Public Forum on ADAP's PAIMI Program
Wednesday, July 30, 2008
2:00 PM to 3:00 PM

Birmingham Civil Rights Institute
520 Sixteenth Street North
Birmingham, Alabama 35203

Through its PAIMI program, ADAP provides advocacy services to eligible persons with mental illness.

In conjunction with a monitoring visit by ADAP's federal PAIMI partner, the Substance Abuse and Mental Health Services Administration (SAMHSA), ADAP is holding a public comment forum.

Members of the public are invited to this forum to share their thoughts on ADAP's advocacy work on behalf of persons with mental illness with SAMHSA representatives. Individuals wanting to attend this forum who need accommodations due to disability should contact Vicki Hubbard by email at vhubbard@adap.ua.edu or by phone at 1-800-826-1675 by Monday, July 21.

If you cannot attend this forum but would like to share your views about ADAP's advocacy on behalf of persons with mental illness, you can provide anonymous comments via phone, letter, or through ADAP's website.

To provide comments by phone, call 1-800-826-1675. To provide comments by letter, write ADAP/PAIMI Comments at Box 870395, University of Alabama, Tuscaloosa, AL 35487. To provide comments via ADAP's website log on at www.adap.net.

Questions? Contact Vicki Hubbard by email at vhubbard@adap.ua.edu or by phone at 1-800-826-1675.

Included We Stand:
Alabama Developmental Disabilities Network Conference
Thursday – Friday, August 21-22, 2008
Registration starts Aug. 21 at 7:30am, Conference begins at 9:00am
Bryant Conference Center, 240 Bryant Drive, Tuscaloosa, AL 35487

ADAP, the Alabama Council for Developmental Disabilities and the Civilian Center at the University of Alabama in Birmingham make up Alabama’s Developmental Disabilities (DD) Network.

The goal of this first-ever conference for Alabama’s DD Network is to share information that encourages the inclusion of persons with developmental disabilities in their communities.

The conference will feature disability activists Dale DiLeo, Al Condeluci and Clay Dyer. Breakout sessions will focus on health care systems, case management, juvenile justice, housing, voting, disaster preparedness, employment, special education, transportation, and more.

For more information about the program, sponsorship opportunities or exhibit participation, call Amanda Al-Betar at (205) 348-9966 or Penny Williamson at (205) 348-3014; Fax requests to their attention at (205) 348-9276; or email pwilliamson@ccs.ua.edu.

ADAP to Receive National Awards

ADAP received two awards recognizing its work on behalf of people with disabilities at this year’s Annual Meeting of the National Disability Rights Network in New Orleans.

First, the agency received an award for its work with Hurricane Katrina survivors. Through the Katrina Aid Today (KAT) project, ADAP provided services to over 500 individuals. Senior Attorney Patrick Hackney accepted this award on the agency's behalf.

ADAP also received a special award for long-term advocacy commitment to improving the lives of children in foster care as part of the R.C. v. Waller lawsuit. James Tucker, ADAP's Associate Director, accepted this award at the plenary session of the Annual Meeting. Only one other state, California, received this special recognition for outstanding advocacy.

Bryce Hospital Services and Land Sale

By James Tucker, ADAP Associate Director

When Alabama’s Department of Mental Health (DMH) announced in December 2007 it was considering the sale of historic Bryce Hospital to the University of Alabama, observers reacted in different ways. Some families and advocates believe Bryce should continue to serve consumers as it does now. Some consumers believe the sooner Bryce closes, the better. And some preservationists believe, whatever happens, Bryce should be saved and turned into a museum.

Since ADAP learned of the pending sale of Bryce we have advocated that, if Bryce is preserved in any form, it must be smaller. Tens of millions of dollars spent annually to prop up Bryce need to be invested differently. DMH and community mental health centers must change the way they provide services to persons at risk of mental illness.

The road to recovery is a challenging experience for most individuals. Mr. C is a 25 year old who has successfully traveled the road to recovery. His journey included 3 admissions to Bryce Hospital and several admissions to the psychiatric unit of local hospitals. Mr. C’s first admission to Bryce was in 1997. He was admitted to the Adolescent Unit at age 15. He was there for a period of three years before being transferred to the Behavior Rehabilitation Unit (BRU). While on the Adolescent Unit, Mr. C attended treatment and GED classes and subsequently obtained his GED in 2000. During the ceremony, Mr. C received an award for the most persistent student. He was transferred to BRU upon his 19th birthday and remained on the unit for approximately six months before being discharged home with his mother. He received mental health services through Eastside MHC during this time.

Mr. C acknowledges that he was faced with obstacles and set backs during his journey. He spent 4 years at Bryce during his second admission. He was discharged to the Indian Rivers Step Up Residential Program (SURP). He was at SURP for approximately five months before returning home with his mother. The third admission lasted two and one half years. During this time Mr. C was very active in his treatment and was his own best advocate regarding his treatment and care.

Mr. C was discharged to Indian Rivers SURP in Moundville on January 3, 2008. He lived a SURP for four months before moving into semi independent housing. Mr. C moved into an apartment on May 5, 2008 and is currently receiving services through Indian Rivers MHC. He is very proud of his apartment, newly acclaimed responsibilities, and FREEDOM. He is his own representative payee and is responsible for budgeting and making sure his bills are paid. Mr. C attends day treatment classes on site which includes: medication management, team solutions, money management, coping skills, social skills, library skills, healthy lifestyles, and safety making decision.

Mr. C admits he has learned a lot during his journey. He enjoys writing stories and would like to one day become an author and publisher for children stories. Mr. C loves animals, crocheting, and spending time with his girlfriend.

His advice to individuals who are currently traveling the road to recovery is to follow their treatment plan, take their medication as prescribed and never give up!
Appellate Court ends long running R.C. case
By Barbara Lawrence, Senior Staff Attorney

Twenty years of class action litigation on behalf of the children and families served by the Alabama Department of Human Resources Child Welfare Division (DHR) came to an end on April 29, 2008. The 11th Circuit Court of Appeals upheld the U.S. Middle District of Alabama’s 2007 decision to terminate the R.C. Consent Decree stating, “We are mindful that ‘federal courts should not be in the business of running important functions of state government for decades at a time.’” Plaintiffs’ attorneys, respectful of the court’s rulings, have determined not to pursue a full review of the 11th Circuit Court of Appeals decision.

R.C. was Wallyed in 1988 to reform the child welfare system in the state of Alabama. In many important respects, the system has been reformed. Improvements have been made by DHR in several areas including child safety, permanency, child and family centered practice, the use of individualized service plans for children and families, funding for child welfare services, and caseloads of child welfare staff. Child welfare practice principles, as set out in the R.C. Consent Decree, have been promulgated by state code, policy, and rule.

With this recent ruling, the court has determined that DHR can sustain the gains it has made in child welfare practice. Though ADAP’s role as Plaintiffs’ attorneys in the R.C. case has come to a close, we will continue to advocate for the rights of children with disabilities in Alabama according to our congressional mandates.

As we mark the end of litigation in R.C. v. Wally, let us honor the children on whose behalf this work was done.

The following letter was written by a girl named Shirley who lived in Children’s Harbor, a campus of group homes. She asked the agency’s director to send her story to the judge to be read at the September 1991 fairness hearing held in R.C.

Shirley was Wallyed when she was about 10 or 11 until the day I left. I was whipped with just about anything. I was whipped with a bullwhip, switches off of plum trees, a extension cord.

I was locked out of the house one night and I stayed out until that morning.

My foster parents had a farm and they would keep us up on a leash so we couldn’t do some of the work like chopping around care and getting it ready to make syrup.

I was little, about from 9 to 11, I use to get tied in a chair so I can take my whipping because I always would run. She whipped my sister on the tongue, because she brought in a little switch to get a whipping with.

My foster parent would slap me. She slapped me one day because she thought I had lied on her husband. I wished I could have stayed with my parents instead of being in a foster home. I was abused in my foster home by my foster father. It started when I was about 10 or 11 until the day I left. I think I was with my parents none of this would have happened. Me, my sister and brother could have been together with a mother and father like all the normal kids. My father has died and I did not get a chance to tell him that I love him and that I forgive him for not having his children, and that I still think he was a great dad. While I was in my foster home I didn’t get to see him and my mother much. I don’t like being in different homes and foster home. I would like to be with my mother. I don’t want her to die without being able to live with her and to get to know her more, and to catch up on the times that we missed as a mother and daughter.

I don’t think from what I hear that I needed to be in a foster home. D.H.R. could have gave my mother and father a chance before they took us away. My sister and brother want [to] stand and say what happen and I think it’s wrong, what happened in that foster home. I have flashbacks and it bothers me to talk about, it bothers me at night when I need to go to sleep. I can’t go to sleep at night and then I get tired and can’t do my work in school. I think about what happen a lot and I know I never said that I want this to happen to me and I never ask that it would.

All I really want now is to be saved, ask God to take control of my life and to help me know that one day I won’t be having these dreams. Then I hope to live with my mother. I think she has done better. I don’t really like it here. I just want to be with my mother and if I can’t I would at least like to live near her. I want to get to know my family more than I do. While I’m in and out of places it is harder for me to see my mother. I had a hard life but somewhere along the road God is going to really help me.

Love,
Someone Special.

Reprinted from “Making Child Welfare Work” Bazelon Center for Mental Health Law

ADAP’s Work on Behalf of Youth in Custody of the Department of Youth Services
by Pedra Mixson, Staff Attorney
Chinny Johnson, Case Advocate

Over 3,000 of Alabama’s youth are in the custody of the Alabama Department of Youth Services. (DYS). Many of these youth have disabilities that may impact their learning, treatment and placement needs. For example, though many of these youth received special education services at their home school, many enter and remain in the DYS system without being identified for or receiving special education services.

DYS’s federal enabling statutes authorize DYS access to DYS managed and contracted facilities including Mt. Meigs, Vacca and Chalkville, to ensure that the rights of youth with disabilities are protected. ADAP conducts on-site monitoring visits to juvenile justice facilities to inform youth about ADAP’s services and to ensure that youth with disabilities receive appropriate services and are free from abuse and neglect. ADAP representatives speak with hundreds of youth each year and, when appropriate, investigate allegations of abuse and neglect. When ADAP’s investigation leads it to believe that a youth with disabilities rights and/or needs are unmet, ADAP engages in intensive follow up with DYS officials to ensure that appropriate and individualized services are provided. In addition, ADAP represents youth to ensure that youth are identified and evaluated for special education services in a timely manner.

DYS denied ADAP full access to its client, her records, DYS staff and other residents in 2005 for the purpose of investigating allegations of physical abuse. ADAP filed a complaint in the U.S. Middle District Court, and the parties were ordered to mediation. ADAP obtained access, and the case was voluntarily dismissed on May 2, 2006. Since the dismissal of the 2005 complaint, DYS has engaged in a pattern and practice of refusing to provide ADAP with full access to facilities and programs in the State that render care or treatment to individuals with disabilities, including investigation of abuse and neglect. As a result, ADAP filed suit in the U.S. Middle District Court on May 16, 2007 requesting an injunction and declaratory relief against DYS for denying ADAP full access to facilities, and hindering ADAP investigations. ADAP was prevented from speaking privately with residents and distributing ADAP contact information. Through court-ordered mediation, ADAP and DYS settled the case by developing a protocol that governs ADAP’s access to DYS facilities, youth, and records, and ADAP was awarded attorney’s fees.

Bryce Hospital Services and Land Sale (continued from Page 1)

Bryce Hospital Services and Land Sale (continued from Page 1)

Bryce Hospital Services and Land Sale (continued from Page 1)

Commitment to places like Bryce. Resources historically devoted to maintaining institutional anachronisms like Bryce must be reinvested in community-based mental health care including acute and crisis services, in-home services, and consumer directed services. Consumers must have more say over services.

Since January, ADAP has worked with the DMH System Reconfiguration Task Force to develop a vision for publicly delivered mental health services that will serve Alabamians for coming decades. ADAP urged that consumers must be served in the least restrictive places possible. ADAP has advocated for the needs of consumers through committees that addressed the needs of youth and adolescents, seniors, and patients who receive acute, long-term and forensic services.

Now, DMH Commissioner Houston has received initial recommendations of the Task Force. A team of national experts provided feedback to the Commissioner, he will make a recommendation to the Governor.

Positively Empowered
A legal guide for HIV-positive consumers and service providers

Since the inception of the Aiding Alabama project, ADAP has assisted over 250 people living with HIV/AIDS. As part of this ongoing initiative, we are excited to announce Positively Empowered, a comprehensive legal guide for HIV-positive consumers and service providers. This legal guide provides helpful information on public benefits, employment, privacy and confidentiality, planning for the future, financial exploitation, insurance and housing. Thanks to generous support from the Alabama Civil Justice Foundation and the private bar, Positively Empowered will be printed and distributed throughout the entire state.

Who was R.C.?
After his parents divorced, 8-year-old “R.C.” was taken into the state’s custody. He was sent to a series of psychiatric institutions, even though he was not diagnosed with any serious emotional problems. He spent much of his time in locked isolation rooms, heavily drugged. R.C.’s father protested this treatment and was promptly barred from visiting his son. A year and a half later, after a lawsuit was filed on R.C.’s behalf, the state’s child welfare agency returned R.C., offering no assistance to either the boy or his father.

‘Making Child Welfare Work’ Bazelon Center for Mental Health Law

Commitment to places like Bryce. Resources historically devoted to maintaining institutional anachronisms like Bryce must be reinvested in community-based mental health care including acute and crisis services, in-home services, and consumer directed services. Consumers must have more say over services.

Since January, ADAP has worked with the DMH System Reconfiguration Task Force to develop a vision for publicly delivered mental health services that will serve Alabamians for coming decades. ADAP urged that consumers must be served in the least restrictive places possible. ADAP has advocated for the needs of consumers through committees that addressed the needs of youth and adolescents, seniors, and patients who receive acute, long-term and forensic services.

Now, DMH Commissioner Houston has received initial recommendations of the Task Force. A team of national experts provided feedback to the Commissioner, he will make a recommendation to the Governor.

Positively Empowered
A legal guide for HIV-positive consumers and service providers

Since the inception of the Aiding Alabama project, ADAP has assisted over 250 people living with HIV/AIDS. As part of this ongoing initiative, we are excited to announce Positively Empowered, a comprehensive legal guide for HIV-positive consumers and service providers. This legal guide provides helpful information on public benefits, employment, privacy and confidentiality, planning for the future, financial exploitation, insurance and housing. Thanks to generous support from the Alabama Civil Justice Foundation and the private bar, Positively Empowered will be printed and distributed throughout the entire state.

Who was R.C.?
After his parents divorced, 8-year-old “R.C.” was taken into the state’s custody. He was sent to a series of psychiatric institutions, even though he was not diagnosed with any serious emotional problems. He spent much of his time in locked isolation rooms, heavily drugged. R.C.’s father protested this treatment and was promptly barred from visiting his son. A year and a half later, after a lawsuit was filed on R.C.’s behalf, the state’s child welfare agency returned R.C., offering no assistance to either the boy or his father.

‘Making Child Welfare Work’ Bazelon Center for Mental Health Law

Commitment to places like Bryce. Resources historically devoted to maintaining institutional anachronisms like Bryce must be reinvested in community-based mental health care including acute and crisis services, in-home services, and consumer directed services. Consumers must have more say over services.

Since January, ADAP has worked with the DMH System Reconfiguration Task Force to develop a vision for publicly delivered mental health services that will serve Alabamians for coming decades. ADAP urged that consumers must be served in the least restrictive places possible. ADAP has advocated for the needs of consumers through committees that addressed the needs of youth and adolescents, seniors, and patients who receive acute, long-term and forensic services.

Now, DMH Commissioner Houston has received initial recommendations of the Task Force. A team of national experts provided feedback to the Commissioner, he will make a recommendation to the Governor.
Self-Employment through the Implementation of Social Security Work Incentives

Self-employment is viable work outcome in rural communities. Partnerships, ownership of business resources, and knowledge about disabilities so that this information can help transform and increase economic development of their communities.

Entrepreneurs with disabilities can make significant financial and social contributions to the health and well-being of their rural communities. Many can access funds through Social Security Work Incentives to start small businesses or invest in established enterprises. A Government Accounting Office (GAO) report showed that of 10,000 Plan for Achieving Self Support (PASS) plans in operation, over a third had set aside funds for self-employment.

PASS allows a person with a disability to set aside countable income and resources for a specific period of time to realize a work goal. Any person who receives SSI benefits, or receives SSDI or other unearned income and could qualify for SSI, can have a plan. There is no limit to the number of successful PASS plans a person may have in a lifetime. Participants have purchased real estate, business equipment, tools, computers, vehicles, clothing, livestock, and other goods and services that would help them work and contribute to their communities. If the PASS funding also allowed leveraging of other resources (such as loans from banks, credit unions, or the Small Business Administration), the businesses had a great probability of success.

Anyone (e.g., vocational counselors, social workers, case managers, Employment Networks, employment specialists, or employers) may help a person with the plan. VR Counselors are especially good candidates since their involvement in the applicant’s PASS indicates feasibility, oversight, and the blending of public resources, which SSA encourages. SSA expects that by using a PASS, a person will decrease his/her reliance on benefits or cease to be eligible at all. VR can also pay for a PASS writer to write a PASS for someone. Free help is available from Work Incentive Planning and Assistance (WIPA) programs.

This article and others related to Social Security Work Incentives can be found at the website of the HEALTH Resource Center of The George Washington University, Graduate School of Education and Human Development. See: http://www.health.gwu.edu/ Contact ADAP for information regarding the WIPA in your area.

The ADA and Child Care centers

by Lorrie Williams, Staff Attorney

It is often difficult for working parents of children with disabilities to obtain child care services. Here are some quick facts about the Americans with Disabilities Act (ADA) and how it applies to child care services.

The ADA applies to all child care centers Regardless of size or ownership, except child care centers controlled by a religious entity. If the child care center is merely on the premises of a religious entity and not controlled by them, the ADA still applies.

The ADA requires that child care facilities be accessible to people with disabilities. The ADA prohibits child care centers from discriminating on the basis of disability. The ADA prohibits child care centers from excluding children on the basis of disability, except in certain rare circumstances. The ADA requires that child care centers provide reasonable modifications to policies and practices to allow inclusion of a parent or child, except in certain circumstances. The ADA also requires that child care centers provide the parent or child with effective communications, up to and including auxiliary aids and services (as determined by the particular communication needed).

Under the ADA, child care centers cannot make assumptions about whether a particular child’s disabilities make them inappropriate for their program.

A Statement from the Alabama Department of Mental Health and Mental Retardation

(May 16, 2008) The Alabama Department of Mental Health and Mental Retardation has recently discovered that a group of index cards from Geil Hospital in Montgomery, Alabama that contain a limited amount of patient information is missing. Although the cards do not record health information, they contain personal information such as the person’s name, social security number and date of birth. The department’s Bureau of Special Investigations has launched an investigation regarding the matter and affected individuals are being directly notified. In a letter sent to these individuals the department encourages them to monitor their personal finance and credit information carefully and to notify the department of any irregular or suspicious activity. Commissioner John Houston of the Alabama DMH/WMR said, “If these items were stolen, this behavior was not only in violation of our policies but Federal law as well. We have zero tolerance for violation of these policies and if criminal activity has occurred we will pursue prosecution vigorously. We apologize for any anxiety this may cause to patients or their family members.”

The Department is working to help ensure that affected individuals are aware of the situation and of the steps they may take to protect themselves from misuse of their personal information. To every extent possible, individual notification letters will be sent to the affected individuals. Information will also be available on the department’s website, www.adm.alabama.gov. Additionally, the department has set up a call center that individuals may use to get information about this situation and learn more about consumer identity protections. The toll free number is 1-866-577-7299. The call center will be open beginning Monday, May 19, 2008, and will operate from 8 am to 8:00 pm Monday-Friday as long as it is needed.

Consumers who are deaf or hard of hearing may call the 800 number by either Alabama Relay (711) or video relay service (VRS) and leave a call back number for a direct callback by the means of your choice.

The department has been proactive in staff training and consumer training regarding potential identity theft. The Office of Consumer Rights and Advocacy Protection conducted trainings on ‘Identity Theft’ prevention as recently as last month at the annual consumer Recovery Conference. More than 900 people with mental illnesses attended the conference and had the opportunity to receive the training. “We take issues surrounding the rights and privacy of the people we serve very seriously,” said Commissioner Houston. “So far there is no indication that illegal activity has occurred through the use of personal information contained on the missing group of cards. The department will continue the investigation and is reviewing internal procedures to assure every possible measure is in place to prevent any unauthorized disclosures of personal information.”

Alabama Ultimate Access

by Angie Allen, Case Advocate

Alabamians with all types of disabilities are invited to participate in a new initiative called Alabama Ultimate Access Parks.

A joint effort of the Governor’s Office on Disability, the Alabama Department of Transportation, the Alabama Department of Economic and Consumer Affairs, the Department of Conservation, and the Department of Senior Services, the project seeks to ensure that all Alabamians have an opportunity to enjoy the outdoor splendors found in our state parks.

The initial meeting of Alabama Ultimate Access Parks was held at Camp ASCCA in Jackson’s Gap so everyone could see all the ways in which outdoor recreational features have been made accessible. It was a relaxed and fun way to hear persons with disabilities and their families share their experiences with accessing the state parks.

Please get involved in this exciting new endeavor. Share your experiences and knowledge about disabilities so that this information can help transform and increase access in the state parks.

For more information about Alabama Ultimate Access and to learn about future meeting dates, call or email Alison Blanton at Alison.Blonton@adexa.alabama.gov or at 334-300-2036.

ADAP case advocate Angie Allen serves as a committee member of Alabama Ultimate Access Parks. Angie can be reached at ADAP at 1-800-826-1675 in-state, 205-348-4928 or via email at adap@adap.ua.edu.

If you want to use a state park but cannot because it’s inaccessible or if you have ideas about state park accessibility improvements, please contact Angie with your concerns or ideas.
Northside High School Andrew Buck Bowman Scholarship

When Brian and Ellen Bowman welcomed their brand new baby boy, Andrew Buck Bowman, into the world in 1996, little did they know he would lead them on the adventure of their lives. As Andrew grew and developed, his parents began to realize that he was falling behind in meeting some of his developmental milestones. When Andrew was 14 months old, after many doctor visits and consultations, he was diagnosed with mucopolysaccharidosis III-A (MPS-III-A). This is a life-threatening disease that causes various dysfunctions to the inside of the body, primarily the cells, related to the inability to produce certain enzymes. Since that time, Andrew and his parents have learned far too much about the internal workings of hospitals, clinical trials, long distance traveling to get to medical appointments and therapies; all of which enable Andrew to live a life that is as close as possible to his typical peers.

In 2000, the Bowmans funded a $500 scholarship that is given annually to a graduating senior at Northside High School in the Tuscaloosa County School System. Northside is the high school Andrew will attend some day. There is a tri-fold purpose to this scholarship. The first is to honor Andrew’s life and the lives of other children who live with extraordinary challenges each day. Secondly, Ellen and Brian wanted to thank their community for it’s support and finally, they wanted to increase awareness of how individuals with disabilities can live and contribute within their own communities each and every day.

To be eligible for this honor, students submit an essay highlighting how the student’s life has been impacted by a person with a disability or how disability issues have shaped their view of the world. The essay has to include why the student feels he/she deserves the award. Students must also submit a biography of their accomplishments while in high school. This year’s winner is Caleb Morrison. You can read his essay below. It embodies what the Bowmans want everyone to know about how we can learn from everyone we encounter. All of my life I have been associated with individuals with various disabilities.

Bowman Scholarship Winning Essay by Caleb Landan Morrison

My mom is a special education teacher at a local county school and I have spent many afternoons in her classroom as a toddler and into my teenage years. Therefore, I believe I have a different outlook of those who have a disability because of my experiences with them rather than someone who has limited experiences with individuals with disabilities. In fact, for years I never realized the students in her classroom were any different from the other students in the school. Even though I have been around students with various disabilities all throughout my life. I have not been as impacted by them before as I have this school year. Due to scheduling, I was left with an open class between first and third block. Several of us seniors decided to ask if we could have a teacher’s assistant’s position. We were given assistance positions in the special education classroom. This has proven to be one of the highlights of my senior year. We were given the opportunity to work individually with the students in centers, read with them, play games with them and develop relationships with them. My eyes were opened in a way I could not have imagined. All these years I thought I knew a little something about individuals with disabilities.

The students in this special education class have made me aware that everyone has worth and that everyone has the potential to learn no matter what I.Q., he or she may have. I have been amazed with how much they are able to do academically. They truly want to learn all the time and are happy to complete any task they are given. These students, who I now consider to be my friends, have taught me that I should wake up to each new day with passion. They have made me realize I have taken so many things for granted for so many of my school years. The fact that they try so hard at everything they attempt, in spite of their limitations, has caused me to take a long hard look at my own attitude. I have made a conscious effort to see things from their perspective. I now realize that just because we learn in different ways does not make anyone any smarter or any better than anyone else. Being in this class has given me a better understanding of the saying that we all have talents in different areas and we use them in many different ways. I am a better person due to time I have spent with my peers with disabilities. I now have more respect and patience with people from all walks of life. As a result, I feel I will be more effective in all areas of my life.

I believe I deserve this scholarship because I have set high goals for myself and I am willing to work hard to achieve my goals in order to get my degree. I am a very diligent person with a strong work ethic and I will not give up or quit until the task at hand is complete. With this scholarship, it would help my parents out financial- ly and would be a way to reward them for raising me right and teaching me the right way to live and conduct myself. If given this scholarship, I pledge to work hard toward achieving my goals and to contribute something positive to my community.

The Alabama Disabilities Advocacy Program (ADAP) is part of the nationwide federally mandated Protection and Advocacy (P&A) system. Our mission is to provide quality, legally based advocacy services to Alabamians with disabilities in order to protect, promote and expand their rights.

THE UNIVERSITY OF ALABAMA

Alabama Disabilities Advocacy Program
Box 870395
Tuscaloosa, AL 35487-0395
(205) 348-4928 (V/TDD)
(205) 348-3909 (FAX)
1-800-826-1675 (for clients in-state only)
e-mail: adap@adap.ua.edu
web site: www.adap.net

ADAP is open Monday - Friday: 8:00am-4:45pm

We are located on the 5th floor of Martha Parham West on The University of Alabama (Tuscaloosa) campus.

ADAP Newsletter is funded 100% with federal funds through Administration on Developmental Disabilities (PADD), Center for Mental Health Services (PAMHS), Social Security Administration (PARIAB), U.S. Department of Education/Rehabilitation Services (PWR and PRAAT). Protection and Advocacy Traumatic Brain Injury (PATBI) and Protection and Advocacy for Voting Accessibility (PAVA).