animals may not be allowed in public places.

Only two questions are permitted when questioning the validity of a service animal:

- 1 Is the dog a service animal required because of a disability?
- 2 What work or task has the animal been trained to perform?

It is very important that the dog has been trained to do a specific job or task for you and your specific disability needs. If a dog is an emotional support animal, and its primary purpose is to bring comfort, the ADA’s protections regarding access to places of public accommodation do not apply. The rules for emotional support animals are different when it comes to housing, however. They may be considered reasonable accommodations under the Fair Housing Act.

STATE AND LOCAL GOVERNMENT SERVICES

Title II of the ADA prohibits discrimination on the basis of disability in all state and local government services, programs and activities. This includes, among other things, services, programs and activities provided by public schools, colleges and universities. For instance, after-school programs, summer camps and other activities available to the public must be accessible to youth with disabilities. If you have difficulty accessing a government facility or program, contact the local ADA Coordinator for the city or county, depending on which oversees the program. You should be able to find contact information on the city or county website or you can call city hall or the county office for assistance.

If you encounter problems accessing places of public accommodation or local or state government services, programs and activities, you can file a complaint with the U.S. Department of Justice (DOJ), which enforces Titles II and III of the ADA. Instructions on how to do so are available at www.ada.gov/filing_complaint.htm. You can also call DOJ’s ADA hotline at 800-514-0301.

It is important to note that it is also illegal to discriminate against someone based on disability in the delivery of services, programs and activities provided by the Federal Government. In this case, protections are provided under Section 504 of the Rehabilitation Act.

TRANSPORTATION

Title II of the ADA also requires public transit systems be accessible to individuals with disabilities. This means an individual with a disability must be able to get to a bus or train stop, board a bus or train and travel to their

destination successfully. The ADA requires public transit entities, which provide fixed-route bus or rail services, to also provide complementary paratransit services (shared or individual rides) to people with disabilities who cannot, because of their disability, access the fixed-route system. Individuals with disabilities must apply for and be determined eligible for paratransit services.

Motor Coaches – A coach is a bus used for longer distance service and used for touring and intercity travel. They may also be used for private charter for various events. With 48-hours advanced notice, the ADA requires all motor coach companies to provide services in an accessible vehicle for individuals with disabilities. A motor coach is also known as an “over-the-road bus (OTRB).” A motor coach or OTRB differs from a fixed route (city) bus by its design; it typically has an elevated passenger deck located above a baggage compartment.

The Federal Transit Administration (FTA), which is part of the U.S. Department of Transportation (DOT), helps ensure public transportation systems are accessible to individuals with disabilities. For general information or assistance, contact the FTA at www.transit.dot.gov or call 202-366-4043 or, for Florida residents, 404-562-3500.

Air Travel

The Air Carrier Access Act (ACAA) makes it illegal for airlines to discriminate against passengers because of a disability. DOT is responsible for enforcing the ACAA, which applies to all flights to, from or within the U.S.

If you are planning to travel by air, do research in advance to address your needs and request any accommodations. To start, DOT has a webpage addressing aviation consumer protection and information about traveling with a disability at www.transportation.gov/airconsumer.

Also note that, effective January 2021, DOT defines a service animal as a dog that is individually trained to do work or perform tasks for the benefit of a person with a disability. Thus, DOT does not consider an emotional support animal to be a service animal. Airlines are required to treat psychiatric service animals the same as other service animals, and they may require forms attesting to a service animal’s health, behavior and training. For more details, visit www.transportation.gov/briefing-room/us-department-transportation-announces-final-rule-traveling-air-service-animals.

CENTERS FOR INDEPENDENT LIVING

Centers for Independent Living (CILs) are consumer-driven, non-profit organizations that support community living and independence for people with disabilities. They are run by people with disabilities, for people with disabilities, and operate under a shared philosophy that all people should have equal opportunity to live with dignity, make their own choices and fully participate in their communities.

There are CILs throughout Florida, and they assist people of all ages with all types of disabilities. The five core services offered are:



Information and Referral – CILs can provide or connect you with services in your community to meet your needs.



Independent Living Skills – CILs can help you develop independent living skills including but not limited to goal setting, financial education, employment assistance, and financial, assistive technology and social skills training.



Peer Mentoring and Networking – CILs often offer peer support and mentoring groups for individuals who have similar disabilities and/or interests.



Advocacy – CILs can assist you in developing your self-advocacy skills and understand your rights and responsibilities under the ADA and other nondiscrimination laws.



Transition Services – CILs can help consumers who need transition services, for instance, from a nursing home or institution to community living. They also assist youth transitioning to postsecondary education and employment.

To find the CIL closest to you, contact the Florida Association of Centers for Independent Living at 850-575-6004 or www.floridacils.org.

Advocacy in Action: Bryce's Story

Bryce was a student who lived in a dorm at his university with his service animal, Lyra.

Bryce was told by the university that he needed to keep Lyra in his room at all times, only letting her out to relieve herself. The university also questioned whether Lyra was a service animal or an emotional support animal, setting off a chain of challenges requiring Bryce to self-advocate.

Under the Americans with Disabilities Act (ADA), a service animal is “any dog that is individually trained to do work or perform tasks for the benefit of an individual with a disability, including a physical, sensory, psychiatric, intellectual or other mental disability.” Emotional support animals provide companionship and support well-being but are not trained to perform tasks for the benefit of an individual with a disability.

Given this, emotional support animals do not meet the definition of service animals under the ADA. They are protected under the Fair Housing Act, though. As long as someone with a disability can verify that the animal helps alleviate symptoms, they are entitled to the reasonable accommodation of having the animal in their housing unit. Such a request can only be denied if the animal would pose a threat to the health or safety of others, cause substantial physical damage to the property of others, impose an undue financial and administrative burden for the property owner, or fundamentally alter the property owner's operations.

Under the ADA, however, only service animals are permitted to accompany people with disabilities in places of public accommodations, meaning areas where members of the public are allowed to go. As a result, the university said that Lyra was allowed to stay in the dorm with Bryce but not attend classes with him or go to other dorms, the cafeteria, the library or other common areas on campus.

At first, Bryce and his family attempted to get the university to recognize Lyra as a service animal. As part of this, Bryce sought assistance from the Office for Students with Disabilities, but its director also insisted Lyra was an emotional support animal. Eventually, Bryce sought the assistance of Disability Rights Florida to advocate for him to be able to not only keep Lyra with him in the dorm, but also have her attend classes and functions with him.

At one point the university said Lyra was not allowed to remain with Bryce on campus at all, even though the requirements for denying an emotional support animal as a reasonable accommodation under the Fair Housing Act were not met. The university alleged there were complaints regarding Lyra barking when Bryce was not in the dorm. Bryce had no choice but to send Lyra home with his family.

This was a violation of Bryce's rights. Bryce was isolated, because he relied on Lyra to assist him with social interactions and when he was on sensory overload. Without Lyra, Bryce kept to himself and did not have equal access to university programs and services in the same manner as other students. His grades also started to suffer.

After attempting to resolve the matter with the university, Disability Rights Florida filed a complaint on behalf of Bryce with the Office of Civil Rights (OCR). OCR reviewed the complaint and accepted it for investigation. Eventually, OCR was able to overturn the university's decision, and Bryce was able to have Lyra return to his dorm and accompany him around campus.

At one point the university said Lyra was not allowed to remain with Bryce on campus at all, even though the requirements for denying an emotional support animal as a reasonable accommodation under the Fair Housing Act were not met.

Driver Licenses

For many young people, both with and without disabilities, learning to drive and getting your driver license is a big milestone, increasing independence and opening new doors of opportunity, whether related to education, employment or recreation. But, driving comes with many responsibilities, the first of which is understanding the process for learning to drive and obtaining your driver license.

GETTING YOUR DRIVER LICENSE: THE THREE-STAGE PROCESS

Florida has a three-stage graduated driver license (GDL) process. These three stages include the:

- 1 Learner's License,
- 2 Operational License and, finally, the
- 3 Full Driver License.

Driver licenses and license plate transactions are generally handled at the county level; however, you can access detailed information about requirements by visiting the Florida Department of Highway Safety and Motor Vehicles (DHSMV) website at www.flhsmv.gov and clicking on "Driver Licenses and ID Cards." On this website, you can also find a list of driver license service centers by county.

Learner's License

To obtain a learner's license, you must:

- ✓ Be at least 15 years old.
- ✓ If under 18 years old, have a signed/notarized Parental Consent Form.
- ✓ Provide proof of Traffic Law and Substance Abuse Education course completion.
- ✓ Pass a vision and hearing test.
- ✓ Pass a Knowledge Exam consisting of 50 multiple-choice questions about traffic laws and signs.

The passing score is 80 percent or 40 out of 50 questions. You can prepare for the exam by studying the Official Florida Driver License Handbook.

- ✓ Provide documents needed to establish proof of identity, social security number and residential address.

A legal guardian must sign the Parental Consent Form in the presence of the driver license examiner. A foster parent, authorized representative of a residential group home or guardian ad litem can sign the consent form for minors who are enrolled in licensed out-of-home care. In all cases, the driver must pass the required Knowledge Exam and pass a vision and hearing test.

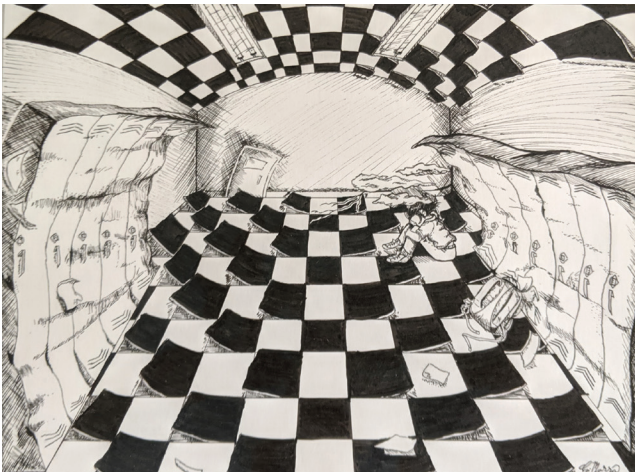
Minors holding a learner's license must be accompanied by a full licensed driver who is age 21 or older and must only drive during daylight hours. After holding a learner's license for three months, they may drive until 10:00 p.m. Other restrictions are detailed in the Official Florida Driver License Handbook.

Operational License

To receive an operational license, you must be 16 to 17 years old, have held a learner's license for at least 12 months without any traffic convictions, and show proof of parent or guardian Certification of Minor Driving Experience log. This log must be notarized and document that you have had at least 50 hours of driving experience (10 of which must have been at night). You must also pass a behind the wheel skills test in the presence of the driver license examiner.

Drivers with an operational license who are 16 years of age may only drive between the hours of 6:00 a.m. and 11:00 p.m., with two exceptions: if the driver is going to and from work or has a full licensed driver who is at least 21 years of age in the front passenger seat. Drivers with an operational license who are 17 years of age are restricted from driving between 1:00 a.m. and 5:00 a.m., with the two exceptions noted above.

Illustration by
Emily Marra



Full Driver License

The full driver license is the end goal. Once you reach age 18, you may apply for a full driver license. For those already holding an operational license, the driving restrictions will no longer apply by default, and no new testing is required. As during earlier stages, it is extremely important to abide by Florida's zero tolerance alcohol policy and avoid traffic infractions or convictions.

People who apply for a driver license at age 18 or older and have never held one before may apply for a full driver license as long as they can show proof of completion of a Traffic Law and Substance Abuse Education course.

All information to assist during all three stages, including the Official Florida Driver License Handbook and Certification of Minor Driving Experience log, are available on the DHSMV website at www.flhsmv.gov.

SPECIAL CONSIDERATIONS FOR YOUTH WITH DEVELOPMENTAL DISABILITIES

People with a developmental disability, or their parents/guardians, can apply to have a special designation ("D") appear on their identification card or driver license to identify them as having a developmental disability. A fee of \$1.00 will be charged for this designation.

According to Florida law, autism spectrum disorder or a related developmental disability must be documented by a licensed physician or other specified professional. In the event the card holder is stopped by a law enforcement officer, correctional officer or other public safety official, a good faith effort must be made in response to a request by the parent, guardian or the individual to ensure that a specified professional is present at all interviews of all individuals with a "D" designation. There may be costs associated with hiring the professional, who must have experience in treating, teaching or assisting individuals with disabilities.

More detailed information is available at www.flhsmv.gov/driver-licenses-id-cards/newdl, and the application for the "D" designation is available at www.flhsmv.gov/pdf/forms/72120.pdf.

Special Considerations for Youth in Foster Care

Youth in foster care should have access to the same experiences as other youth, including learning to drive a car and obtaining a driver license. A program called Keys to Independence (K2I) helps youth in foster care access driver education and obtain their driver license. This program is authorized by Florida law and can help reduce or assist with the costs involved in obtaining a driver license, including classes and car insurance. For more details, see www.keystoindependencefl.com.

REASONABLE ACCOMMODATIONS

In accordance with the Americans with Disabilities Act (ADA), FLHSMV will not discriminate against qualified individuals with disabilities in its services, programs or activities. These services, programs and activities include (but are not limited to) the driver license application process.

As a result, FLHSMV will attempt, upon request, to provide services for persons with disabilities, including sign language interpreters, documents in Braille, and other ways of making information accessible to people who have speech, hearing or vision impairments. FLHSMV will also make reasonable modifications to programs to ensure that people with disabilities have an equal opportunity to participate. For example, individuals with service animals are welcome in FLHSMV offices.

Anyone who requires an auxiliary aid or service for effective communication, or a modification of policies to participate in FLHSMV service, should contact the manager at the relevant FLHSMV office as soon as possible but no later than 48 hours before the scheduled event.

The ADA does not require FLHSMV to take action that would fundamentally alter the nature of its programs or services or impose an undue financial burden.

Illustration by
Wilkinson Jones



Complaints that a program, service or activity of FLHSMV is not accessible to persons with disabilities should be directed to:

Department of Highway Safety and Motor Vehicles
Attention: External ADA Coordinator
Neil Kirkman Building Room A102
2900 Apalachee Parkway
Tallahassee, FL 32399
850-617-3161

Insurance

As you get older, you're likely to assume more responsibility for your own expenses. These may include a car and rent and other living expenses. Managing such expenses is part of the transition to adulthood and can be both exciting and nerve racking. They also create additional obligations, including the need for insurance. Furthermore, you may start to pay for your own health care costs, including health insurance, and consider life insurance.

AUTO INSURANCE

Driving is a wonderful privilege and a rite of passage that provides many young people a greater degree of independence. This privilege comes with several responsibilities, however. If you own a car, you are responsible for its care and maintenance. You must also follow the rules of the road and generally do all that you can to avoid accidents.

Despite our best efforts, accidents sometimes happen. This is where another responsibility comes into play—the responsibility to have auto insurance. Auto insurance is something you purchase from an insurance company through a payment (usually monthly) called a premium. In exchange for that premium, the company agrees to financially help if you get into an accident or your car is stolen.

The insurance company will not reimburse you 100% though. Rather, you will have to pay what's called a deductible. A deductible is an amount you agree to pay out of your pocket if you get into an accident or your car is stolen. Deductibles vary in amount from a \$200 to a \$1,000 or more. Generally, the more you agree to pay as a deductible, the less you pay in premiums each month. Also, if your car is determined to be a total loss (meaning it can't be repaired), then you will only receive the current value of your car as listed by a company called Kelley Blue Book. If you took a loan to buy your car, this amount may or may not cover what you owed on it at the time of the accident.

Each policy is different but may cover damage to your car and/or any other car in an accident, replacing your car if it is stolen, medical expenses for you and any other injured and legal fees, if needed. Some policies may also cover losses due to weather, fires, earthquakes, riots and damage from animals. These additional types of coverage are usually under a comprehensive plan, which may be required by the bank that loaned you the money to pay for your car. If you do not have insurance, you become responsible for meeting these expenses yourself.

It is important to note that cars and trucks are not the only things that can and should be covered by auto insurance. For example, motorcycles, boats and recreational vehicles should also be covered. What's more, vehicles are not alone in needing insurance.

It is important to note that cars and trucks are not the only things that can and should be covered by auto insurance.

HEALTH INSURANCE

Health insurance is a contract through which an insurance company agrees to pay some or all of your health care expenses in exchange for a premium, usually

paid monthly. The insurance company may require that you pay a deductible each year before they start paying for your expenses. You may also have a co-pay, which means you pay a certain set amount or percent of each bill for a certain type of service. But you may not have to pay a deductible and a co-pay; it may be just one or the other, depending on the specifics of the policy. There are also government insurance programs. For more information on those, see this guide's section on Health Care Benefits.

RENTER'S AND HOME OWNERS INSURANCE

You can also purchase insurance that covers your home and its contents, for instance, furniture, clothing and other personal items. If you rent an apartment or house, you can get renter's insurance, and some landlords require you to do so for a certain amount of coverage. Renter's insurance provides you financial assistance (current item value) to replace items that are damaged due to disasters specified in the policy, such as storms, earthquakes and sometimes floods; however, flood insurance is often a separate fee or policy. Renter's insurance also covers items that are stolen from your home. In addition to covering your possessions, renter's insurance can pay your landlord for structural damages you cause, for instance, if a fire starts because grease splatters when you are cooking. Lastly, renter's insurance may cover legal costs that arise from damages to a property.

If you purchase your own home, you are responsible for its care and upkeep. If your home is damaged by fire, adverse weather or another disaster, you would be responsible for repair or replacement. Home owner's insurance assists with this. Depending on the policy, it

can cover the building you live in as well as your personal items. If you have some personal items that are very expensive, such as unique jewelry or art, you may need to pay for extra insurance for them. You will also have to pay a deductible each time an incident occurs.

LIFE INSURANCE

Life insurance pays for your final expenses after you die. Final expenses include things like burial, coffin, flowers, a funeral service and outstanding medical bills. If there is money left after these things are paid for, remaining funds are given to the person you selected, called a beneficiary.

Sources Used to Develop this Section

Insurance Information Institute. (2020) Auto Insurance Basics. www.iii.org/publications/insurance-handbook/insurance-basics/auto-insurance-basics

Healthcare.gov (2020) www.healthcare.gov/glossary/health-insurance



Illustration by
Pariswinkle

Financial Responsibility

Managing your own finances and learning how to effectively spend and save is an important part of becoming an adult, for people both with and without disabilities. Whether your goal is to save money for education or housing or to reduce debt, the key is developing a budget. Each person's budget will depend on their specific circumstances, but certain basics apply to all, and effective planning is the first step.

BUDGET PLANNING

A budget is a plan, and the first step in creating one is to ask yourself key questions, including:

- **What are my goals?** Examples might include saving for education, housing, transportation, vacation, retirement, etc.
- **How much time do I want to give myself to achieve these goals?** For instance, some may be short-term, achievable in week or months, while others may take years to reach.
- **Will I be receiving any financial assistance?** Examples might include scholarships, grants, family assistance, government benefits, etc.
- **Will someone else have access to my financial accounts?** Examples might include a co-signer on a loan, joint checking account holders or an authorized user on a credit card.
- **What is my credit score?** (See below for more information on credit and credit scores.)

Once you've answered these key questions, even if in general terms, you can start developing your budget. This starts with examining your income. If you work, it is important to understand that your salary (gross income) and your take home pay (net income) will be different. Your paycheck will also have deductions. These deductions include federal income tax and contributions under the Federal Insurance Contributions Act (FICA).

FICA contributions are 6.2% of your gross wages for Social Security and 1.45% for Medicare. Your employer matches these percentages. Federal income taxes will start at an average 10% and gradually increase along with your income.

Depending on your employer and employment situation, you may also have the option of enrolling in employer sponsored benefits such as health care plans, dental plans and retirement plans. These benefits may be removed before or after taxes are deducted, depending on different circumstances.

If you earn over a certain amount, you will also need to file income taxes annually. There are various resources available to help you do this, such as the Internal Revenue Service's (IRS) Volunteer Income Tax Assistance program (VITA); local university, college or community clinics; and free online software.

Examining Income

Preparing a budget starts with examining income. Consider this example:

Jim works full time (40 hours weekly) in a store. He earns \$10 an hour and is paid bi-weekly (every 2 weeks). He is enrolled in his company's health care plan, and his share of the premiums is \$50 bi-weekly. Per the calculation below, this translates to a bi-weekly take home pay (net income) of \$660.00.

Gross Income	\$800.00	(\$10 x 40 hours per week x 2 weeks)
Benefits Deduction	-\$50.00	(\$50 for health care)
Tax Deductions	-\$90.00	-12%
Net Bi-weekly Income	\$660.00	

You should keep in mind, when examining income, that earned income can affect some Social Security benefits.

Calculating Expenses

Once you know your take home pay (net income) you can calculate your expenses to budget accordingly. When developing a budget, the following are some factors to consider, but there may be others depending on your specific circumstances.

- **Housing** – Housing costs are usually monthly rent or, if you own your own home, a mortgage payment. They are impacted by many factors. For young people, one of these is whether you live with parents/guardians, on your own or with roommates.
- **Bills and Utilities** – These may include electricity, water, gas, internet and phone. Some of these expenses may be included in rent, while others may not.
- **Transportation** – Transportation costs may include a car loan payment, car insurance premium, gas, bus passes, ride share services, etc.
- **Food** – Groceries, snacks, meal plans, restaurant/ takeout expenses, etc.
- **Other Expenses** – These may include things like tuition, health insurance (if not obtained through your employment) homeowner's or renter's insurance, pets, hobbies, recreation, car or home maintenance, travel, etc.

ESTABLISHING GOOD CREDIT

A credit score is a number that indicates how likely you are to pay back a loan. Banks and other potential lenders consider your credit score when deciding whether to loan you money, for instance, to purchase a car or your own home. Your credit score is determined on your credit history, which includes your current accounts and level of debt, previous loan history, and other factors. The higher your credit score, the better you look to potential lenders as creditworthy.

Generally, credit scores range from 300-850. A good credit score falls between 690-719 and an excellent credit score is 720 and above. Again, many factors affect your credit score, and the score can move up and down. Every time you apply for a new credit card or loan, your credit score is checked. Potential landlords and housing associations may also run credit checks.



As a result, it is important you know and keep track of all minimum payments required for any debt you currently have. As a general rule, having debt does not hurt your credit score; rather, not making required payments on time does. Factors that lower your credit score include late or missing payments, having too many credit inquiries in a short period of time, carrying high balances in comparison to available credit, length of credit history and defaulting on a loan.

Many financial institutions will allow you to access your credit score without affecting your credit score. Reviewing your credit and financial statements to identify discrepancies is also important because identity theft has become a growing concern. If you are concerned about identity theft, there are options available to help, such as enrolling in your bank or credit card company's credit protection program or having a temporary credit freeze that restricts access to your credit file.

In Florida, child welfare agencies are able to obtain credit reports from children starting at age 14, provide them to the individual and help them deal with issues.

TIPS AND RESOURCES

The following steps can assist in establishing a solid financial foundation and building good credit:

- ✓ Enroll in a personal finance course.
- ✓ Use your bank's online resource guides.
- ✓ Before opening a new bank account, make sure you have all required information and documents; different banks may have different requirements.
- ✓ Use a phone app to track your saving and spending.
- ✓ Be aware of websites that will unnecessarily run your credit and charge you to find out your score.

For youth with disabilities who receive Supplemental Security Income (SSI), additional considerations may come into play when budgeting and financial planning. For more information, see the next section of this guide.

Illustration by
Anna Roth

RESOURCES TO ASSIST IN FINANCIAL PLANNING INCLUDE:

U.S. Department of Labor (DOL) – Secure Your Financial Future: A Toolkit for Individuals with Disabilities

www.dol.gov/agencies/ebsa/secure-your-financial-future

MyMoney.Gov – Resources for Youth

www.mymoney.gov/for-youth

Federal Deposit Insurance Corporation (FDIC) – Money Smart for Young People

www.fdic.gov/resources/consumers/money-smart/teach-money-smart/money-smart-for-young-people/index.html

Florida Department of Education (FDOE) Career Cruiser: A Career and Education Planning Guide

www.fldoe.org/core/fileparse.php/7534/urlt/cruiser.pdf



Social Security Benefits

As you get older and consider your options for education, employment and other aspects of community life, it is important to understand any disability benefits you may receive and how they might change as you transition to adulthood.

TYPES OF BENEFITS

There are two main disability benefits programs, both managed by the U.S. Social Security Administration (SSA). These are Supplemental Security Income (SSI) and Social Security Disability Insurance (SSDI).

SSI – Most minors who receive SSA disability benefits receive Supplemental Security Income (SSI). SSI is a needs-based program to provide for basic living expenses, such as food, shelter and clothing. You do not need to have a work history to receive SSI. At age 18, someone receiving SSI benefits undergoes a review to determine whether their condition or illness meets SSA's definition of disability for an adult.

SSDI – Unlike SSI, SSDI is an insurance program. When someone works, they pay into the SSDI system, and, if needed due to illness or disability, they and their dependents receive a benefit. Youth who receive SSDI usually do so based on the work record of a parent or grandparent who paid into the system and is now disabled, retired or deceased. Thus, a minor does not need to be disabled to receive SSDI. Also, this benefit can continue until two months after age 19 if someone is still enrolled in school. Someone receiving SSDI who is considered disabled under the adult definition of disability can continue to receive SSDI after they turn 18 for as long as they remain disabled.

DISABILITY DEFINITION – MINORS VS. ADULTS

It is important to understand that the definition of disabled for purposes of SSA benefits is different for minors and adults.

Minors – A minor is considered disabled based on how a physical or mental condition or illness affects development and functioning in typical daily environments (i.e., school, home, community). As mentioned earlier, at age 18, a review is scheduled to determine whether the condition or illness meets the SSA definition of disability for an adult.

Adults – SSA considers an adult to be disabled when someone's illness or condition prevents substantial work activity for 12 months or longer. In other words, the main consideration for adults is how the condition or illness affects the person's ability to work. If you work, whatever your age, it is important to report your earnings to SSA. Earnings can affect the amount of your benefits and even affect eligibility for SSI or SSDI. If SSA later finds that you were paid too much or are no longer considered "disabled" because of work activity, you could be asked to repay benefits that you were overpaid.

WORK INCENTIVES

Fear of losing disability and health care benefits can be a significant barrier for transition age youth considering employment. Myths and misinformation about benefits are widespread among people with disabilities and their families. As a result, families may not encourage youth receiving benefits to work. But there are many work incentives that can offset your earnings. When reporting income, it is important to also report any work incentives that you would like for SSA to consider, to reduce a portion of your countable earnings. There is also a Student Earned Income Exclusion that allows an SSI recipient who is under age

22 and regularly attending school to exclude a portion of their earnings from being counted as earned income. For more information on work incentives, consult the Social Security Red Book at www.socialsecurity.gov/redbook/eng/main.htm or visit www.choosework.ssa.gov/findhelp.

CHANGE IN DISABILITY DETERMINATION

If at some point a determination is made that the person is considered no longer disabled, SSA must send them a written notice of the decision, including all appeal rights. To continue receiving SSI benefits during an appeals process, the appeal must be requested within 10 days of the notice of discontinuance.

If SSA determines that the person is no longer disabled by their illness or condition, Section 301 (Continued Payment Under a Vocational Rehabilitation or Similar Program) may apply. Section 301 allows an SSI or SSDI recipient to continue receiving benefits if they: 1) were participating in a vocational rehabilitation or other approved employment program at the time their disability ended, and 2) the program will reduce the likelihood of needing future disability benefits.

Section 301 also applies to SSA benefit recipients aged 18-21 participating in an individualized education program (IEP) developed in accordance with the Individuals with Disabilities Education Act (IDEA).



Illustration by
Emily Marra

There is another Social Security benefit called Childhood Disability Benefits (CDB), (formerly known as Disabled Adult Child (DAC)), that may apply to some transition-age youth with disabilities. Requirements for receiving CDB include being 18 or older, unmarried (with some exceptions), having acquired a disability prior to age 22, and being a child of a parent who is receiving Social Security retirement benefits or SSDI or is deceased. It is important to know that a disabled adult “child” is entitled to receive a special category of Medicaid (called “Protected Medicaid”) because they would continue to be eligible for SSI in the absence of the CDB benefit or increases to that benefit.

Housing

For many young people, both with and without disabilities, a big milestone on the path to adulthood is living on their own, or with peers rather than parents or guardians. Before taking the step of renting an apartment or house, however, it's important to understand the different options available as well as potential pitfalls.

TYPES OF HOUSING

Most housing is private housing where you are responsible for the full market rent. Most large apartment complexes are private housing, for example. You can also find housing where the rent is more affordable. Some landlords participate in the Low-Income Housing Tax Credit (LIHTC) program, and the rents at these apartments may be less than the going market rate for similar apartments. You can learn about the LIHTC program at www.nhlp.org/resource-center/low-income-housing-tax-credits.

You may also be interested in “subsidized housing.” This refers to federal, state and local government programs that reduce the cost of housing for low-income individuals. There are many different types of subsidized housing. Three of the most well-known are:

- 1 Public Housing.
- 2 Project Based Section 8 Housing.
- 3 Section 8 Housing Choice Voucher program.

These subsidized housing programs can offer housing stability because your rent is adjusted based on your income. To learn more about subsidized housing in your area or apply for Public Housing or the Section 8 Housing Choice Voucher Program, contact your local housing authority. Contact information is available at www.hud.gov/states/florida/renting/hawebsites.

To apply for Project Based Section 8 Housing and the LIHTC program, you need to contact each housing complex separately. You can find lists of affordable housing near you using the U.S. Department of Housing

and Urban Development (HUD) “resource locator” at resources.hud.gov.

You can also learn more about subsidized housing programs at www.clsmf.org/service/housing.

RENTING

For most young people, first living on your own means renting an apartment or house. When you rent, you enter into a contract with a landlord. The landlord is usually a property management company or the person who owns the apartment or house. A rental contract is called a lease. Leases should include important details such as how long the lease is for (for instance, is it for a month, certain number of months, or year?); how much the rent is and when it is due; and what charges you, as the tenant, are responsible for (for instance, pest control, electric, late fees, etc.).

Always read a lease carefully before you sign it. Also look at the exact unit you are going to rent before you sign a lease. If you need help understanding a lease, ask to take a copy with you so you can have someone, like a trusted family member or a lawyer, review it with you. Finally, always get a copy of your lease and keep it in a safe place.

For private housing, a lease can be either oral (verbal) or in writing. While a lease can be oral, it is better to get a written lease so that the things you and the landlord agreed to are documented and you benefit from other protections. You can learn about written leases at www.jaxlegalaid.org/wp-content/uploads/2023/I-Have-a-Written-Lease-What-are-My-Rights-2023.pdf.

If your lease is oral, the length of the lease will depend on how often you pay rent. If you pay rent every month, your lease is considered “month-to-month” and can be terminated by either the landlord or you with 15 days’ written notice. You can learn about oral leases at www.jaxlegalaid.org/wp-content/uploads/2023/No-Written-Lease-Periodic-Tenancy-2023.pdf.

Security Deposit

When you rent an apartment or house, you will most likely be required to pay a security deposit. A security deposit is money set aside to pay for any potential expenses for the landlord caused by you, including breaking your lease early or damaging the property. Be sure to give your landlord a forwarding address at least seven days before you move out. After all, they cannot return your security deposit if they don’t know where to find you.

After you move out, your landlord has 15 days to return your security deposit in full or 30 days to give you written notice telling you why they are keeping all or part of it. This notice must tell you that you have 15 days to dispute or disagree with their decision. Remember to keep a copy of all letters you get from your landlord as well as all letters you send to them. You can learn more about security deposits at www.clsmf.org/security-deposit-on-rental-homes.

In general, you can prevent problems with your security deposit by:

- ✓ Doing a walk-through of the apartment before you move in and taking pictures of any damage that is already there (bring a witness if you can);
- ✓ Filling out a damages sheet before you move in and sending it to your landlord;
- ✓ Removing all of your belongings and cleaning the apartment before you move out;
- ✓ Taking photographs of the apartment after your belongings are out and you have cleaned; and
- ✓ Making sure your landlord has a forwarding address for you.

Roommate Issues

If you and a roommate are “co-tenants” and have just

one lease, you are both responsible for all of the rent. So, if your roommate moves out, you must pay all the rent. This means it is important to be cautious about who you choose as a roommate and, if possible, have a separate lease for each roommate.

Conditions Problems

Be sure to read your lease to know how to ask for maintenance in your apartment or house. Your landlord must keep your apartment “up to code,” which includes ensuring you have heat, hot and cold running water, screens on windows and working plumbing (among other things). It is a good idea to make any requests for maintenance in writing and keep copies.

If after making requests, you feel your landlord is neglecting their duty to maintain the apartment, one thing you can do is to call code enforcement. You can find your local code enforcement office by searching your local government’s webpage or doing a general online search. You are not allowed to make repairs yourself and then deduct the charges from the rent unless this is written into your lease.

You can learn more about your landlord’s obligations to maintain your apartment and what to do if they don’t at www.floridalawhelp.org/content/do-you-have-to-pay-rent-if-your-rental-home-needs-repairs.

Landlord Access

Your landlord can come into your apartment for a few reasons. For instance, a landlord can come into your apartment to make repairs with reasonable notice (at least 12 hours ahead of time) or at any time if there is an emergency. You can learn more about your rights as a tenant and your landlord’s obligations at www.floridabar.org/public/consumer/tip014 and www.clsmf.org/renters-rights-evictions.

Evictions

An eviction is when your landlord files a lawsuit with the court and asks to have you removed from your rental apartment or house. Reasons for eviction include non-payment of rent and violations of the lease. Your landlord must give you a written notice before filing an eviction. A landlord is also not allowed to turn off your utilities or lock you out to make you

leave. If your landlord files an eviction against you, you should contact local legal aid immediately (www.thefloridabarfoundation.org/florida-legal-aid-programs). It is important to act quickly to protect yourself. You will only have five days to respond to an eviction and, if you don't respond, you will lose. Read more about evictions at www.clsmf.org/renters-rights-evictions and www.floridalawhelp.org.

DISABILITY DISCRIMINATION AND THE FAIR HOUSING ACT

The Fair Housing Act is a federal law that makes it illegal to discriminate against people when they are renting or buying a home or engaging in other housing-related activities, such as obtaining a mortgage. Specifically, the Fair Housing Act says that a landlord can't discriminate against you based on disability, race, color, religion, national origin, familial status or sex. You can find more information about the Fair Housing Act at www.hud.gov/program_offices/fair_housing_equal_opp/fair_housing_act_overview.

It is important to understand that discrimination based on disability goes beyond refusing to rent to someone because of their disability. It might mean charging extra fees because of a disability, refusing to provide housing-related services in a non-discriminatory way, requiring people with disabilities to live in one part of an apartment complex, and other illegal practices.

Under the Fair Housing Act, discrimination may also mean refusing to provide a reasonable accommodation or modification necessary to give someone with a disability equal opportunity to use and enjoy a dwelling. In the context of housing, a reasonable accommodation may be a change in a landlord's rules, policies, practices or services. Common reasonable accommodations

include requests for assigned parking spaces or to waive pet fees for assistance animals. A reasonable modification is a structural change to a residence or common area. One common reasonable modification is to install wheelchair accessible ramps.

It is important to note that there must be a relationship (called a "nexus") between the request for accommodation or modification and your disability. As a result, depending on the request, and your disability, you may need to provide information about your disability and/or need for the accommodation or modification.



For more information about reasonable accommodations in housing, visit www.justice.gov/sites/default/files/crt/legacy/2010/12/14/joint_statement_ra.pdf.

For more information about reasonable modifications in housing, visit www.hud.gov/sites/documents/reasonable_modifications_mar08.pdf.

For more information about requests for assistance animals, including emotional support animals, visit www.hud.gov/sites/dfiles/PA/documents/HUDAsstAnimalNC1-28-2020.pdf.

If you think you have been the victim of housing discrimination, contact your local legal aid organization (www.thefloridabarfoundation.org/florida-legal-aid-programs), Disability Rights Florida (www.disabilityrightsflorida.org) and/or HUD (800-669-9777 or at HUD.gov).

Advocacy in Action: Hailey's Story

Hailey was born legally blind and has lost vision progressively overtime, with dramatic decreases in early adolescence.

By the end of 10th grade, she started using a white cane for orientation and mobility. Upon graduation from high school, Hailey decided to attend Florida Polytechnic University to study business analytics. Due to her vision impairment, she does not drive, so living in a dorm was especially important to her.

In March of her high school graduation year, Hailey received her guide dog, which was trained by Guiding Eyes for the Blind. She started Florida Polytechnic University that August and lived in a dorm for her first two years. In addition to a little extra room to accommodate her guide dog, she requested and received the reasonable accommodation of a first-floor room in case of emergency. Overall, her first two years were uneventful as she transitioned to college life.

When the university changed property management companies, however, Hailey encountered problems. The new company did not have the same policies and wrongly believed it was not responsible for providing her these accommodations at no cost because her residence was an apartment and not a traditional dorm. The company had one spot available on the first floor, and it was a larger room, but they proceeded to charge her more. If Hailey was not legally blind, she would not have needed the first-floor room. It was not Hailey's fault the only first-floor spot they had available happened to be a suite. Her request was only to level the playing field.

Hailey met with the property management company and advocated to not be charged extra due to her disability. The company would not budge. Hailey reached out to the university, but it responded that their hands were tied since it did not own the property. After numerous attempts to rectify the problem, Hailey did not know where to turn. The university contacted Hailey with a resolution that would be an "average of the room costs," which in the end would amount to an additional \$2,000 she did not have. That's when she reached out to Florida's Division of Blind Services, which recommended she contact Disability Rights Florida.

After an intake process, Hailey was assigned to a Disability Rights Florida lawyer, who advocated on her behalf to the property management company and the university. The lawyer educated Hailey on advocacy and explained that what the university was proposing would amount to a housing surcharge just for having a disability. The lawyer also negotiated with the general counsel of the university, but they said that, while the university wanted to accommodate Hailey, it could not force the management company to do so. After numerous discussions and unsuccessful attempts to resolve the situation, the lawyer explained to Hailey the option of filing a complaint with the Office of Civil Rights. Hailey decided to let the lawyer file the complaint on her behalf.

The Office of Civil Rights agreed to investigate the complaint and, after several months, negotiated a successful resolution. Hailey's complaint not only resolved her matter, but also prompted a change in policy that now benefits all students with disabilities residing in the dorm. As a result, students with disabilities received a refund of the difference between what they were charged and what they should have been charged. Going forward, students with disabilities will not be charged extra for reasonable accommodations. Hailey was ecstatic with the outcome, as it resulted in a systemic change. She was a successful advocate, for her and others with disabilities.

The lawyer educated Hailey on advocacy and explained that what the university was proposing would amount to a housing surcharge just for having a disability.

Voting

Voting is at the heart of American democracy—and an important part of community life as an adult. It allows you to play a role in determining local, state and national leadership and express your opinions about which policies are best for our society. In this section, you'll learn more about voting requirements and how to register to vote and cast a ballot in Florida.

VOTING REQUIREMENTS

To be able to vote in an election, you must do two things:

- 1 Meet the basic requirements, and
- 2 Be registered to vote.

The basic requirements to vote are for you to:

- ✓ Be a citizen of the U.S. (by birth or naturalization).
- ✓ Be a legal resident of both Florida and of the county in which you seek to be registered.
- ✓ Be 18 years old (you may pre register if you are at least 16).
- ✓ Not be adjudicated mentally incapacitated with respect to voting in Florida or any other state, or if you have, you must first have your voting rights restored.
- ✓ Not be a convicted felon, or if you are, you must first have your civil rights restored if they were taken away.

There are some cases where a court has ruled that a person is not competent to vote. This means the court has decided that the person is not physically and/or mentally able to make their own decisions when it comes to voting. When this happens, the person's right to vote is taken away, even if he or she meets the basic requirements to vote.

A felony conviction in Florida for murder or a sexual offense makes a person ineligible to vote in Florida unless and until the person's right to vote is restored by the State Clemency Board. For any other felony conviction in Florida, a person is eligible to register and vote if the person has completed all terms of their sentence. Completion of a sentence means: prison or jail time; parole, probation and other forms of supervision; and payment of the total amount of fines, fees, costs and restitution ordered as part of the felony sentence.

A felony conviction in another state makes a person ineligible to vote in Florida only if the conviction would make the person ineligible to vote in the state where the person was convicted. An offense for which a person was not adjudicated guilty does not make a person ineligible to vote. A misdemeanor conviction also does not make a person ineligible to vote.

For additional information, go to the following websites:

- www.accessthevote.org/voting-in-florida/your-voting-rights
- www.dos.myflorida.com/elections/for-voters/voter-registration/constitutional-amendment-4felon-voting-rights

REGISTERING TO VOTE

Assuming you meet the basic requirements, in order to vote, you must also register to vote by completing

a Florida Voter Registration Application. If you do not complete this application, you will not be allowed to vote in any election. You can complete this application once you turn 16, but still cannot vote until on or after your 18th birthday. You are encouraged to register as soon as possible after your 16th birthday.

The Florida Voter Registration Application can be completed online, by mail or in-person. To complete the application online, go to www.registertovoteflorida.gov/home.

To get a paper application, contact your county Supervisor of Elections office, a local Florida Department of Highway Safety and Motor Vehicles office, a voter registration agency or an armed forces recruitment office. After you fill out the paper application, you should hand deliver or mail it to your county Supervisor of Elections office.

Please note that for a Florida Voter Registration Application to be accepted, it must include the following information:

- ✓ Your first and last name.
- ✓ Your address.
- ✓ Your date of birth.
- ✓ A mark in the checkbox confirming that you are a citizen of the U.S.
- ✓ Your Florida driver license number, the identification number from a Florida-issued identification card or the last four digits of your Social Security number.
- ✓ A mark in the checkbox confirming that you have not been convicted of a felony, or that if you have, your civil rights have been restored.
- ✓ A mark in the checkbox confirming that you have not had your right to vote taken away by a court, or that if you have, your right to vote has been restored.
- ✓ Your signature, which serves as a promise that the information you provided in the application is true and that you promise to uphold the U.S. Constitution and the Florida Constitution.

You do not have to choose a political party when you register to vote. Just note that, if you decide not to

choose a political party, you will only be allowed to vote in a General Election. A General Election is an election held to fill available national, state, county and district offices. It may also include voting for amendments to the Florida Constitution. Voters who choose a political party can also vote in a Primary Election. A Primary Election is an election held prior to a general election to select a political party nominee to be included on the ballot in the General Election. If you do not choose a political party when you first register to vote, or wish to change your political party, you can do so later by contacting your county Supervisor of Elections office.

You must register at least 29 days before an election to be eligible to vote in that election. If you do not meet the deadline, your registration will still be accepted, but only for voting in future elections. You can check your voter registration status online at www.dos.myflorida.com/elections.

VOTING IN AN ELECTION

Once registered to vote, you have the right to:

- ✓ Vote and have your vote accurately counted.
- ✓ Cast your vote if you are in line at the official closing of the polls.
- ✓ Ask for and receive assistance in voting.
- ✓ Receive up to two replacement ballots if you make a mistake prior to casting the ballot.
- ✓ Be provided an explanation if your registration or identity is in question. (In this case, you can cast a provisional ballot.)
- ✓ Be provided written instructions to use when voting, and, upon request, oral instructions from election officers.
- ✓ Vote free from coercion or intimidation by elections officers or any others.
- ✓ Vote using a system that is in working condition and will allow your vote to be accurately cast.

Voting in Person

To vote in person, you need to bring a current and valid photo identification with a signature to your polling

place. If an election official says that you are not listed as a registered voter, but you have in fact registered to vote, you may still vote using what is called a provisional ballot. A provisional ballot is a ballot that must be verified before it can be counted. You must request a provisional ballot and sign a written statement stating that you are a registered voter who is eligible to vote. The county will verify your registration and eligibility and then your vote will be counted. If registration and eligibility are not determined, the vote will be rejected.

When you vote on an Election Day, you must do so at your assigned polling place. Check the address listed on your voter information card or with your county Supervisor of Elections office (www.dos.myflorida.com/elections/contacts/supervisor-of-elections) to determine the location of your polling place. Your voter information card should also list the hours your polling place will be open on Election Day. Typically, they are open from 7:00 a.m. to 7:00 p.m.

You can also vote in person before Election Day by participating in early voting. The county Supervisor of Elections office will designate early voting sites and determine their hours of operation. During early voting, you vote on the same type of voting equipment that is used on Election Day. Early voting begins at least 10 days before and ends on the third day before an election.

The Help America Vote Act is a law that requires voting systems to be accessible for individuals with disabilities in a way that allows the same opportunity for access and participation as other voters. This means that all polling places must be accessible to and usable by individuals with disabilities. Also, any voter who needs help to cast their vote can get it from two election officials or some other person of the voter's choosing (other than the voter's employer). Any person who believes that a violation of the Help America Vote Act has occurred, is occurring or is about to occur can file a complaint with the Florida Department of State.

Voting by Mail

If you are unable or unwilling to go to the polls to vote during an election, for any reason, you can vote by mail. A vote-by-mail ballot is a ballot that you request and pick-up or have delivered to you instead of voting at a polling place during early voting or on Election Day.

A voter must first be registered to vote before they can request a vote-by-mail ballot. Unless otherwise specified, a request to receive a vote-by-mail ballot covers all elections through the end of the calendar year for the next ensuing regularly scheduled General Election. If a vote-by-mail ballot is returned undeliverable, it will cancel a request for future elections and must be renewed.

A request for a vote-by-mail ballot may be made in one of the following ways:

- By signed writing (e.g., mail, fax or scanned attachment to an email) to your county Supervisor of Elections office.
- In person at your county Supervisor of Elections office.
- By phone to your county Supervisor of Elections office.

Your request must include your:

- ✓ Name.
- ✓ Date of birth.
- ✓ Address.
If the request is to mail the ballot to an address other than the one on file, the request must be a signed writing; an exception exists for absent uniformed service or overseas voters.
- ✓ Your Florida driver license, Florida identification card or the last four digits of your Social Security number (whichever may be verified in the county Supervisor of Elections office records).
- ✓ Signature (if the request is written).

You can designate an immediate family member (for example, parent, grandparent or sibling) or your legal guardian to request a ballot on your behalf. In such a situation, the request must also include the *requestor's*:

- ✓ Address.
- ✓ Driver license number, state identification card or the last four digits of their social security number (if available).

- ✓ Relationship to you.
- ✓ Signature (if the request is written).

One advantage of the vote-by-mail ballot is that it allows you the ability to control your election experience. If you vote at home, you do not have to get to a polling place or wait in potentially long lines. The downside is that you do not have the experience of voting in the company of the community. Some people, and especially people with disabilities, feel it is very important to vote in person to emphasize the significance of accessible polling places and equipment.

The deadline to request that a vote-by-mail ballot be mailed is no later than 5:00 p.m. on the 10th day before the election. A county Supervisor of Elections office must mail the ballot out within two business days after a request. The last day for a county Supervisor of Elections office to be able to mail out a ballot is eight days before an election.

Your marked ballot must be mailed or delivered in person, reaching the county Supervisor of Elections office no later than 7:00 pm on the day of the election. A vote-by-mail ballot can be dropped off at designated secure drop boxes located at early voting sites. Please contact your county Supervisor of Elections office or refer to its website for the locations of all the vote-by-mail ballot secure drop boxes in your county.

ACCESSIBILITY AND ASSISTANCE

Various federal and state laws require polling places and voting equipment and processes to be accessible to people with disabilities. If you need assistance to vote due to a disability you have several options:

- Receive personal help at the polls during early voting or on Election Day.
- Vote on an accessible device at the polls.
- Vote-by-mail from home.
- Participate in supervised voting.
- Receive a vote-by-mail ballot through an electronic ballot delivery and marking system.

For additional information about inclusive voting and voter registration in Florida, please visit www.accessthevote.org. If you have any issue with voting or registering to vote due to a disability, please contact Disability Rights Florida's Voting Rights Hotline at 800-342-0823 extension 6000.



Illustration by Sali Hinsien

Acronyms

For reference, the following acronyms may be used in this guide as well as other publications about disability issues and transition.

ACRONYM	TERM
AAC	Augmentative Alternative Communication
ADA	Americans with Disabilities Act
ADD/ADHD	Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder
ADL/ADLs	Activity of Daily Living/Activities of Daily Living
APE	Adaptive Physical Education
ASL	American Sign Language
AT	Assistive Technology
BD	Behavioral Disorder
BIP	Behavioral Intervention Plan
CA	Chronological Age
CAPD	Central Auditory Processing Disorder
CF	Cystic Fibrosis
CP	Cerebral Palsy
CST	Child Study Team
DB	Deaf-Blind
DD	Developmental Delay/Developmental Disability
DD Act	Developmental Disabilities Assistance and Bill of Rights Act

ACRONYM	TERM
DHH	Deaf and Hard of Hearing
DoDDS	Department of Defense Dependent Schools
DS	Down Syndrome
DSM	Diagnostic and Statistical Manual of Mental Disorders
ECE	Early Childhood Education
EBD	Emotional/Behavioral Disabilities
ESE	Exceptional Student Education
ESSA	Every Student Succeeds Act
ESOL	English for Speakers of Other Languages
ESY/EYS	Extended School Year/Extended Year Services
FAPE	Free Appropriate Public Education
FAS	Fetal Alcohol Syndrome
FBA	Functional Behavioral Assessment
FC	Facilitated Communication
FOIA	Freedom of Information Act
GE	General Education
HI	Hearing Impaired
HO	Hearing Officer
IA	Instructional Assistant
IDEA	Individuals with Disabilities Education Act
IEP	Individualized Education Plan/Individualized Education Program
IFSP	Individualized Family Service Plan
IND	Intellectual Disability

ACRONYM	TERM
IHE	Institution of Higher Learning
IPE	Individualized Plan for Employment
LI	Language Impaired
LD	Learning Disability
LEP	Limited English Proficiency
LRE	Least Restrictive Environment
MA	Mental Age
MD	Muscular Dystrophy
OCD	Obsessive-Compulsive Disorder
ODD	Oppositional Defiant Disorder
OHI	Other Health Impaired
OI	Orthopedic Impairment
O&M	Orientation and Mobility
OT	Occupational Therapy
PALS	Peer-Assisted Learning System
PBS	Positive Behavioral Support
PCA	Personal Care Assistant
PI	Physical Impairment
PDD	Pervasive Developmental Disorder
PLP	Present Level of Performance
POA	Power of Attorney
PP	Paraprofessional
PS	Preschool

ACRONYM	TERM
PT	Physical Therapy
RS	Related Services
SB	Spina Bifida
SE	Special Education
Section 504	Section 504 of the Rehabilitation Act
SI	Speech Impaired
SI	Sensory Integration
SLD	Specific Learning Disability
S/LI	Speech Language Impairment
SLP	Speech Language Pathologist
SPOA	Specific Power of Attorney
SSDI	Social Security Disability Income
SSI	Supplemental Security Income
TBI	Traumatic Brain injury
TDD	Telecommunication Device for the Deaf
TS	Tourette Syndrome
TTY	Teletypewriter (phone system for the deaf)
TWWIIA	Ticket to Work and Work Incentives Improvement Act
VI	Visual Impairment
VocEd	Vocational Education
VR	Vocational Rehabilitation
WIPA	Work Incentives Planning and Assistance



Disability Rights
FLORIDA

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