



EXPLORE

Exceptional People

Learning, Observing & Receiving
Quality Life Experiences

What happens to Intellectually Disabled Young Adults after High School?

Transition of young adults with ID/DD has been reported by families and caregivers as a time of upheaval, stress and important decisions. It is also a time of much confusion about services available beyond school setting. The great majority of these individuals live at home with family members, making families the predominant providers of lifelong support. State agencies support only 13% of the total number of families providing support at home (Braddock et al., 2013).



Intellectually Disabled Adults Face Daily Challenges

- ▶ ● Of those receiving services, vast majority remain in sheltered employment, non-work services, or day programs (Butterworth et al., 2011).
- ▶ ● Over half of young adults report at least one activity limitation (Van Naarden Braun, 2009).
- ▶ ● Limited friendship networks, often including staff members.
- ▶ ● Risk for loneliness, estimates of up to 50% report feeling lonely (Sancliff et al., 2007) & often related to absence of a partner (McVilly et al., 2006).
- ▶ ● Social support and peers rated as lowest aspects of QOL (proxy) (Biggs & Carter, 2016).
- ▶ ● Leisure pursuits are typically isolated activities (Wegner et al., 2005).



Community Integration for Intellectually Disabled Outcomes Post-High School



- ▶ ○ Less likely to be employed (especially at minimum wage)
- ▶ ○ Less likely to be enrolled in postsecondary education
- ▶ ○ Less likely to be engaged in volunteer activities
- ▶ ○ Nearly half report non-involvement in survey items related to community activities in past year
- ▶ ○ Over one-third not registered to vote

NLTS-2 Findings (Newman et al., 2011; Grigal et al., 2011)

Goal # 1 Community Access

- ❑ Community Integration
 - ❑ Social Inclusion
- ❑ Community Participation
 - ❑ Engagement
 - ❑ Belonging
 - ❑ Connectedness...





Explore will address Community Access needs.

- ▶ Public libraries, local businesses, rest homes, restaurants, banks, offices, hospital, courthouse, recreational facilities, UK extension office, etc.
- ▶ Curriculum to teach independent living skills & community resources
- ▶ Daily social skills /connecting with other clients at the Muhlenberg County Opportunity Center.
- ▶ Community volunteers come to MCOC to provide special programs such as music, art, computer skills, etc.
- ▶ Learn how to live independently by washing clothes, ironing, cleaning, shopping, etc.



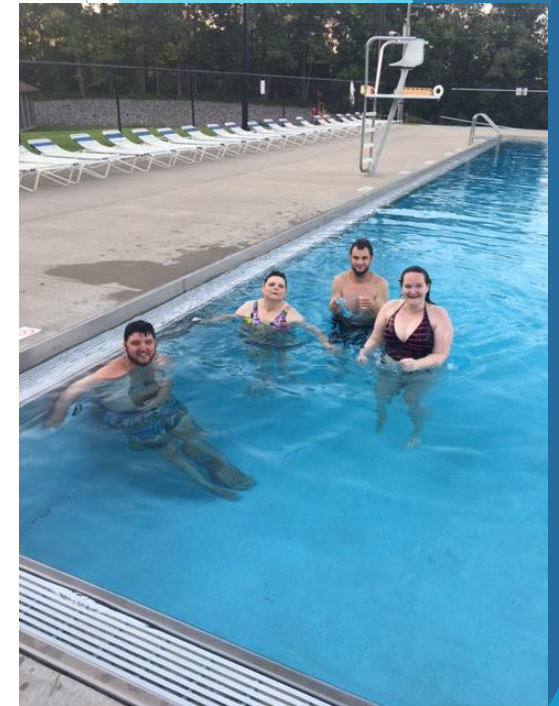
Goal # 2 Health & Wellness

- ▶ According to Emerson (2011), there are five key determinants of health inequalities affecting people with intellectual disabilities:
- ▶ 1. Greater risk of exposure to social determinants of poorer health such as poverty, poor housing, unemployment and social disconnectedness.
- ▶ 2. Increased risk of health problems associated with specific genetic, biological, and environmental causes of intellectual disabilities.
- ▶ 3. Communication difficulties and reduced health literacy.
- ▶ 4. Personal health risks and behaviors such as poor diet and lack of exercise.
- ▶ 5. Deficiencies relating to access to healthcare provision.



Health Lifestyle Challenges

- ❑ According to National Core Indicators, 77% of people with intellectual disabilities do not engage in moderate physical activity.
- ❑ Only 11% of people with intellectual disabilities exercise for 30 minutes 1-2 times per week.
- ❑ According to *Healthy People 2010*, patterns in data indicate adults with developmental disabilities are lacking support in making food selections and consume inadequate amounts of some nutrients and food groups, and too much of other food groups
- ❑ Without effective interventions, overweight/obesity in this population will become massive



Live.Life.Healthy



Explore will address Health & Wellness needs & challenges.

- ▶ Clients will have access to parks & walking trails in our community.
- ▶ Clients can participate in local gym membership at a reduced fee.
- ▶ All clients will participate in “Health Matters”. This program is a combination of strategies for healthy lifestyles and exercise.
- ▶ Clients will learn how to plan healthy meals and make healthy choices.
- ▶ Clients will have daily opportunities to exercise.
- ▶ Clients will work through a curriculum that address hygiene and self-care.



Mental Health Issues that clients face:

- ▶ [Autism](#)
- ▶ [ADHD: Attention Deficit Hyperactivity Disorder](#)
- ▶ [Anxiety Disorders](#)
- ▶ [Bipolar Disorder](#)
- ▶ [Depression: Major Depression & Unipolar Varieties](#)
- ▶ [Eating Disorders](#)
- ▶ [Dissociative Disorders](#)
- ▶ [Impulse Control Disorders](#)
- ▶ [Internet Addiction And Media Issues](#)
- ▶ [Obsessive-Compulsive Spectrum Disorders](#)
- ▶ [Personality Disorders](#)
- ▶ [Post-Traumatic Stress Disorder](#)
- ▶ [Schizophrenia](#)
- ▶ [Sexual Disorders](#)
- ▶ [Suicide](#)
- ▶ [Tourettes And Other Tic Disorders](#)



Clients will have access to resources & strategies to help them deal with mental health issues.



- ▶ Meet monthly with a mental health professional.
- ▶ One-on-one mentoring with a Community Support Associate daily.
- ▶ Crisis intervention strategies.
- ▶ Curriculum to learn what triggers their melt-downs and how to deal with emotions when this happens.
- ▶ Work with families on strategies to support clients.

Goal # 3 Vocational & Career Options

- ▶ ● 85% adults with I/DD were not employed.
- ▶ ○ Lack of employment services and unmet needs in the areas of job support.
- ▶ ○ 52% is unable get the job training or other assistance they need to find and keep a job.
- ▶ ● Even among those who are employed, regular jobs in the community with competitive wages remain elusive.
- ▶ ○ Only 41% works in a regular job in the community, 1% are self-employed, 54% work in sheltered workshops and enclave settings.
- ▶ ○ Only 57% earns at least minimum wage.
- ▶ Family and Individual Needs for Disability Supports (FINDS) survey (2010)



Vocational Skills



- ❑ Clients will work with their mentors on a vocational curriculum which includes career interest inventory, soft skills, work performance, job searches, and work ethics.
- ❑ Clients will go with mentors in the community and volunteer at different businesses to help them figure out their interests.
- ❑ Clients will shadow different people in different occupations to help them figure out their interests
- ❑ Clients will become more confident to work in the community once they have experience.
- ❑ The community will become more confident in the clients once they've gotten to see them work.

Explore Behavioral Health Goals

Community Access

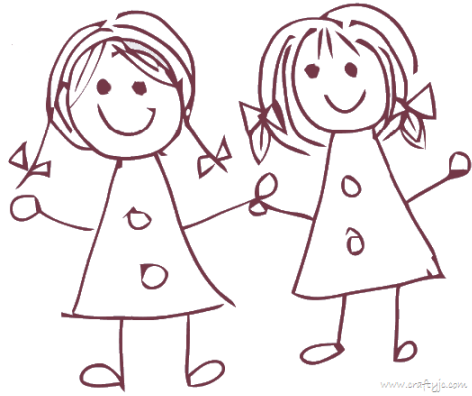
- Social Interaction
- Daily Living Skills
- Setting future goals

Health & Wellness

- Physical Health
- Healthy Lifestyle
- Mental Health

Vocational Skills

- Working
- Volunteering
- Observing
- Shadowing
- Learning



Community Support Associate (CSA)

To qualify as a CSA you must:

- ✓ Be 18 years old or older.
- ✓ Have a high school diploma or GED
- ✓ Have at least 1 year of experience working with people with disabilities.
- ✓ Have a current criminal background check
- ✓ Pass a random drug test
- ✓ Have a vehicle
- ✓ Have a valid driver's license & valid vehicle insurance
- ✓ Have a cell phone
- ✓ Have access to a computer and an email address





CSA Job Responsibilities

- ✓ Keeping daily notes on your client that match their short / long-term goals and turning them in weekly.
- ✓ Writing a monthly summary each month about your client.
- ✓ Keeping a precise time sheet for yourself and your client. You may not go over 40 hours per week.
- ✓ One-on-one mentoring with client.
- ✓ 8 hours of initial professional training & 6 hours
- ✓ Getting to know client's family / guardians to help decide goals & services needed.
- ✓ Weekly planning with Program Manager & Team members.

