

Tough times are no reason to abandon people with disabilities

Monday, May 4th, 2009

By Vicki Smith

As the relatively new director of a legal advocacy group for people with disabilities, I don't pretend to be an expert in North Carolina politics. I've been told that could take years - especially when it comes to the development of the state budget. What I do understand is political process. And I understand the role of the organization I direct, Disability Rights North Carolina (DRNC), in that process.

Our mission is to protect the rights and articulate the needs of people with disabilities. To do that according to North Carolina law, we have to be registered lobbyists. And, in a sense, we represent a "special interest." Our positions are shaped by our mandate to protect the rights of people with disabilities and to advocate for their need to receive services in a safe and therapeutic manner in environments of their choice.

Let me be clear. DRNC does not receive any state monies - not directly or indirectly. We do not benefit in any financial way from what goes into the state budget nor is our financial health harmed by what is left out of the state budget.

That said, the direction of '09 budget is alarming to DRNC. There is no question that current economic conditions require really tough decisions about how the state budgets its resources in the coming years. Difficult decisions must be made. Unfortunately, the State's loss of revenue does not mean a loss of need.

As has been well-documented in the media in recent months, the service delivery system for people with disabilities was already struggling to address critical needs. Now, those very systems are facing cuts.

People with disabilities are impacted by almost every service delivery system operated by the state - not just specialized services administered by the Division of Mental Health, Developmental Disabilities and Substance Abuse Services. They access aging services and benefit from the More at Four, pre-school program. They use transportation systems, live in their own homes and struggle to make mortgage payments (or live in publicly subsidized housing and struggle to pay rent). They need health care that may be compounded by their special needs. There is hardly a service the state provides that does not benefit people with disabilities.

Individuals who have been able to survive outside of the specialized service system will turn to it when the natural supports in their communities fail. In fact, we know that the breakdown of mainstream services and preventive programs will cause more people to go into crisis.

When the state closes programs that serve some of our neediest citizens - like the Wright and Whitaker Schools - it eliminates a visible line item in the budget. But it does not erase the state's moral obligation to protect and serve. These programs are necessary because less expensive community alternatives do not exist. Neither the children served by these schools nor their needs will simply go away - just the programs that keep them from spiraling out of control and ending up in the criminal justice system (which is, of course, also being cut).

What is needed right now from state lawmakers is a mandate (similar to that which accompanied the transfer of Dix patients to Central Regional Hospital) which requires that appropriate comparable services must be in place prior to the closure or elimination of state funded services for people with disabilities.

North Carolina's constitution requires a balanced budget. So its spending cannot be more than what is coming in (i.e., revenue). When a family has needs greater than its income, it looks both at cutting luxury spending and increasing its resources. Rarely does a family abandon its responsibility to care for family members [\[RP1\]](#) . The state needs to follow this example. The state's revenue base needs to grow in relationship to the basic needs of its vulnerable citizens.

When critical services for any population - but in particular populations who are vulnerable - are cut, the immediate dollar crisis is addressed but a larger and longer-term crisis is created. Nothing has been done to address the day-to-day challenges faced by North Carolina families to care for their sons and daughters, their brothers and sisters, their parents and grandparents. The burden has been shifted, but just for the moment. The responsibility to address the needs is not going away. The cuts today will cost more tomorrow.

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