

Subject: AUCD published in American Journal of Psychiatry

Good afternoon Sahara,

We are pleased to share that several members of our network, including Policy Director Rylin Rodgers and Executive Director John Tschida, published a Letter to the Editor in The American Journal of Psychiatry on the impact of the COVID-19 crisis on the lives of people with intellectual and developmental disabilities (IDD). You can read the full piece on the journal's website, [‘The Impact of COVID-19 on Individuals with Intellectual and Developmental Disabilities: Clinical and Scientific Priorities’](#), as well as a [CNN report](#) on the Letter.

We've included a review of the authors' recommended policy priorities to support the lives of people with intellectual and developmental disabilities during the COVID emergency here for your ease:

1. Fund and support in-person home- and community-based services or comparable alternatives.

Problem: Due to the ongoing COVID-19 crisis, many individuals with IDD have temporarily lost access to trained caregivers or community service providers, and it is unclear when access to services will stabilize due to uncertainties in state and agency budgets.

Recommendation: In-person home- and community-based services resume given staff screening, training, and equipment to keep clients safe from COVID-19.

2. Guide recovery efforts by which individuals with IDD can and cannot benefit from electronic substitutions.

Problem: COVID-19 mitigation efforts such as a switch to telecommunications and social distancing have disproportionately impacted individuals with IDD, who often rely upon caregivers and loved ones to bridge gaps in intellectual and communication abilities and to make day-to-day life fulfilling, predictable, and manageable.

Recommendation: Recovery efforts be guided by a recognition of which individuals with IDD can and cannot benefit from electronic substitutions for therapy, education, and social interaction, and address the "digital divide" as needed.

3. Address inequity in education across the lifespan.

Problem: Virtual education services have exacerbated a discrepancy between educational services for typically-developing PreK-12 students and students receiving special education services under the Individuals with Disabilities in Education Act (IDEA). Job training programs for adults with IDD in the workforce have also been disrupted.

Recommendation: Clarify which individuals with IDD are more amenable to in-home services, and mobilize qualified in-home personnel for education and job training across the lifespan to support parents and caregivers.

4. Evaluate emergent implementation of telehealth practice in clinical care.

Problem: While telehealth has many virtues, exclusive reliance on telehealth leaves gaps in critical aspects of the delivery of appropriate health care for some individuals with IDD due to potential communication barriers.

Recommendation: Potential gaps in communication must be recognized and incorporated into risk and benefit appraisals of telehealth vs. in-person clinical appointments.

5. Fair and inclusive access to testing and treatment for individuals with IDD infected with COVID-19.

Problem: The pandemic has increased hurdles to adequate testing and treatment for individuals with IDD. Ethical concerns have arisen in response to potentially discriminatory practices in allotting strained healthcare resources (e.g. ventilators).

Recommendation: Inclusion of disability rights advocates in policy development and dissemination concerning the prioritization of COVID-19 healthcare and lifesaving medical treatments.

Please do not hesitate to reach out should you have questions about the article or to discuss how to support the rights and needs of people with disabilities in upcoming COVID-19 relief legislation. We thank you for all of the hard work of you and your boss, and look forward to connecting after the August recess.

All the best,

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AUCD Centers Serving Guam



University Centers for Excellence in Developmental Disabilities (UCEDDs) work with people with disabilities, members of their families, state and local government agencies, and community providers in projects that provide training, technical assistance, service, research, and information sharing, with a focus on building the capacity of communities to sustain all their citizens.

**Guam Center for Excellence in Developmental Disabilities
Education, Research, & Service**

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Disability in Guam by the Numbers

2,015

Students age 3-21
receive special
education supports¹

45.2%

of people with
disabilities are
employed²

&

15,520

People completed
vocational training
program³

167,400

Total Population
Size⁴

vs

35,798

People Covered by
Medicaid & CHIP⁴

6,809

Individuals with
disabilities living in
communities⁵

AUCD and Your Office

The Association of University Centers on Disabilities (AUCD) supports a national network of university-based interdisciplinary programs in every U.S. state and territory. We are a trusted resource on disability policy issues and stand ready to connect you to resources, research and expertise in both policy and constituent service.

1. IDEA Section 618 Data Products: Static Files. Part B. Retrieved from <https://www2.ed.gov/programs/osepidea/618-data/static-tables/index.html>.
2. U.S. Census Bureau, 2010 Census Guam
3. U.S. Census Bureau, 2010 Census Guam
4. MACPAC, *Medicaid and CHIP in the Territories*, (Washington, DC: MACPAC, October 2017), <https://www.macpac.gov/publication/medicaid-and-chip-in-the-territories/>. Kaiser Family Foundation analysis of population estimates from The World Factbook 2017. Washington, DC: Central Intelligence Agency, 2017, <https://www.cia.gov/library/publications/the-world-factbook/index.html>.
5. U.S. Census Bureau, 2010 Census Guam