

**IDD Program Performance Report**  
**Part 1A. Detailed Work Plan Progress Report**  
**Narrative Report of Progress**  
**July 1, 2021- June 30, 2022**

This narrative report of the work of the Arkansas UCEDD builds on the outputs and outcome data reported in the work plan, giving context to the data. It also describes work of the UCEDD that is based on leveraged funds and are not reported in the work plan.

**GOAL 1: Partners for Inclusive Communities (Partners) will increase in the state the capacity to screen, diagnose, and intervene with autism spectrum disorders and other developmental disabilities through providing pre-service training.**

The bulk of the UCEDD's preservice training was provided through the LEND program, although 34 additional students were reached through a class in the social work program at UALR, taught by UCEDD staff. LEND addresses all neurodevelopmental disabilities with a focus on Autism Spectrum Disorders. Their instruction and clinical practice in this area is designed to develop expertise that enables graduates to screen, identify and intervene with individuals on the spectrum across the age span, and where appropriate, participate on an interdisciplinary diagnostic team.

**Arkansas' Leadership Education in Neurodevelopmental Disabilities (LEND) Program**

The Arkansas LEND Program continued as a collaborative program between four (4) Universities in Arkansas and one (1) in Mississippi. Across the four (4) Arkansas universities, there were 19 faculty who mentored 30 long-term and 32 short-term trainees. Disciplines included audiology, developmental and behavioral pediatrics, general pediatrics, genetics, genetic counseling, health administration, nursing, nutrition, occupational therapy, physical therapy, speech-language pathology, psychiatry, psychology, social work, special education, family advocacy and self-advocacy. Faculty and students from University of Southern Mississippi were not officially included as trainees this year but continued to participate in lectures and activities.

The didactic portion of the LEND program includes scheduled lectures and interviews with families. The family component uses a problem-based learning approach to conduct guided interviews with four (4) families who have children with disabilities across the age range, from preschool to transition-age students. This gives trainees experience in conducting interdisciplinary interviews to determine the needs and priorities of the families, completing research on high priority topics, presenting that information to the family in a follow-up visit, and preparing a family-friendly plain language document with recommendations, referrals and resources. Trainees select "learning issues" from a list generated during the interviews with one being in their field of study and one being outside it. This is another effort to further the interdisciplinary component of LEND.

The didactic lectures were expanded this year to include a larger focus on equity, diversity, and inclusion. All lectures previously offered during the didactic portion are recorded and continue to be available each year for the new cohort of trainees. While the knowledge, content and leadership competencies are infused in the various LEND training activities, the

targeted lectures will assure thorough coverage of the full training content, especially topics that may not naturally or consistently arise in other context-specific experiences. A newer design to didactic lectures provided a more impactful learning experience for trainees. This new approach was to formally schedule discussion time, with probing topics/comments provided by the presenter, to stimulate the discussion. Following the lecture, LEND trainees and faculty broke into small interdisciplinary groups to discuss the topics, and then shared highlights of those discussions with the entire LEND class. During this year, lectures were added to address implicit bias, racism, ableism and other forms of discrimination.

In addition to the weekly didactic component, trainees participated in a wide range of clinical activities. Some were traditional diagnostic clinics for individuals with ASD or FASD and others included participation in a vast array of community-based activities. Some of these activities included participation in home visits with a team providing early intensive intervention for young children with ASD; participation in ADA accessibility surveys of community buildings, parks, playgrounds, and walking trails; participation with policy development and legislative advocacy; participation in modification of curricula and training of self-advocates on *Feeling Good about my Smile, Cooking Matters and Walking with Ease*.

The LEND program developed a strong collaboration with the Title V Children's Services staff from the Division of Developmental Disabilities Services. The Title V Nurses who provide care coordination for children and families with special health care needs across the state were active participants in all the didactic presentations. Continuing education credits were provided for all these activities.

### **UALR Social Work Course**

Vanessa Vaden Krause, MSW is full-time staff member at the UCEDD and serves as the Discipline Coordinator in Social Work for LEND. In addition to LEND/UCEDD activities, she taught the Social Welfare Policy I and II courses at the University of Arkansas Little Rock (UALR) during this year. The course is a two-semester course for BSW students. During this year, Ms. Krause taught one section of this course in the Fall of 2021 with seven students and two sections in the Spring with 27 students, for a total of 34 students enrolled in the bachelor's program in social work.

Part one of this two-course sequence examined policymaking in the governmental context. The process at the local, state, regional and national levels were reviewed and service/benefits entitlements provided under these policies were summarized. The history, organization, guiding principles and resulting programs that govern major social welfare institutions were explored. Theories of social justice were studied to understand the phrasing of policy claims and their assessment.

Part two of the sequence explored topics such as history and current structures of social welfare services, the role of policy in service delivery and in social work practice, attainment of individual and social well-being, and comparative and international social welfare. The course emphasized understanding of current developments in social welfare, factors affecting the structure and dynamics of social welfare policies/services as well as understanding the role of the social work profession within that framework. Additionally, models for analyzing social welfare policy were introduced, and students applied these models to past policy decisions and current issues.

**GOAL 2: Partners will improve community inclusion for persons with autism and other developmental disabilities by providing community training, technical assistance, and community-based services.**

**Allies Training Series**

The overall goal of the Allies Training Series is to help nondisabled people understand the best way to support people with disabilities as an “Ally”. This two-part training is designed to remind participants that people with disabilities have rights, the same rights as everyone else. Part one, *How to be an Ally*, gives participants information and tools on how to be a good Ally. Part two, *Allies in Action*, goes more in depth into ally-ship and provides real examples of being an ally and the effects of this type of support. Real scenarios of situations from the lives of people with disabilities are used and discussions are facilitated about what a good ally would do if they encounter that situation. This aids in people learning about power dynamics and action steps to being an ally. *Allies in Action* helps with understanding the difference between support and direction and how not to have *power over* but rather *power with*. Both parts of the training are provided by a team, including one person with a disability and one without...acting as an Ally. This is a very effective team who models good “ally-ship” throughout the training series. Participants get information and modeling of how it looks when it is done well.

Six (6) Ally related trainings were completed during this year. This included three sessions of How to be an Ally: Professions; and one each of How to be an Ally: Friends and Family; Allies Supporting Choices, and Coffee Time with Allies. The total number of participants across these sessions was 302. The attendance continued to increase as participants who attended returned to their provider agency and recommended the training to others. It is noteworthy that there were a significant number of participants from one of the Medicaid managed care organizations. Since these organizations are responsible for conflict-free care coordination for individuals with intellectual and developmental disabilities who are waiver eligible, it is an important group to impact with this information.

Additional detail on this project and its impact is included in Optional Appendix for this report as “Additional Noteworthy Information”.

**Arkansas Disability & Health Program**

The Arkansas Disability and Health Program began as a CDC Grant but has continued with funding provided by the University of Arkansas. Given the University’s land grant mission for outreach to the entire state and the glaring health disparities experienced by people with disabilities, this project was considered essential and was continued when grant funds were no longer available.

The project provides multiple activities relating to the social determinants of health including dissemination of health information, accessibility surveys for community farmers markets, health education trainings, technical assistance to state and local coalitions to ensure inclusion of the needs of people with disabilities, inclusion trainings, and conference presentations.

Outcomes included 29 health related messages disseminated to 1914 individuals with disabilities; six (6) farmer’s markets surveyed in rural parts of the state (Pine Bluff, McCrory, Nashville, Hot Springs, Springdale, Forrest City); five (5) *Walk with Ease* classes for 40 individuals with disabilities; three (3) *Cooking Matters* classes for 30 individuals with disabilities; two (2) *Diabetes Education* classes for 29 individuals with disabilities; and 18 graduates from five different communities completed the *Arkansas State Walking College*.

91 hours of technical assistance regarding disability and health related topics was provided to 11 entities. This includes participating on state and local committees ensuring inclusion for all Arkansans (Arkansas Coalition for Obesity Prevention, Arkansas Chronic Disease Coordinating Council, Arkansas Community Health Workers Association, Arkansas Arthritis Collaborative, Better Together Stakeholders Group, Building Resilient Inclusive Communities and Arkansas State Walking College).

ADHP has a contract with the Arkansas Department of Health with their Building Resilient Inclusive Communities (BRIC) grant. ADHP is working with 3 communities (Gosnell, Chicot County, and Helena/West Helena) to ensure local coalitions are inclusive in their work regarding nutrition security, access to physical activity, and social connectedness. This includes ensuring access and inclusion of people with disabilities involved in the local health coalitions directing these activities. Reviewing the national Nutrition Pantry Program and its implementation in several local food pantries and programming. And provided technical assistance in any community access and inclusion in all BRIC efforts.

ADHP also has a contract with the Arkansas Department of Health on their Arthritis activities. ADHP has adapted Walk with Ease for non-readers and implements it around the state. Next year we are working on developing a video of the lecturettes included in all 18 classes so they are accessible for all abilities.

Participation by staff of this project on state level planning teams and collaborative activities has ensured that people with disabilities are represented across agencies and strengthened the partnerships for the UCEDD.

### **Arkansas Autism Partnership**

Partners for Inclusive Communities continues to be the managing agency for the Arkansas Autism Partnership (AAP), the state's Medicaid Waiver program for young children with Autism Spectrum Disorders. Partners has been granted delegated authority by the Division of Developmental Disabilities Services (DDS) to serve as the administrative authority to operate this program. The program is funded with a managing budget of \$628,700 per year. The AAP initiated services October 1, 2011, with 100 slots authorized statewide. The program now serves 180 children between the ages of 18 months and 8 years, with enrollment required prior to the child's 5<sup>th</sup> birthday. Six hundred and eighty-eight children have been provided services through this program. Applications have been received from children residing in all seventy-five Arkansas counties.

As a result of the outcomes of the program, the Arkansas General Assembly enacted Act 1008 of 2015 to expand the waiver from a total of 100 children to 150. In June of 2017, CMS notified the State that they were going to approve the waiver renewal and allow the additional 50 slots to be implemented. On December 7, 2017, this approval was received from CMS for the additional 50 slots. These were all processed by the Partners' team within 30 days, increasing the point-in-time number of children for FY 2018 from 100 to 150. During the Regular Session of the 92<sup>nd</sup> General Assembly, occurring in 2019, an additional \$1 million was appropriated for expansion of the autism waiver program. An additional 30 slots were requested of CMS in the form of an amendment. This approval was received in May of 2020. At that point in time, 30 children were on the waiver waiting list. Those 30 children all received waiver slots. The Partners' team completed their intake within 14 days of the notification. Currently, an additional amendment is being drafted to the waiver that will again increase the number of children being served in the program. Once this approval is completed, the additional children will be added.

The program utilizes evidence-based practices recognized in the National Standard's Report. These interventions are implemented by a team, made up of a Consultant, Lead Therapist and Line Therapist. One of the unique characteristics of this program is that it utilized a multi-disciplinary approach to the assessment of the child and development of the treatment plan. The Consultant, the team member who completes the assessment, develops the treatment plan, trains the implementation staff/parent, and oversees the intervention can be from a variety of professional disciplines. The accepted credentials include Board Certified Behavior Analysts, Speech-Languages Pathologists, Special Educators, or Psychologists who have experience in autism treatment.

The program is designed as a home-based program, with parental involvement required. Children receive between 20 and 25 hours per week of one-to-one intervention. Parent/guardians are required to be present during the treatment and to participate in the implementation of the intervention for a minimum of 14 hours per week, when the team is not present.

Outcome data for children continues to be analyzed. All children served in the program have made progress, as measured by the Assessment of Basic Language and Learning Skills-Revised (ABLLS-R). When comparing the pre and post ABLLS for 156 children who received services during this past year, the average initial ABLLS score reflected 71 objectives at the initiation of services and the average final score reflected 397, for an average gain of 245. When outcomes were reviewed per child, the total number of objectives acquired ranged from 27 to 1097. Families consistently report that the program has been life changing for their children and their entire families.

### **Arkansas Autism Resource & Outreach Center project (AAROC)**

The Arkansas Autism Resource & Outreach Center project (AAROC) is a state-wide outreach program funded by a contract with Autism Resource Outreach Center, an Arkansas 501(c)3 charitable non-profit organization. The AAROC provides training and technical assistance on autism spectrum disorder (ASD) statewide, including the following activities: provision of information/referral services for families (on an as needed basis) to assist them in identifying needed services/resources or in navigating the very complicated service system (approximately 800 total hours to approximately 275 total parents/caregivers); provision of technical assistance for schools, preschools, and adult service settings to educate staff about ASD and improve the quality of services offered (approximately 100 total individuals); provision of training for parents and other family members to understand ASD and identify and secure appropriate services/supports (10 total parents/caregivers); provision of training for professionals on ASD and Inclusion, including: law enforcement officers and first responders (approximately 50 total trainees), school resource officers and other Public School Administrators/Staff (approximately 75 total trainees); participation in awareness and advocacy activities to improve the health, education and human services systems' ability to support individuals with ASD and their families (including the Arkansas Legislative Task Force on Autism); and assistance to the 501(c)3 non-profit Autism Resource Outreach Center in developing grant programs to assist community programs for children without disabilities that wish to include children with ASD.

The AAROC is recognized as the premier autism advocacy group in the state and is recommended to all families by clinicians who provide the initial diagnosis of ASD. It is also the group that is asked to provide input on disability policy impacting people with ASD.

## **Arkansas Bilingual Interpreter Credential in Education (ABICE)**

The UCEDD developed a credential course for adults who provide oral language interpretation in educational settings. The 40-hour *Arkansas Bilingual Interpreter Credential in Education (ABICE)* training course was offered virtually through Google Classroom and Zoom, three times during FY22. To date, 148 interpreters representing three language pairings Spanish/English (138), Marshallese/English (7), and Sgaw-Karen/English (3) have successfully completed the course and obtained the ABICE credential. ABICE is recognized as a professional credential in education for early childhood and K-12 by the Arkansas Department of Education, Division of Elementary and Secondary Education (DESE) and by the Arkansas Department of Human Services Division of Child Care and Early Childhood Educations (DCCECE). In addition, an online database is available to match individuals providing bilingual interpretation/translation services in education with those seeking their services, <https://abice.uark.edu>.

To obtain the ABICE credential, participants must complete the 40-contact-hour training course; pass five quizzes during the course; demonstrate appropriate interpretation skills during the course and pass (80% or better) a comprehensive written final exam. The course may be presented either in-person or virtually, but it will cover the same content. Although this course is for oral language interpretation, reviewing the training materials and completing the final exam require English reading comprehension and writing skills.

Title VI of the Civil Rights Act provides the legal foundation for this credential. Programs receiving any federal funding are to provide qualified adult interpreters when needed for meeting with families who have limited proficiency in English. When a school or program uses an ABICE credential interpreter, it shows that they are meeting this federal guideline. Qualified interpreters are important to effectively support and engage families and “increase communication across all languages,” which addresses the *Family and Community Engagement – FACE Essentials AR*, (Communication Key Elements –Communication Essential, <https://sites.google.com/view/engagementmattersAR>).

A training was added this year for educators and administrators who conduct interpreted meetings. It is important for educators to understand the proper structure and flow of interpreted sessions (especially IEP meetings); legislation requiring language access for families; and importance of using qualified, adult interpreters.

Obtaining the ABICE Credential has positively impacted many bilingual interpreters in the state. For example, these comments were expressed in an email from ABICE Credentialed Interpreter, Aida Kuettle, South Conway County School District, “*I just wanted to update you about the long-lasting effect your program has made on my learning community. Acquiring the ABICE credential has elevated my practice and the role I served in my school district to levels that I never imagined. Last Summer, I was selected to make a presentation in regards to the FACE Essentials on the topic of communicating with families at the ADE Summit organized by the Arkansas Department of Education. Three months ago, Arkansas PBS invited me to participate in a program that is mandated for all school districts in Arkansas with an estimated audience of 10 000 educators across the state. I was honored to partake in the program "From Extra to Essential: Family and Community Engagement in Arkansas Schools," representing my school district and sharing my experience as a credentialed interpreter. The program is available to all educators in Arkansas at this moment and I hope that more colleagues in my position feel motivated to complete the ABICE program.*”

Additional information on this credential can be found on the website at <https://uofapartners.uark.edu/projects/welcome-the-children/abice>.

### **Arkansas Victim Assistance Academy (AVAA)**

The mission of the Arkansas Victim Assistance Academy is to provide comprehensive foundational and advanced level training to professionals throughout Arkansas who routinely serve victims of crime. The Arkansas State Victims Assistance Academy Initiative is supported by a subgrant agreement from the Arkansas Department of Finance and Administration, Victim Justice Assistance Program to the University of Arkansas-Partners in collaboration with the Crime Victims Assistance Association of Arkansas, and a multi-agency Academy Steering Committee. This project is supported with funds from the Department of Justice, Office of Justice Programs, Office for Victims of Crime.

The pandemic significantly impacted efforts with the in-person AVAA trainings usually conducted in a one-week onsite effort and a two and a half day advanced onsite training. The AVAA foundational training was divided into 6 days with three days occurring in June 2021 and the other three days in July of 2021. There were 66 online participants for this more comprehensive training. For the 2022 AVAA we repeated the virtual training on zoom. It was again divided into six days with three occurring in June of 2022 and three days to occur in July of 2022. During the first week of the Academy a total of 70 participants. The success of these efforts to adapt the training to a virtual format was primarily due to the steering AVAA committee members representing 15 agencies who helps to inform decisions and a core team to implement. All workshops included either captioning or CART. 82% of training participants rated the training within the highest category possible on the evaluation.

One trainee was able to use information learned in the training to intervene in an altercation between law enforcement and an individual with disabilities and prevent the individual from being tased. Enabling the law enforcement officers to understand that the individual's "erratic and unusual behavior" was his way to communicate that he was upset because his provider agency did not have his usual snack available and that his coping strategy was to exit the building and take a walk to calm himself. Without this narrative being provided to the law enforcement representatives, this harmless incident could have escalated to something very dangerous for the individual.

### **Assisting Crime Victims With Disabilities**

Partners, in conjunction with collaborators from numerous state agencies, nonprofit organizations, victim services organizations, and local multidisciplinary teams, has worked to establish a network of education and technical assistance to improve services for people with disabilities who experience violence. The goal of this project is a coordinated, multidisciplinary approach to improving the criminal justice system's response to violent crimes and increasing their capacity to address the needs of people with disabilities. This project supports victims with disabilities through a training and co-advocacy efforts and is overseen by a statewide advisory committee representing diverse fields. This effort is a subaward funded through the Arkansas Department of Finance and Administration's Victims Justice Assistance Project with funding from the Department of Justice, Office on Violence Against Women.

Efforts toward co-advocacy and serving victims during the pandemic is the biggest accomplishment of this effort. The intensity of the coordination needed by victims to obtain supports was difficult both for them and the service providers. Education of new staff within our multidisciplinary partnership has been instrumental in ensuring that people with disabilities are

served in the best way possible. Trauma-informed practices has been in the forefront of serving people and in the conversations with partner agencies.

Direct services were provided to 11 victims during this period. Due to the complexity of these cases, each requires multiple contacts and skill to navigate systems that are not always responsive to people in crisis, particularly not with the added complication of a pandemic. Nineteen (19) trainings on zoom with 832 people attending during the year. Several of these attendees are from the victim service field, disability field, and health fields.

The project coordinates three local multidisciplinary teams to support our efforts. These meetings previously held in person switched to zoom meetings. The Pulaski County Disabilities and Violence Collaborative met monthly (10 meetings). The Northwest Arkansas Collaborative met 10 times during the year. Support was also provided to a Bilingual and Allies Multidisciplinary Meeting because of the additional support needs encountered by programs throughout the state who employ advocates to work in this community (2 meetings). This effort helped to relieve some of the stress and helped to combine knowledge of more seasoned advocates with less experienced ones.

Successful collaboration resulted in the development of a new training to address traumatic brain injury, a topic of major concern for providers in the domestic violence field. The team at Partners, the local traumatic brain injury group (UAMS-TBI), and the Telecommunications Access Program (TAP) joined together to merge skills and knowledge. Domestic violence can involve blows to the head and/or strangulation, both of which can cause injury to the brain. Understanding the basics of head injury is important for workers supporting victims of domestic violence, since the manifestations are often less obvious.

Another collaboration impacted the development of the State of Arkansas Implementation Plan for the STOP Violence Against Women Formula Grant. This plan was drafted for the 2022-2025 period by the Arkansas Department of Finance and Administration, Office of Intergovernmental Services (DFA-IGS). UCEDD staff participated in the work groups for this plan to address the continued expansion of services for culturally specific and underserved populations across the State of Arkansas including a specific evaluation for funded programs providing services for people with disabilities, Deaf people, and others for whom English is their second language. These specific performance indicators will be utilized at the beginning of the funding cycle and at the end to measure change. Since this outcome measurement is now included in the state plan, it will impact all programs funded from this federal source.

### **Children with Disabilities Child Welfare Project**

The purpose of this project is to develop training modules that improve the ability of the child welfare system to respond to the needs of children with disabilities who are taken into care, have open protective services cases, or are in the adoption system. The pandemic has exacerbated the volume and intensity of child abuse and neglect findings and has made identification of foster placements even more difficult. Additionally, the state is having a significant number of adoptions disrupt where adoptive families are returning the children to the care of the state. There are numerous complex cases where children have significant needs that manifest in behavioral challenges causing them to bounce from placement to placement, including residential treatment facilities. This placement bouncing serves to further traumatize these children making their need for support even greater.



Project staff have completed numerous interviews and information gathering sessions with various stakeholders across the system. These stakeholders included administrators, treatment professionals, foster parents, service providers, and advocates. The uniform message was that the system is in disarray for all children, not just for children with disabilities; that case worker turn-over is at an all-time high; and that the intensity of trauma and abuse experienced by children is more intense than ever before.

One of the most significant findings from this data gathering is that the messaging around how to support children with significant behavioral challenges being provided to workers and families is, at best, inconsistent and, at worst, dangerous. The professionals providing this training do not appear to be trauma-informed or well grounded in sound behavioral principles. One example is from a webinar provided by a psychologist from the referral center for children with the most significant behavioral challenges.....a location viewed as having the best expertise in the state. This training included a comment by the trainer that “punishment could be a very effective part of a treatment package if it was immediate and powerful”. There were no cautions provided on the negative effects of punishment or the fact that it doesn’t teach the child what to do instead of the target behavior. Since punishment is often part of the pattern of abuse these children have suffered, this recommendation seems irresponsible. Another example comes from a curriculum being provided by one of the state’s contractors who provides training to case workers and foster/biological families. This curriculum is a prescriptive approach without any individualization or analysis of a child’s specific behavior and consistently recommends strategies including time-out, “planned ignoring”, and punishment.

Project staff are developing modules that address behavior as communication, utilize a trauma-informed approach recognizing that many antecedents for behavioral contingencies are trauma triggers, and provide children with sensory strategies that help them recognize their symptoms of escalation and learn tips to calm themselves and regulate their arousal. Staff will also address with administrators the need for consistency and kindness in the approach used with these children.

## **COVID-19 Activities**

Several COVID-19 grants have been undertaken by the UCEDD during this year. The focus of these grants, during the initial phase was supporting community-based providers of disability and aging services with their ongoing needs during the pandemic. Project staff created a statewide steering committee with stakeholders from both the disability and aging communities as well as advocates and state agency representatives. This 15-member committee has been an integral part of these projects providing guidance in developing its action plan and in establishing priorities.

The priorities that were identified and carried out by project staff have included distributing Personal Protective Equipment (PPE) to community-based providers, arranging/hosting 10 vaccine events for both initial shots and boosters, and providing information dissemination/training on pertinent topics. PPE is an ongoing need especially for small, rural providers since many operate on small budgets with little or no cushion for unanticipated expenses. The cost of PPE and the length of time it has been needed was an unmanageable hardship for many of these agencies. Even when agencies had an ongoing budget for PPE, the current inflated costs for these items rendered their budget allocations insufficient. They have also experienced ongoing interruptions in the supply chain making it difficult to access these supplies in a timely manner.

Project staff have collaborated closely with outreach staff at the Arkansas Department of Health (ADH) during the pandemic to obtain and share information and support vaccine clinics. ADH wanted to ensure that Arkansans who were elderly and/or disabled had equal access to vaccines but lacked the connection with these communities to ensure that their efforts were successful. The partnership between ADH and the UCEDD provided the necessary relationships and trust needed in this situation. Ten (10) vaccine clinics were held during this period for community-based providers of disability services across the state, impacting both the individuals with disabilities served and their direct support staff.

The most recent activities undertaken with these funds broaden the focus to include workforce stabilization. The catastrophic shortage in caregivers across the system, that has been exacerbated by COVID 19, makes providing community-based services for people with disabilities and the elderly much more of a challenge and creates risk that these individuals could be forced into larger congregate facilities where staffing shortages can be more easily mitigated. Given the increased risk of infection in these settings, this is certainly NOT the desired direction. One of the ongoing issues that contributes to difficulty hiring direct support professionals (DSPs) and increased turnover in these positions is the lack of skills needed to respond appropriately to behavioral challenges presented by clients. This lack of skill results in negative interactions, risky physical intervention, additional trauma for the individuals, and increased staff turn-over. To respond to this need, staff of this project have developed a comprehensive training curriculum that engages management and DSPs in acquiring skills needed to implement trauma-informed positive behavioral supports. This training leads to certification that is recognized by the state DD agency and equips certificates to develop PBS plans required for individuals with challenging behavior. The goal is to improve the quality of life for the individuals served and reduce staff turn-over, thus assisting with workforce stabilization. The initial round of training was completed during the Spring of 2022 and another is scheduled for the Summer.

### **Cultivating Community Capacity (C3)**

C3 is a project focused on cultivating community capacity in the Arkansas Deaf community to understand trauma and its impact, create more trauma-aware spaces, and heal from trauma. The project supports training, technical assistance, co-advocacy and direct services provided to both the Deaf community and to victim advocacy organizations. C3 is supported by a STOP Violence Against Women Act grant through the Arkansas Department of Finance and Administration.

C3 project staff provided training to the DEI committee of the Arkansas Registry of Interpreters for the Deaf on cultural humility, being trauma-informed, and power & privilege. One attendee said it was the best DEI training she had ever attended in her over 30-year career. Additional training was provided on service animals and emotional support animals in two (2) domestic violence shelters. Technical assistance has been provided in an ongoing manner with the Deaf community to build capacity in the areas of mental health and advocacy.

### **Digital Access Solutions for AHEAD**

The goal of this project is to increase the accessibility of digital resources provided by AHEAD presenters and the AHEAD website through document assessment and remediation, technical assistance to AHEAD presenters, resource development and curation, website accessibility testing, and tracking and reporting. This project is supported through a contract with the Association on Higher Education and Disability (AHEAD).

Project staff evaluated and remediated documents, handouts, PowerPoints, online presentation submission software, online course materials, and website. The AHEAD staff recognized the value of this layer of support and plan to double their commitment to this effort in the coming year.

### **Family Peace Center Collaborative**

For over 40 years, Women & Children First (WCF) has been leading the way in the provision of domestic violence services in Little Rock. Over the years they have seen an increase in need for shelter and other supports and have pivoted to provide additional services, such as advocacy, support groups, a transitional housing program, education and career classes, as well as life-skills, parenting, and others. In the meantime, the shelter was at capacity nearly every night in a building that is over 100 years old and in need of extensive maintenance. The Board of WCF decided that a move to a building twice as large was needed to expand their capacity to respond to the needs of the community. In 2014, Women & Children First completed their first strategic plan that included the creation of a revamped board and leadership team, improved financial stewardship and sustainable community support to provide the foundation for future planning. Several Steps were taken to educate and participate in the movement of Family Justice Centers that were occurring in other states. While education was happening at WCF, several serendipitous efforts occurred when the LR Police Department was invited to be part of the Violence Reduction Network, a U.S. Department of Justice initiative that unites local law enforcement and criminal justice leaders with federal resources to tackle violent crime. Little Rock was chosen with the goal of improving the level of knowledge, communication, collaboration, and tactics involved in addressing violent crime. This also involved learning about and touring an existing Family Justice Center in San Diego, CA. Since this the effort has gained traction. WCF continues to educate and coordinate the movement to this effort in Arkansas.

#### **Planning Efforts**

With groundwork laid, WCF staff began planning for the development of a Family Justice Center in Little Rock to address the need to expand service delivery and include a new shelter to replace the existing building. They completed a survey to gather important planning information from 47 different stake holders in preparation for a Study Tour. The Family Justice Center Alliance (FJCA) Technical Assistance Team, a program of Alliance for HOPE International (Alliance), participated in a virtual Study Tour to support the development of a Family Justice Center in Little Rock. The focus of the Study Tour was to identify the current strengths and gaps in the county's various service delivery systems, pinpoint any processes that present challenges to survivors, and determine how the Alliance can best support ongoing efforts toward the creation of a Family Justice Center. The Study Tour began with a virtual Community Forum with recorded and live comments from Governor Asa Hutchinson; Mayor Frank D. Scott Jr.; Marcy Doderer, President and CEO, Arkansas Children's Hospital; District 29 Representative Frederick Love; Cathy Browne, Board Chair, Women & Children First; and Angela McGraw, Executive Director, Women & Children First. The sequence of messages shared during this welcome attest to the strong political support for a Family Justice Center on a state, local, and county level. Casey Gwinn, President of the Alliance, then provided an overview of the Family Justice Center framework to over 140 participants watching virtually. During this two-day event, the alliance also met with key stakeholders. The meetings with potential partners and community members resulted in helpful input about the benefits and obstacles of a Family Justice Center model. To represent the disability community, five (5) staff

from the UCEDD, the Executive Director of Mainstream Independent Living Center, and the Executive Director of Arkansas Spinal Cord Commission were participants. The following strength was highlighted in the final study tour report. “Little Rock has strong, dynamic services for people with disabilities. This will be an incredible asset to the Family Justice Center framework and an important voice to include during the planning process.”

WCF developed a Steering Committee and several supportive Planning Committees to complete the work necessary to make the Family Peace Center a reality in Pulaski County. The UCEDD has staff members who are active participants in all these committees and has committed to have a presence on site once the center is open. The goal of creating a hope-centered system of care for survivors and their families that is guided by the following principles....Survivor Driven – Kindness and Respect – Hope Centered – Safety Focused – Intentionally Diverse and Inclusive – Empowering Survivors, Families and Communities.

### **Increasing Digital Access in Arkansas**

The overall goal of this project is to increase the capacity of stakeholders in Arkansas to design more accessible digital environments which result in access for people who use assistive technology and other people with disabilities. This will be accomplished through the provision of training, technical assistance and resource development. Project deliverables include training, technical assistance and resource development.

Project staff provided technical assistance to a variety of organizations on digital access including providing information on accessible PDFs, accessible forms, and accessible phones, remediation of PDFs, and web accessibility testing to 32 people. Additionally, two 1-hour sessions were provided for the Teacher's Summit to a group of adult educators. There were 121 online and 86 in person participants. The title was Virtually Accessible: Strategies for Enhancing Access to Adult Education. A training session was provided for 21 participants from Arkansas and Louisiana on social media accessibility. A video tutorial called *3 Quick Tips for More Accessible MS Word Documents* was also developed. It is available on YouTube at the following link <https://youtube/jU6T7cXaHOw>. The funding agency was pleased with the outcomes of the project and will continue funding at the same level for the coming year.

### **Marshallese Interpreting for Community Inclusion (MICI)**

The Marshallese Interpreting for Community Inclusion (MICI) project, funded by the Arkansas Governor's Council on Developmental Disabilities, is a collaboration among Partners, the Marshallese Educational Initiative (MEI) in Northwest AR, and Seso, Inc. from Georgia. The goal of MICI is to reduce communication barriers to accessing disability supports and services in the Arkansas Marshallese community through provision of training and information that is communicated in culturally and linguistically appropriate methods. Marshallese individuals are directly involved throughout the MICI project, providing updated information on training and information needs; serving on the Advisory Group; participating as trainers / cultural liaisons and interpreter trainees; and providing community outreach and translations. Disability service providers are also involved to network, share resources and information on interpreter needs and participate in cross-cultural training sessions.

In the 2021-2022 program year, MICI provided two 25-hour interpreter trainings to a total of 14 Marshallese interpreters. The trainings involved an initial fluency assessment in English and Marshallese, videos, homework assignments, and live Zoom sessions that included small and large group activities. Participants worked on an online video glossary of

English/Marshallese disability terminology. The participants represented a variety of employers including educational, medical and other community settings. Feedback from training participants was very positive. One participant shared, "Today was the first day of the MICI Interpreter Training. I learned the importance of knowing your rights as an interpreter and also the importance of knowing your community/who one is interpreting to. I enjoyed being able to discuss and hear the points/perspective from different points of view from the other participants. The format worked well for me."

In addition to the training provided to interpreters, four intercultural trainings sessions (three virtual and one in-person) were provided to a total of 92 disability service providers (including 13 family members of individuals with disabilities and 2 adults with disabilities) by the Marshallese Educational Initiative (MEI). Topics included Marshallese history and culture, an overview of Marshallese in Arkansas, and notions of ability/disability. This training helped foster better understanding of individuals and families seeking services, and participants were invited to continue interacting through future networking opportunities. When asked about what they liked about the training, participant comments included: "Learning about the history and how it affects their views now. I also enjoyed just the way they related everything to our culture and compared them." Another wrote, "Having presenters who are Marshallese really helped my level of understanding."

One outcome of this project is building capacity of qualified interpreters in the Marshallese community, so five experienced Marshallese Interpreters served as both co-trainers and mentors to the other newer interpreters. As a culmination to the project year, both an MICI Interpreter Mentorship event and a Network event (that included a total of 27 Disability Service providers and Marshallese Interpreters) were held in June and included a presentation on Autism Spectrum Disorders and the Arkansas Autism Resource & Outreach Center.

### **Positive Behavioral Supports Training Project**

Partners for Inclusive Communities (Partners) reinitiated the Positive Behavior Supports (PBS) Training in the Spring of 2022. This program has provided training for ID/DD provider agencies throughout the state of Arkansas. Agencies select staff to attend the trainings based on the need of their agency and the individuals they support. Prior to reinitiating the training program, Partners had provided the training state-wide. The training had provided ID/DD agency staff with a certification in Positive Behavior Supports plan development which qualified them to develop plans for individuals served in the HCBS waiver program. After a brief period when trainings were unavailable in Arkansas, multiple provider agencies requested that the training program be reinitiated.

Earlier this year, the PBS training series was offered to a group of ID/DD provider agencies. The trainees were introduced to Positive Behavior Supports as an assessment based, proactive and comprehensive support for individuals that is person-centered. The support is based on relationships and positive interactions. Trainees were taught to complete functional behavior assessments, collect necessary data, analyze data to determine the function of the targeted behavior, and develop strategies to address that function for the individual. Individuals are supported based on the function of the identified behavior. These supports are developed to address the unmet needs of the individual, while enhancing the individual's quality of life and environment.

Trainees develop a Positive Behavior Support plan throughout the training series. At the completion of the series, the trainees are assessed using two tools. The first is a written exam

that tests their knowledge and understanding of the philosophy of the PBS process, information related to data collection and the function of behaviors, and lifestyle interventions. Following successful completion of the training series and exam, the trainees are expected to complete a high-quality PBS plan and submit it for review by the trainers. The plans are evaluated based on a rubric that was developed to identify critical features. After successfully completing both the exam and submission of the high-quality plan, the trainees will receive certification as a Positive Behavior Supports Specialist.

All trainees in the 2022 cohort past the written exam and are currently in the process of submitting their required PBS plans. After each training session, the trainees were surveyed to obtain feedback so that their learning needs could be met. The trainees left the following comments in their surveys:

- It is so inclusive and everyone is involved in the training. Best I have ever been to. Very impressed!
- Renee and Karan have done a phenomenal job training/teaching me in building the foundation of a PBS. I didn't know what I was doing until this training!
- Wonderful training. 10/10
- Thank you for teaching this important subject, and in a way that is engaging, fun, and educational.
- The space for discussion in the trainings is so important, and helps us gain a deeper understanding of a new concept or subject. Thank you for allowing space for this during the training.
- AMAZING training! I would recommend anyone in social work to attend this training it is a lot of information but I was able to understand all of it by the inclusive, interactive, and hands on communication.

A second Positive Behavior Supports Training is planned for the late summer. That training is currently being filled by agencies who had requested this training for their staff. Partners currently has a waiting list of agencies who would like to participate in the training.

## **Project LENS**

Project LENS is Leading the Evolution toward New Solutions by promoting new perspectives on disability, access and design. We partner with faculty, staff and students in postsecondary programs within Arkansas and beyond to remove barriers and create more inclusive environments. This project is currently funded solely by foundation donations.

The *Refocus 2.0: A disability resource professional's toolkit* has been updated and maintained and has received over 12,000 visits. The site can be viewed at: <https://www.exploreaccess.org/refocus2/>. Additionally, a conference presentation was provided on Disability and Language to 36 trainees at the ArkaHEAD Spring Conference.

## **Roadmap Initiative: Enhancing Supports for Older Arkansans who are Victims of Abuse and Financial Exploitation**

The major purpose of the Arkansas Roadmap Initiative: Enhancing Supports for Older Arkansans who are Victims of Abuse and Financial Exploitation is to improve the infrastructure in Arkansas so that improved services are provided to individuals over the age of 60 who are victims of abuse or financial exploitation. Three strategies provide the foundation of this

initiative. They include improving collaboration between victim service providers and programs that serve older Arkansans by creating and sustaining a Multidisciplinary Leadership Team; providing direct services and infusing information across agencies involved in service provision to ensure they are trauma-informed, victim-centered, culturally responsive and fully accessible; and improving access to information on abuse and exploitation for victim service providers, programs that serve older Arkansans, and older people themselves.

In addition to a series of listening sessions with professionals during the year, efforts were expanded to include a listening session with older individuals. This was in partnership with the UAMS Schmieding Center for Senior Health and Education and was conducted to gather information about the best avenues to provide information to older Arkansans. The resulting information is being used as a continuous feedback loop to inform the activities of the grant. To reach more people directly, a partnership has been established with AARP to create a series of additional listening sessions to develop a feedback loop to ensure ongoing information from older individuals regarding their needs.

In addition to other trainings, two Roadmap initiative trainings were held targeting specific needs. These were “Best Practices for Serving Older Victims: The Aging LGBTQ + Community” and “PACE – A Program of All-Inclusive Care for Older Adults”.

The Roadmap Leadership Team continues to meet quarterly and has been engaged in providing feedback to staff. A new Leadership Team member representing brain injury was invited and accepted a position on the team. Staff have established a working relationship with S.A.L.T (Seniors and Law Enforcement Together) in Northwest Arkansas. The focus is to reduce criminal victimization of elderly residents through the provision of information. Additional outreach connections were made with Care Patrol, Northwest Arkansas Health Care Alliance group, We Are Trailblazers, Encompass Rehabilitation Hospital (Stroke Education) Ozark Regional Transit Authority, Community Health Centers Education Coordinator and the League of Women Voters.

The Roadmap Initiative has established a very close relationship with the Schmieding Center for Senior Health and Education. This group is also part of the State Level Leadership and has worked closely in guiding activities of the project. Schmieding staff attended a previous training about hearing loss and the related challenges for older individuals. Specific strategies were provided, including how to introduce assistive listening technology into the conversation. Schmieding Center staff were impacted by the information shared and purchased assistive listening technology to have available for their clients. They now routinely incorporate this as an option, if appropriate, into their work with their clients.

### **Safety and Sexual Violence Project**

The overall goal of this project is to promote efforts that help prevent the critical problem of rape and sexual assault among people with disabilities. The focus is to prevent the initial occurrence of violence; and to educate on factors that put people with disabilities at risk by providing information related to healthy relationships/boundaries etc. This includes staff in programs that work with people with disabilities, family members, and people with disabilities (self-advocates). The Safety and Sexual Violence Prevention Project is funded by the Arkansas Commission on Child Abuse, Rape and Domestic Violence. It works in conjunction with several other Commission funded projects, providers of services to people with disabilities, and self-advocates. Information for people with disabilities is typically provided through multi-session

workshops and includes such topics as: power dynamics in relationships, understanding and developing boundaries, privacy awareness, safety and recognizing abuse.

The pandemic wreaked havoc on the lives of people with intellectual and developmental disabilities, their families and the people who serve them. Support for people with developmental and intellectual disabilities occurred through an effort that was initiated when the pandemic began which was entitled the HOG CALL (since the primary college football team in the state are the Arkansas Razorbacks, fondly called the Hogs). This became the main avenue to advertise and offer support for people who were staying at home and missing their employment or services during the day. We adapted the prevention curriculum *Get Respect, Give Respect* to be presented through zoom both while people were at home and when they returned to the center with precautions. This proved difficult mostly due to the set up for people with disabilities at some facilities with one computer and a group, staff on site engaging or repeating the training information and sometimes even changing the message we were trying to present. We moved from this back to focusing on educating the staff working with people with disabilities in hopes that we could get them to understand the need for the prevention education and how people with disabilities should be treated as adults with power over their own bodies and lives. The issues that occurred doing training over zoom showed that staff still needed to know how to be supportive rather than directive.

We focused on information regarding ableism and ally ship as defined by Lydia X. Z. Brown, Disability Rights Activist. "Ableism is not a list of bad words. Language is \*one\* tool of an oppressive system. Being aware of language -- for those of us who have the privilege of being able to change our language -- can help us understand how pervasive ableism is. Ableism is systematic, institutional devaluing of bodies and minds deemed deviant, abnormal, defective, subhuman, less than. Ableism is \*violence.\*". Creating allies and people understanding the effect of ableism will aid in decreasing the violence towards people with disabilities. We continue to address the subtle and not so subtle ableism that exists in the programs and in society. Educational efforts continue for staff, people with disabilities and families on zoom due to the ongoing issues with the virus mutating and our programs precautions. The move to zoom covered both issues related to safety and violence prevention as well as intervention through another project effort. This was combined primarily due to the isolation that many people were experiencing and our concerns for having information ready and available for a multitude of questions that were inevitably addressed and possibly needed by those attending.

Staff participated on the Board of the Northwest Arkansas Center for Sexual Assault, National Parent Empowerment Project Advisory Board, and the Crystal Bridges Community Access Committee. These efforts work on multiple levels to provide education about preventing violence against people with disabilities and intervention strategies through another project as well as addressing ableism and its effects.

Many new resources were created and disseminated in both paper and electronic form including: Ableism postcards, How to be an Ally booklets, Consent Posters, Support the Movement posters, Healthy Relationship posters, and Rights and Responsibilities posters.

The following are some of the training responses received from provider staff that show the success of the program and its impact.

"Not take power over our clients. "

"I will not use my power in my center."

"Ensure the individuals I work with have a voice and it is heard."

"Adjust wording I use and be more knowledgeable regarding persons with disabilities"



“Be more mindful of accepting as valid what is conveyed by both verbal and non-verbal communications by the disabled.”

### **Southwest ADA Center – Arkansas Affiliate**

The Southwest ADA Center Regional Affiliate — Arkansas is one of a five-state collaboration funded through the Southwest ADA Center, a program of the Independent Living Resource Utilization (ILRU) in Houston, Texas, and serves Region VI within the ADA National Network. As a regional affiliate, the project focuses on increasing the capacity of Arkansas agencies — higher education institutions, criminal justice system agencies, and others — to improve access for people with disabilities. A leadership consortium, established by the project, will develop community leaders knowledgeable of the Americans with Disabilities Act (ADA) who will serve as resources and trainers across the state. Project staff are available to provide training and technical assistance on topics related to the ADA — physical access, programmatic access and digital access. Through this project, project staff have established a website, [exploreaccess.org](http://exploreaccess.org), where we provide a variety of resources related to access.

Project staff provided technical assistance to a variety of organizations on topics related to the ADA, including facility access, assistive listening devices, documentation of disability, service animals, ESAs, interactive process, effective communication, digital access, and policy modification. This technical assistance reached over 100 people in a variety of organizations. Project staff also provided 15 online and in-person trainings to a total of 990 people. Topics of training provided through this project included: Seeing Disability Through a New Lens, Designing Accessible Online Courses, Social Media Accessibility, Effective Communication, ADA in the Classroom, Documentation Guidelines in Higher Education, Social Justice Approaches to Disability Access in Higher Education, Ten Steps Toward Accessible Programming, and Accessible Video Conferencing. Funding support will continue for another 5-year cycle.

### **Teaming for Early Childhood Inclusion (TECI)**

The TECI Project is designed to improve the capacity of early care and education providers to include children with disabilities in their programs, rather than refer them to segregated, specialized programs for children with disabilities. During this third program year, the following trainings were provided to Arkansas Child Care Aware directors and staff.

- Use of Sensory Toys, Materials & Resources
- Using the Sensory Profile 2 to Document Sensory Processing Patterns of Young Children
- Arkansas Autism Partnership: Eligibility & Outcomes for Children
- My New School: Transitioning to Kindergarten
- Arkansas ABLE & Other Resources for Families of Children with Disabilities
- How to Be an Ally for Children with Disabilities

During the same year, a three-session mini-series training was provided twice to Family Child Care Home directors and staff.

- Partnering with Parents of Children with ASD: From Diagnosis & Beyond
- Understanding & Supporting Children with Autism Spectrum Disorders
- Arkansas Autism Partnership Program

Sensory toys and materials were delivered to the eleven family childcare homes throughout Arkansas who completed the three-session mini-series training on autism spectrum disorders. Time was spent visiting with directors and staff, as well as the children in care.

The first in a series of monthly zoom meetings for family childcare homes serving children with disabilities was implemented. This time is for networking, consultation, technical assistance and training for directors and staff and will continue for the next several months.

Participation by TECI staff in the Arkansas Family Child Care Association Annual Conference, which included a presentation on “Traumatic Times: How to Support Children” as well as our exhibit allowed the opportunity for dialogue with family childcare home directors and staff on how best to support children with disabilities and their families. Several attendees expressed an interest in participating in the mini-series training on autism spectrum disorders that was offered to family childcare homes during the past program year. Additional trainings will be scheduled.

Collaboration with Child Care Aware of North Central Arkansas and the Arkansas Public Broadcasting System resulted in the development of training on Sensory Processing that was filmed by Arkansas PBS and is available for early childhood educators throughout the state. Two modules were developed with the first explaining sensory processing and its impact on the learning and behavior of young children and the second showing and demonstrating numerous toys and materials that can be used to provide sensory stimulation. Early childhood educators completing both modules will receive professional development credit at no cost to the individual or to the early childhood/childcare program.

Staff development training was provided to the University of Arkansas for Medical Sciences Regional Program located in the Delta on the science of inclusion, stressing the importance of serving children in integrated early childhood systems.

### **Welcome the Children (WTC)**

The overall goal of Welcome the Children (WTC) is *to provide early childhood professionals with quality training, coaching and resources for supportive approaches to cultural diversity, inclusion and communication*. During FY22, Welcome the Children staff continued partnering with two early childhood programs that have classrooms funded through state Arkansas Better Chance for School Success (ABC) and through private pay/federal Child Care Development Funds (CCDF). Both programs have already achieved Arkansas Better Beginnings Level 3 Quality Rating Improvement System (QRIS) but want to become models of inclusive practice. Staff conducted on-site observations and technical assistance (within COVID protocols) and provided classroom supports to help teaching staff implement specific strategies.

Welcome the Children staff collaborated with other providers and conducted training both virtually and in-person. Training evaluations using a retrospective pre/post analysis, indicated overall improvement in participant content knowledge, abilities and their comfort levels in working with children with disabilities and who are dual language learners.

### **GOAL 3: Partners will add to the knowledge base for improving the lives of persons with autism and others developmental disabilities by conducting research and publishing the findings.**

There were 24 publications during this year across the UCEDD and LEND faculty and 7 additional ones in press. All of these are listed in NIRS. A collaborative effort between UCEDD staff, faculty in the Special Education Department of the University of Arkansas, faculty in the

Department of Educational Statistics and Research Methods at the University of Arkansas, and faculty in the Department of Communicative Disorders at the University of Central Arkansas resulted in one publication presenting outcome data from the autism waiver program. It can be found in the Journal of Autism and Developmental Disabilities. This link will connect to the article <https://link.springer.com/article/10.1007/s10803-021-05376-z>. There are two additional manuscripts in process resulting from this collaborative effort.

**GOAL 4: Partners will add to the knowledge-base of state providers concerning autism and other developmental disabilities by disseminating information about research findings and established evidence-based practices.**

Partners continues to disseminate information related to the programmatic activities of each of its funded projects. During this year, materials continued to be disseminated to address the COVID 19 pandemic. These included plain language print documents to explain the virus, reasons for the use of PPE, and information on how to use an iPad, conduct online shopping, use Zoom and other platforms for connecting to support groups, telehealth appointments, etc. This information was likely more important to individuals with disabilities and their families than information specific to research findings, while this information was the result of soft research. As part of Partners' COVID19 grant activities, surveys were conducted through a large network of statewide providers to identify their priority needs during the pandemic.

Partners' website (UofAPartners.uark.edu) includes information about the Center, its' faculty and staff, the mission and vision, and each individual project. Each specific project then has its' own page with more detailed information, including services available and contact information. A particular focus as these pages are developed and expanded is the accessibility of the information provided, with Partners desire to model full accessibility in all activities of the Center. One of the Partners' staff has a significant interest and expertise in accessibility. She created a website, [exploreaccess.org](http://exploreaccess.org), to offer expertise to others who want their offerings to be accessible. These accessibility modules have continued to be quite popular since most systems continue to operate in either a virtual or hybrid format. Participants in the training sessions presented by this Partners' staff member were attended by people from all across the country, reflecting the need for this information. Partners' social media footprint is expanding as well. The Facebook page (<https://www.facebook.com/UofAPartners/>) has acquired 1245 likes during this year with a post reach of 12,153. The Twitter account (<https://twitter.com/UofAPartners>) had 346 followers and tis tweets earned 9,900 impressions. A new LinkedIn page has been added that currently has 149 followers. Plans are underway for each project page to be in plain language format to increase the accessibility of all information shared, including research findings.

**GOAL 5: Partner will increase community integration for persons with disabilities by promoting the development of an advocacy network of self-advocates and family members.**

The Arkansas DD Network (UCEDD, P&A and DDC) continue to work on a collaborative project to build self-advocacy in the state. The existing project called Self-Advocate Network Development (SAND) has been added as one component of a broad approach toward self-advocacy development. An umbrella organization, the Arkansas Alliance for Disability Advocacy (AADA), was formed this year as a 501(c)3 corporation separate from any provider agency, to avoid any conflict of interest in mission. The AADA submitted a grant proposal to the Governor's Developmental Disabilities Council (GDDC) and was funded for a

three-pronged approach to building advocacy. The three prongs include Self-Advocacy Network Development (SAND), Partners in Policymaking, and Community of Champions (CoC). SAND provides advocacy training and leadership development to people with disabilities across Arkansas. Partners in Policymaking utilizes a national curriculum to educate participants on effective ways to develop relationships with elected officials to directly influence public policy impacting people with disabilities. Community of Champions is a grassroots effort to build a network of advocates and allies to ensure that the needs of people with intellectual and developmental disabilities are met. CoC focuses on high school students, both with and without disabilities, parents, community members and legislative leaders on the need for disability advocacy and how to be active in advocacy activities. This three-tiered system for developing and building skills of self-advocates will begin with high school students (COC), move to the support and mentorship of adults (SAND), and culminate with high level leadership training (LEND). AADA is co-located with Disability Rights Arkansas and is supported by the entire DD Network.