

Approved March 4, 1986
Date

MINUTES OF THE Senate COMMITTEE ON Local Government

The meeting was called to order by Senator Don Montgomery at
Chairperson

9:00 ~~a.m.~~^{XX} p.m. on February 25, 1986 in room 531-N of the Capitol.

All members were present except: Senator Frank Gaines who was excused

Committee staff present:

Emalene Correll, Mike Heim, Theresa Kiernan

Conferees appearing before the committee:

Mike Hayden, Speaker of the House of Representatives

Joan Strickler, Kansas Advocacy and Protective Service for the Develop-
mentally Disabled, Inc.

Merilee Larson, Sheltered Living, Topeka

Sister Christella Buser, Executive Director of L'Arche in the Kansas City
Area

Sally Fahrenthold, Parent, Prairie Village, KS.

Lila Pasley, Chairperson, Legislative Affairs, The Association for
Retarded Citizens of Kansas, Inc.

Jeanette Kroemer, Parent and Co-Chairman of Group Homes, Alternatives and
Programming

Mitch Cooper, Executive Director, Topeka Resource Center for the Handi-
capped

Laura L. Moore, Project Director, Three Rivers Independent Living Resource
Center, Wamego

Paul Klotz, Community Mental Health, Topeka

H.B. 2275 - this bill was heard in committee last session and was assigned to an interim committee for study, proposal no. 46. The Interim Committee endorsed the bill with an amendment to reinsert the "mentally ill". The Committee urges the Senate Local Government Committee to amend the bill as proposed and that the bill as amended receive favorable consideration of the 1986 Legislature.

Paul Klotz supported the bill and recommended the Committee restore "mentally ill" to the bill, as the Interim Committee recommended.
(Attachment I)

Speaker Hayden would like to see "mentally ill" reinserted in the bill and have the Committee pass the bill. He believes the best way to serve these clients is in a group home setting. This bill offers a chance for these clients to be productive and involved in community programs and be better citizens of our state.

Ron Pavelka presented written testimony for Joan Strickler, Executive Director, Kansas Advocacy and Protective Services for the Developmentally Disabled, Inc. Some considerations that they brought to the Committee are: (a) Group homes are always staffed when any of the residents are present in the home. (b) Developmentally disabled adults lead lives similar to other working people. They spend their days in sheltered workshops and come home to have dinner and relax. (c) Licensing standards guarantee a level of quality for residences. (d) Neighbors can monitor residential programs. (Attachment II)

Merilee Larson presented written testimony in support of the bill. She stated this bill would assist the State in its effort to deinstitutionalize over 230 individuals with mental retardation. (Attachment III)

CONTINUATION SHEET

MINUTES OF THE Senate COMMITTEE ON Local Government,
room 531-N, Statehouse, at 9:00 a.m./~~p.m.~~ on February 25, 1986

Sister Christella Buser stated current zoning laws surely require a long torturous path to follow in the quest for a small group seeking to purchase a home in a residential area in order to enjoy life. This bill would cut through the red tape. (Attachment IV)

Sally Fahrenthold, a parent of a mentally retarded daughter, urged the Committee to remove the barriers that sometimes put "no trespassing" signs in front of her daughter and her friends. (Attachment V)

Lila Paslay, KARF, asked the Committee to consider H.B. 2275 in the light of what you would want for your own family member if you were faced with providing the most desirable living situation for them. (Attachment VI)

Jeanette Kroemer, parent of a severely multiply handicapped son, stated the time, energy and money spent fighting unfair zoning could be much better spent providing services for our children. This bill would give them a chance to live in a homelike atmosphere. (Attachment VII)

Mitch Cooper stated severely handicapped individuals are generally restricted in their selecting a place to reside this bill would give them a wider degree of latitude in housing. (Attachment VIII)

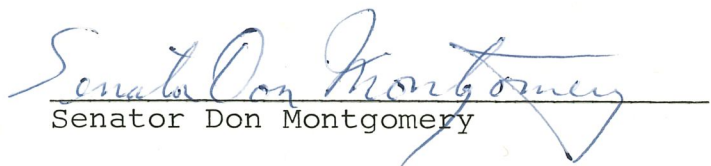
Laura L. Moore supported the bill, she stated it has been a problem finding housing for disabled persons. Lower income status has been a basic difficulty in either renting or buying a house, this bill would allow these persons to be considered a family and permits greater access to family and community living for them. (Attachment IX) She urged the Committee to accept the recommendation of the interim study for inclusion of the "mentally ill".

Kansas Association of Licensed Private Child Care Agencies supports the bill and the Interim Committee recommendation to put the "mentally ill" back in. (Attachment X)

Howard Snyder, President of Kansas Families for Mental Health, was not present but he presented written testimony from his group, in support of the bill and the recommendation of the Interim Committee to reinstate "mentally ill". (Attachment XI)

Senator Daniels moved to approve the minutes of February 20. Senator Langworthy seconded the motion. The minutes were adopted.

The Chairman announced the hearing on H.B. 2275 would continue on February 26. He adjourned the meeting at 10:00 a.m.


Senator Don Montgomery

Date: FEBRUARY 25, 1986

GUEST REGISTER

SENATE

LOCAL GOVERNMENT

NAME	ORGANIZATION	ADDRESS
Sister Christella Busen	Heartland One (L'Arche)	9162A Riggs Ln. O.P. Ks. 66219
Frances Scherzer	Heartland (Fond Member)	3900 Johnson Ave Fairway Ks.
Regina Pearl	Heartland (L'Arche)	9162A Riggs Ln O.P. Ks 66212
Sister Norma Schick	Heartland (L'Arche)	9208 Summit, Lenexa 66215
Jean Schiefelbusch	Assoc. Retarded Citizens, Jo. Co.	8001 Concord, # 211 O.P. KS 66204
Ronald S. Dwyer	Shawnee County EEO	Shawnee County Courthouse 66603
Judy Cullen	KALPOCA	P.O. Box 647 Lawrence
Frank Kuehn	KEYS Inc.	127 S Kansas Olathe KS. 66041
Jean Whrice	KEYS Inc.	9431 Emley Ln. Lawrence Ks.
Ron Pavotka	Kansas Advocacy & Protective Services	513 Leavenworth, Manhattan 66206
Kate Sullivan	Mental Health Assn of Kansas	1931 Bowman Ct. Topeka (04)
Bryce Miller	" "	2548 Belle, Topeka 66606
Lela Paslay	ARC/Kansas	Topeka
Merilee Larson	KARF - Sheltered Living	Newton, Topeka
Jeanette B. Kramer	DAP SMH parent	3426 Adams - Topeka, Ks 66605
Karen Testa	GAP Group (from Allentown Pa)	3610 SE 20th Topeka Ks 66605
David S. Moore	Three Rivers Independent Living Resource Center	913-456-9915 810 4th Street Warren, Ks. 66689
Cindy Carver	NANAS FAMILIES FOR MENTAL HEALTH	Andy Carver, 1306 Hawthorne Manhattan, KS 66502 917-531-7000
Margaret Bonds-Waus	DSNW K	PO Box 1014 Hays, KS 67601
Michael Donnelly	3 Rivers Ind. Living Center	810 4th St. Warren 66689
Sally Fahrenthold	Assn for Retarded Citizens of Shawnee Co.	7845 Mohawk Prairie Village, KS 66208
Mitch Cooper	Topeka Resource Center for The Handicapped	1119 W. 10th, Suite 2 Topeka, KS 66604
Gerry Ray	Jo Co Commissioners	Olathe
Bruce Linkos	Villages Inc	Topeka

Marc Gahr

Topeka-Shawnee Co
Metro. Planning
Comm.

820 Queeny
Topeka, KS 66602

Kerri Davis

Levy. of Munic.
KBAK

Topeka
"

Janet Stubbs

Bary Condra

Residential
Alternatives, Inc.
KALPCHA

Lawrence, Ks.

John Petersen

Topeka

Francis Schuzer

Heartland (board member)

Jarvis, Kans.

KAREN McCLAIN

KS. ASSOC. OF REALTORS

TOPEKA

Ann Henry

KU

Lawrence

John Hanna

AP

Topeka

Paul Kelly

ASSOC. OF CMHCs OF Ks.

Topeka

Ray Petty

KACEH / DHR

Topeka

Carol T. Hannah

MHHS / SR S

Topeka



Association of Community

Mental Health Centers of Kansas

835 S.W. Topeka Ave., Suite B/Topeka, Kansas 66612/913 234-4773

Paul M. Klotz, Executive Director

-TESTIMONY-

Senate Committee on Local Government

Date: February 25, 1986

By: Paul M. Klotz
Executive Director

Chairman: Don Montgomery

Based on the belief that considerable discrimination continues against the mentally ill and realizing that community based housing continues to be extremely scarce for the mentally ill, we seek to restore House Bill No. 2275 to include the "mentally ill" on lines 0024, 0033, 0037, and to remove boldfaced language in line 0044.

Without this legislation, community mental health services will be extremely hampered in maintaining and expanding services to the 4,000 long term mentally ill seen in the community.

Twenty-six other states have considered this sufficiently important to pass group home exclusionary zoning statutes.

Attached are the "Conclusions and Recommendations" from the 1985 Special Committee on Local Government, Proposal No. 46.

Thank you for the opportunity to comment.

-/-/-

(Attachment I) 2/25/86 S. LG

Larry W. Nikkel
President

Dwight Young
President Elect

Paul Thomas
Vice President

Clinton D. Willsie
Past President

Michael L. Taylor
Treasurer

Steven J. Solomon
Secretary

Harriet Griffith
Bd. Mem. at Large

-Special Committee on Local Government-
Proposal No. 46
Summer, 1985

Conclusions and Recommendations
--Group Home Zoning

The Committee recognizes the strong tradition of local control over zoning decisions in this state and believes local control should be continued for most zoning decisions. A majority of the Committee feels, however, that there is a need for an overriding state policy in regard to the location of group homes for the physically handicapped, developmentally disabled, and mentally ill. The Committee is aware of the national trends as well as in this state to more and more promote independent living of these groups of people to the greatest extent possible. The Committee recognizes that there are sound fiscal reasons to support deinstitutionalization of these people as well as the more personal benefits that are bestowed on these individuals and their families by promoting more independent lifestyles.

For these reasons the Committee endorses H.B. 2275 with an amendment to reinsert the "mentally ill." The Committee urges the Senate Local Government Committee to amend the bill as proposed and that the bill as amended receive favorable consideration of the 1986 Legislature. The Committee supports the reinsertion of "mentally ill" in the bill, recognizing that such persons will not be permitted to live in a group home setting unless it is determined that they present no danger to the community or themselves.

Kansas Advocacy & Protective Services for the Developmentally Disabled, Inc.



Suite 2, the Denholm Bldg.
513 Leavenworth
Manhattan, KS 66502
(913) 776-1541

Chairperson

*R. C. (Pete) Loux
Wichita*

TO: The Senate Committee on Local Government
Senator Don Montgomery, Chairperson

Vice Chairperson

*Robert Anderson
Ottawa*

FROM: Kansas Advocacy and Protective Services
for the Developmentally Disabled, Inc.
R.C. Loux, Chairperson

Secretary

*Neil Benson
El Dorado*

DATE: February 25, 1986

Treasurer

*Robert Epps
Topeka*

RE: H.B. 2275 - Zoning; Group Homes

*Rep. Rochelle Chronister
Neodesha*

*Sen. Norma Daniels
Valley Center*

*Sen. Ross O. Doyen
Concordia*

*Harold James
Hugoton*

*Rep. Ruth Luzzati
Wichita*

*James Maag
Topeka*

*W. Patrick Russell
Topeka*

*W. H. Weber
Topeka*

Liaison to the Governor

Robert Epps

Executive Director

Joan Strickler

KAPS assists developmentally disabled children and adults in gaining access to the rights and services to which they are entitled. As provided for by the Developmental Disabilities Act (P.L. 94-103 as amended by P.L. 95-602 and P.L. 98-527), each state designates an independent agency with the authority to pursue legal, administrative and other appropriate remedies to insure the rights of persons with developmental disabilities. There are 56 such agencies in our states and territories. KAPS is a private, non-profit corporation created specifically to serve this role in Kansas.

As knowledge of the nature of disabilities has grown, parents and communities are no longer being encouraged to place retarded or other developmentally disabled children and adults in institutional settings. Instead, more normalized settings within the community are being sought and developed. The Kansas Long-Range Mental Retardation Plan reports that, as of 1980, there were more than 750 community-based residential placements for mentally retarded and other developmentally disabled citizens in Kansas. More have been developed since that time. As part of its basic philosophy and purpose, the Kansas Plan states "...that all persons, including those who happen to be mentally retarded, have the same basic need - the need to be appreciated and respected as human beings of personal worth and dignity. Further

(Attachment II)

2/25/86 S. LG

that mentally retarded persons have both the right and capacity to be assisted in their development - physically, emotionally, intellectually, spiritually and socially, preferably in or near their home community."

State institutions are no longer perceived of as permanent placements. In the last decade we have observed the growth of community-based centers providing services for mentally ill as well as developmentally disabled adults.

The reason for these changes - for this shift from institutions to the community are basically two.

- Philosophical. It is desirable to make it possible for persons with handicapping conditions to live in less restrictive and more normalized settings in the community.
- Financial. In general, it costs less to serve people in community settings rather than hospitals and institutions.

Most communities have absorbed group homes with little public attention. In some situations, however, members of the community have expressed reservations. Their fears generally fall into two categories - concerns of property values and concerns of safety. These fears can result in public hearings that subject disabled persons and their families to humiliation and pain without justification.

Group homes for developmentally disabled persons have been built throughout Kansas and the nation, and experiences in running such homes tend to diminish these fears.

First, a look at property values.

In 1978, at the request of the State of New York, Princeton University conducted a study of what happens when a group home is placed in a neighborhood.¹ The study focused on 42 communities in which sales of 754 homes took place which were located next door, or across the street, from group homes for persons with developmental disabilities. At the same time, the study looked at the sales of 826 homes in 42 similar

communities that had no group residences. The following are some of the very clear findings that came from that study.

- The presence of group homes had no impact upon property values at all. The values of homes increased (or decreased) similarly to houses in communities where no group homes existed.
- The proximity of a house to a group home had no effect upon the market value. Even homes immediately next door to group homes did not decline in value.
- The establishment of a group home did not generate a higher degree of property turnover than that found in communities without such homes.
- The group homes, were, in fact, found to have a better appearance than the average home. The repair and maintenance was better, and even the lawns, bushes, and trees were better cared for.

According to an authority on deinstitutionalization, Wolf Wolfensberger, all reported studies concerning the effect of group homes on property values have shown that these residences do not adversely affect the worth of real estate.²

Second, a look at safety.

There is no evidence to support fears that mentally retarded people are dangerous to society. Gene Stephens, an authority on criminal justice and developmental disabilities has written "...there has never been support for the hypothesis that there is a significant positive relationship between mental retardation and criminality - that is, mentally retarded people are no more apt because of their "below normal" intelligence, to become involved in criminality than non-mentally retarded persons."³

In fact, evidence suggests it might be safer to be a neighbor of a group home. A recent study found that the arrest rate of 60 per thousand per year for adults in the general population is significantly higher than the 3 per thousand rate registered by mentally retarded and other developmentally disabled residents of group homes.⁴

According to a report prepared by the Government Accounting Office, once residents have moved into group homes, and the neighborhood has become more familiar with the purpose and operation of the homes, community opposition becomes minimized.⁵

The courts, too, have reached conclusions supportive of group homes for developmentally disabled persons. The Montana Supreme Court held that a group home for eight or fewer mentally disabled adults was a residence and could be located in any area that was zoned as residential.⁶

In that Montana case, a mental health center brought a suit challenging the city board of adjustment's decision that denied a conditional use permit to convert a residence to a group home for eight or fewer mentally disabled adults in an area zoned as residential. A lower court granted the permit and the city appealed.

The State Supreme Court found that a group home for eight or fewer people is a residence and may be located in any area in Montana that is zoned as residential. The opinion read: "this court will not require community residential facilities to repeatedly defend their well established right to locate in any residential area in Montana". The city's appeal was dismissed as frivolous.

Recently the United States Supreme Court recognized that the discrimination suffered by persons with mental retardation was "likely to reflect deep-seated prejudice". The Court ruled that a Cleburne, Texas zoning ordinance requiring a special permit for the establishment of a group home for persons with mental retardation was unconstitutional and violated the equal protection rights of the potential residents of the home.⁷

One of the city's major reasons for denying the special permit was the negative attitude and fears of the neighbors. Such factors, stated the Court, are not properly cognizable in a zoning proceeding. Furthermore, "the electorate..., whether by referendum or otherwise, could not order city action violative of the Equal Protection Clause". The Court made it very clear that although the "private biases (of the neighbors) may be outside the reach of the law, ... the law cannot, directly or indirectly, give them effect".

There are some considerations that I wish to bring to your attention.

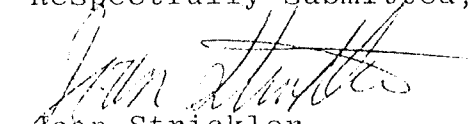
- Group homes are always staffed when any of the residents are present in the home.
- Developmentally disabled adults lead lives similar to other working people. They spend their days in a sheltered workshop or work activities center and come home to have dinner and relax.
- Licensing standards guarantee a level of quality for residences.
- Neighbors can monitor residential programs. For example, if a neighbor observes anything improper about the abilities of the staff members, the adequacy of upkeep of property or the treatment of the residents, they have the right to communicate their concerns to any number of persons or agencies. These might include staff members themselves, the agency responsible for the home, responsible elected officials, or state licensing agencies.

As we view present concerns in Kansas regarding the threat of decertification of our state MR institutions, and the resulting loss in Federal dollars, it seems wise to encourage development of community alternatives for developmentally disabled persons. These alternatives

make deinstitutionalization and preventative institutionalization possible. Provisions in H.B. 2275 would help to eliminate some obstacles found in establishing community-based living alternatives.

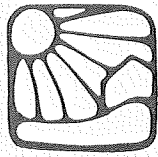
The issue, then, of permitting the establishment of group homes, despite a local zoning ordinance, can be justified though the concept of "over-riding state policy" as described in the memorandum from Legislative Research.

Respectfully submitted,



Joan Strickler
Executive Director

- 1) Julian Wolpert, Group Homes for the Mentally Retarded: An Investigation of Neighborhood Property Impacts (Albany: New York State Office of Mental Retardation and Developmental Disabilities, August 31, 1978.)
- 2) Wolfensberger, W., The Origin and Nature of Our Institutional Models, (Human Policy Press, 1975) p. 16
- 3) Stephens, G., Identifying, Handling and Treating the Developmentally Disabled Offender (Columbia: University Affiliated Facility, University of South Carolina, 1981).
- 4) Lubin et al., The Likelihood of Police Contacts with Developmentally Disabled Persons in Community Residences 5 (unpubl. report: New York State Office of Mental Retardation and Developmental Disabilities Feb. 1982).
5. An Analysis of Zoning and Other Problems Affecting the Establishment of Group Homes for the Mentally Disabled (GAO/HRD-83-14, August 17, 1983).
6. Mahrt v. Kalispell, 690 P. 2d 418 (Montana Supreme Court. 1984).
7. Cleburne v. Cleburne Living Center, - U.S. -, 53 U.S.L.W. 5023 (1985).



Kansas Association of Rehabilitation Facilities

TownCenter Building 120 West Sixth, Suite 110
Newton, KS 67114 316-284-2330

TO: Senate Local Government Committee

FROM: Kansas Association of Rehabilitation Facilities (KARF)

RE: H.B. 2275, AN ACT concerning zoning; relating to group homes

DATE: February 25, 1986

1.0 Position Statement on H.B. 2275, an Act concerning zoning, relating to group homes

1.1 KARF supports H.B. 2275 which establishes a state-wide policy prohibiting exclusionary zoning practices with regard to group homes for handicapped individuals of eight or fewer

2.0 Justification

2.1 Current zoning ordinances and regulations vary significantly from municipality to municipality in Kansas and create obstacles to the development of group homes for the handicapped

2.2 Currently there are over 1,500 individuals who are disabled living in group homes or apartment settings in Kansas. It is projected that approximately 3,000 other individuals will need to be provided living situations in the next 5 to 10 years. It would help to have a statewide policy to assist with this process.

2.3 Approximately 18,000 Kansas family members will be affected by the outcome of this bill

2.4 National funding, philosophy, and regulations support community integration of our handicapped citizens

(Attachment III)

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- 2.5 Over twenty-eight other states have legislation which prohibits exclusionary zoning practices with regard to group homes for handicapped individuals
- 2.6 The Kansas legislature has previously recognized the need for adequate planning, coordination, and funding in order to meet the demand for community based residential services for the handicapped
- 2.7 This policy statement supports KARF's belief in integrating individuals with disabilities into the community
- 2.8 This policy statement supports KARF's belief that services for the disabled should be available in the community to prevent institutionalization
- 2.9 Current local zoning regulations allow for foster care in areas zoned for single family dwellings and unrelated individuals frequently abridge zoning regulations; agencies providing group home services are unable to provide needed services without appropriate zoning
- 3.0 H.B. 2275 would assist the state in its effort to deinstitutionalize over 230 individuals with mental retardation

STATEWIDE POLICY RELATING TO ZONING GROUP HOMES

DISCUSSION OF ISSUE:

Currently, each municipality in Kansas has its own ordinances and regulations relating to the number of unrelated persons who may live together as a group in single family residential areas. In some cities, ordinances specify four or fewer; while in others, five or fewer unrelated persons may live together. In yet others, group homes may only be established via special use permits.

Community-based social service systems for persons with mental retardation, other developmental disabilities, and physical handicaps have been developed over the past ten to twelve years through a combination of federal, state and local funding. Licensing and monitoring of such community-based programs is primarily the responsibility of the Kansas Department of Social and Rehabilitation Services and/or the Kansas Department of Health and Environment utilizing statewide standards/regulations.

Expansion of community-based residential programs for persons with such handicapping conditions is urgently needed as illustrated in the Kansas Long Range Mental Retardation Plan.

Since it is widely accepted that persons with such handicaps should be served in the least restrictive environment possible, agencies/providers are seeking: 1.) to meet the growing demand for services and 2.) to integrate persons with handicaps within the community and its resources. This process has typically required that agencies/providers spend vast amounts of resources (time and dollars) to obtain properly zoned real estate for the purpose of establishing group homes to serve individuals with handicaps.

RECOMMENDATIONS FOR CHANGE:

Kansas Association of Rehabilitation Facilities recommends the following:

1. That statewide policy be established through H.B. 2275, as amended by the House Committee of the Whole, to allow group homes for eight or fewer persons with handicapping conditions in single family residential areas.
2. That the Interim Study recommendations of the Special Committee on Local Government concerning Proposal #46 be strongly considered for inclusion in the bill.

FACT SHEET

Identity of Kansas Association of Rehabilitation Facilities (KARF)

KARF is an Association of 34 Rehabilitation Facilities throughout Kansas providing Vocational/Day Activity Programs, Community Living Programs, Children's Services Programs, Individual Support Programs, and Medical Rehabilitation Programs (enclosed membership profile).

The facilities provide programs/services to over 14,000 individuals with disabilities throughout the year with an average daily census being approximately 4,000 individuals.

Definition of Habilitation/Rehabilitation Programs for Individuals with Disabilities

Habilitation/Rehabilitation is the process by which an integrated program of services is provided to help a person disabled at birth or by illness or injury, gain a higher level of function. Such services address vocational, community living, medical, education and support needs. The goal of the rehabilitation process is to help the person become capable of self support by enabling him or her to engage in employment, live as independently as possible, exist outside institutional settings, or otherwise improve his or her situation.

ASSOCIATION MISSION, BELIEFS AND VALUES

Mission

The purpose of the Kansas Association of Rehabilitation Facilities is to serve its membership in developing and pro-

moting quality programs for individuals with disabilities and to communicate essential information between its membership and its publics.

Beliefs and Values

The Association is founded upon certain shared beliefs and values which are an expression of our mission and pur-

pose as individuals, as professionals, as facilities and as a voluntary organization.

We believe in the inherent dignity of the individual with disabilities.

We believe that no applicant or participant in services, employment or housing should be discriminated against on the basis of race, color, national origin, religion, sex, age, or handicap.

We believe in the community's right and responsibility to provide services that are reasonably accessible and available on a local or regional basis to individuals with disabilities.

We believe that it is the responsibility of government to address the needs of individuals disabled at birth, or by illness or injury; and provide needed support and reimbursement for services needed to assist them to live as independently as possible.

We believe in integrating individuals with disabilities into community programs/services, business and industry, and social settings without compromising the quality of service needed to meet each person's needs.

We believe that government should provide incentives to business and industry to promote employment and other opportunities for individuals with disabilities.

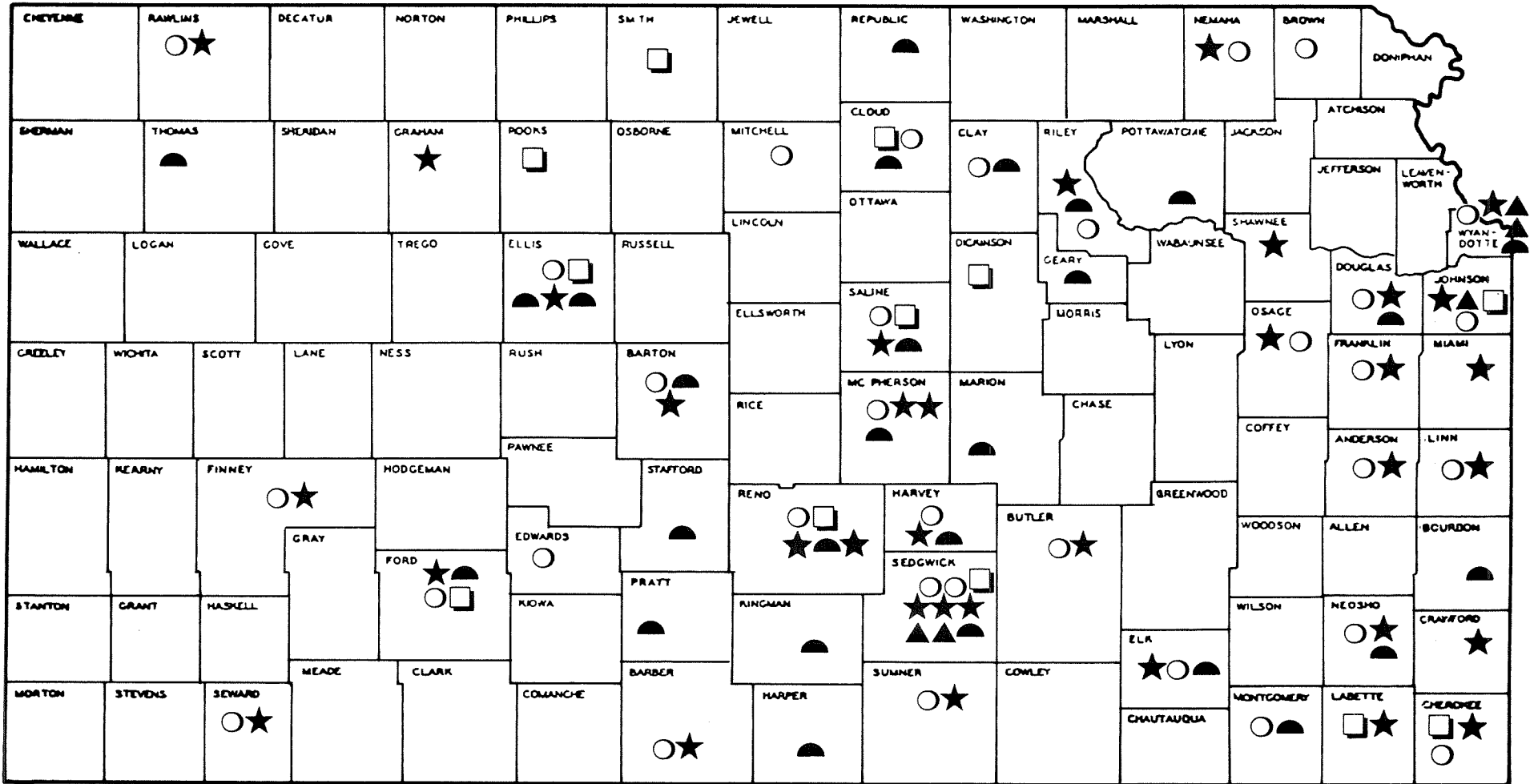
We believe that transitional living support, and medical and vocational rehabilitation should be provided by the private sector (insurance) to prevent long term government support through SSI, SSDI and long term care.

We believe that services should be available in the community to prevent institutionalization.

KARF MEMBERSHIP

Facility	Vocational	Residential	Medical	Children's Services	Independent Living
Arrowhead West, Inc.	X	X		X	X
Bethany Rehabilitation Center			X		
Big Lakes Development Center	X	X		X	
Brown Co. Sheltered Workshop	X				
Carondelet Rehabilitation Center of America			X		
Cerebral Palsy Research, Inc.		X		X	X
Chikaskia Area Training Ctr.	X	X		X	
CLASS, Ltd.	X	X		X	X
COF Training Service, Inc.	X	X			
Community Living Services, Inc.		X			
Cottonwood, Inc.	X	X		X	
Dev. Services of NW Kansas	X	X		X	X
Early Childhood Dev. Center				X	
Futures Unlimited, Inc.	X	X			
Goodwill Industries	X				
Hutchinson Heights		X			
Johnson County MR Center	X	X		X	X
KU Rehab Medicine Assoc.			X		
KS Elks Training Center	X	X			
Lakemary Center, Inc.	X	X		X	
McPherson Co. Div. Services	X	X		X	
MR Gov. Board/Wyandotte Co.	X	X		X	
Menninger Foundation/Rehab Programs	X				
Nemaha Co. Training Center	X	X			
Northview Developmental Ctr.	X	X		X	
Occupational Ctr./Central KS	X	X		X	X
St. Joseph Medical Center			X		
Sheltered Living, Inc.		X			
SW Developmental Services, Inc.	X	X			
SRS, Div. of Rehab Services, KVRU and VRU	X	X			
Starkey Developmental Ctr.	X	X		X	
Sunflower Training Center	X	X		X	
TECH, Inc.	X	X		X	X
Terramara, Inc.	X	X			
Tri-Ko, Inc.	X	X			
Tri-Valley Dev. Center	X	X		X	
Wesley Medical Center			X		

KARF MEMBERSHIP



- Independent Living
- Vocational Facilities
- ★ Residential Facilities

- ◐ Children's Services
- ▲ Medical Rehabilitation Facilities

2/25/86

To: KANSAS SENATE LOCAL GOVERNMENT COMMITTEE
Re: HB 2275
From: Sister Christella Buser

I am executive director of L'Arche (Ark, a place of refuge), an organization in the Kansas City area which seeks to open a home for four moderately mentally disabled adults and three staff members who will live and work together as a family.

I am a proponent of HB 2275 as it was reported to you from the Local Government Interim Study Committee. I would like to make two points in my testimony and leave you with two questions as you prepare to vote on HB 2275.

PERSONAL EXPERIENCE I have lived and worked with mentally disabled persons for the past eight years. The various homes in which I lived are located in residential areas of towns and cities of various sizes, some in Canada and some in the U.S. In no instance has there been a serious problem between one of our group homes and the surrounding neighbors involved, due to our life style, our group activities or the actions of any individual person living in one of our homes.

To speak more directly to the issue, we have nine homes in the U.S. They are in Syracuse, NY; Erie, PA; Tacoma, WA; Cleveland, OH; Boston, MA; Washington, DC; Mobile, AL; Seattle, WA; and Clinton, IA. The quality of life and the interaction with local neighbors in these towns and cities give ample evidence that mentally disabled citizens can live in private homes and have lives of human dignity when such living is structured to meet the needs of all, those in the home and those in the neighborhood.

LOCAL ZONING LAWS For nearly three years I have dealt with local municipalities in the Kansas City area in my quest for a small group home. At every turn I have met with doubt, discouragement and resistance. Let me give you a few examples.

1. OLATHE, KS In the Fall of 1984 I found a suitable home in Olathe. The owner was willing to sell. I began the process of obtaining a special use permit as required by current zoning laws. After delays in meetings scheduled before the Olathe Planning Commission and the City Commission, in the Spring of 1985, my application was rejected. The Olathe Planning Commission had overwhelmingly voted in favor (6-1), but the City Commission rejected the application (3-2). Local city elections tied in with a neighborhood protest played a significant role in deciding the issue.

(Attachment IV) S. LG
2/25/86

(Sister Christella's testimony continued)

2. JOHNSON COUNTY During the Fall of 1985 and Spring of 1986, as suggested to me by a Johnson County legislator, I visited with a number of mayors and planning and city commission members of various municipalities in the county. In some cases I was told that it would be very difficult to get a special use permit for our desired home in "their" towns. In one place I would be required to pay a \$600 non-refundable application fee, and the opinion was expressed that I would almost surely be turned down by the city commission of that particular municipality.

3. MISSION, KS I am now in the process of applying for a special use permit from the City of Mission for a home in that area. I had to pay a \$100 non-refundable application fee. 21 neighbors around my intended home must be notified. I must put up a large sign in the front yard of the property. I must go before the Planning Commission on March 10, and before the City Commission on March 26 for a final decision. Then perhaps I can become a homeowner in Mission!

SUMMARY Current zoning laws surely require a long torturous path to follow in the quest for a small group seeking to purchase a home in a residential (R-1) area in order to enjoy the good life in Kansas.

If left entirely in the hands of local municipal officials, the current zoning laws will continue to be discriminatory in excluding mentally disabled persons from residential neighborhoods.

QUESTIONS

1. IF YOU WERE SUDDENLY RENDERED MENTALLY DISABLED BY SERIOUS ACCIDENT, STROKE, ALZHEIMER'S DISEASE OR OTHER CRITICAL CONDITION, HOW WOULD YOU WANT YOUR CHOICE OF RESIDENCE TO BE MADE?
2. IF FEDERAL AND STATE LAWS HAD NOT BEEN WRITTEN IN THE 1960s TO MANDATE INTEGRATED HOUSING FOR MINORITIES, DO YOU HONESTLY BELIEVE THAT LOCAL MUNICIPALITIES WOULD HAVE GIVEN EQUAL CIVIL RIGHTS TO PEOPLE OF ALL COLORS AND RACES IN THIS COUNTRY? CAN WE DO LESS NOW FOR THE MINORITY WE CALL MENTALLY DISABLED?

TESTIMONY REGARDING ENDING REQUIREMENT FOR SPECIAL USE
PERMITS FOR GROUP HOMES - H.B.2275 FOR DISABLED PERSONS

Sally C. Fahrenthold - February 25, 1986

My daughter Pam was born more than 24 years ago at the end of the era when mentally retarded people were confined to back rooms and never mentioned in public. When she was a year old, her pediatrician told me to take as good care of her as we could until she turned six, when we would "finally be able to put her in a state institution for the rest of her life. So don't get too attached to her," he warned. But this was my daughter, my first child, for whom I had all the hopes that any mother has for her child. And I loved her. For my husband and me, she made our family as complete as any family.

As Pam slowly learned to walk and finally to talk, through our own efforts and those of other doctors, therapists, teachers, social workers, friends, she grew into a little preschooler who did not look different from our neighbor children. She just progressed at about half the rate they did. But we found many typical community programs (like preschools, recreation, knowledgeable doctors) in short supply. Often we found the doors of opportunity slammed shut in Pam's face. In Kansas there were no school or vocational training or residential programs or social skills education for her at that. I was appalled...what is the value of childhood for such a child if it cannot be a time of learning? Her future looked doomed as well. When Pam was five, we stood together at the front door as I raised the flag for the Fourth of July. Pam placed her hand across her heart, reciting her pledge of allegiance to this nation: "One nation, under God, with liberty and justice for me!"

That liberty and justice for Pam has begun to emerge over the years, as the efforts of so many of us have resulted in important educational, vocational, social and recreational opportunities. Pam has graduated from special education in Shawnee Mission District, having shared meals in local school cafeterias, changed classes in those hallways with our neighbor children, cheered enthusiastically for the Shawnee Mission North Indians (against her brother's team, the East Lancers). She receives job training at Johnson County Industries of Johnson County Mental Retardation Center (JCMRC) and has tried out jobs at J.C. Penney and Montgomery Ward. She has been living for about 2½ years at the Linda Dorfman House, operated by JCMRC, gradually assuming more and more personal responsibility. She walks to the nearby stores for grocery shopping, to get hair cuts, to mail letters at the Post office, to enjoy the restaurants. She and her friends feel welcome and at home in this neighborhood near their family homes. The neighborhood has found no cause for distress as well. The eight residents of

(Attachment V)
2/25/86

S. LG

Dorfman House are welcome customers and neighbors in Mission, Kansas.

It is quite natural for Pam to grow up, move out of the family home, and live in the vicinity. Her group home was built for a family's use and now houses a "community family". It fits in to the appearance of the block, as do brand new group homes elsewhere. Pam's Dorfman "family" is quiet, well supervised, and no disruption to others. Neither Pam nor many of her friends drive, so traffic to the house is minimal. The home seems to add to the stability of the neighborhood.

Pam has several friends who long to live in this kind of "community family". They live right now at home, scattered throughout our area individually. They are already among our neighbors -- but they are not yet receiving the residential services that would help them move into fuller maturity. They are citizens, working or studying, going to church or synagogue, shopping with their folks but hindered from moving on to group home living. Pam thinks -- and I agree -- that they have as much right to continue living in our neighborhood in a "community family" of eight or so as any large family has to move in nearby. Why would a well-supervised group home need special permission when a family of ten does not?

Our community family consists of all of the members. The rights of all citizens are impaired if the rights of some are denied. We have an opportunity to take a step forward to be sure that some of our citizens are not "selected out" while the rest of us are "allowed in".

I urge you to remove artificial barriers that sometimes put "no trespassing" signs in front of my daughter Pam and her friends.

Please take this new opportunity to assume "liberty and justice for all".

Thank you.

THE ASSOCIATION FOR
RETARDED CITIZENS OF KANSAS, INC.



Hope through understanding

February 25, 1986

1111 W. 59th TERRACE
SHAWNEE, KS 66203 • (913) 268-8200

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Great Bend

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BILL WARDS

Olathe

TO: Senator Don Montgomery, Chairperson
Members of Senate Local Government
Committee

FROM: Lila Paslay, Chairperson
Legislative Affairs

Re: H.B. 2275

We have been pleased that over the past 25 years the legislators of Kansas have responded to so many needs of its citizens who are mentally retarded or developmentally disabled. You have responded to the need for improving the quality of life for those in our state institutions and for contributing to the development of community residential and day activity programs. We are here today to ask you to once again respond to our plea to allow the quality of life be the highest possible for our sons and daughters who, through no fault of their own, happen to be mentally retarded. We would ask you to make that quality of life available to all citizens of Kansas who are mentally retarded regardless of the community in which they live. We would ask you to represent them as well as your other constituents.

Our sons and daughters wish for many of the same things you and your children wish for. The opportunity to live as a family in a home and in a family type neighborhood is one of those things. And they wish for it for the same reasons you and I do.

The resistance of neighborhoods and zoning boards to allow the establishment of group homes in areas zoned for single family residences is based on fear, myths and misconceptions. We had hoped that through the process of education those fears would be alleviated and in many instances they have. However, some of our citizens are not interested in learning

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the truth. That truth was made evident in a study done by Dr. Julian Wolpert and his colleagues from Princeton University at the request of the state of New York.

Wolpert's organization focused on 42 communities where the sales of 754 homes took place next door or across the street from homes for persons with developmental disabilities. At the same time they studied the sales of 826 homes in 42 similar communities that had no group residences. The research involved numerous contacts with neighbors, as well as the intensive study of documents and records of property transactions. Some remarkably clear findings came from that study.

- * The presence of group homes had no impact on property values at all.
- * The proximity of a house to a group home had no effect on the market value.
- * There was no evidence of neighborhood "saturation".
- * The group homes looked like the other houses in the neighborhood.
- * The function of the home was inconspicuous.
- * The group homes had a better appearance than the average home.

In my position as Director of Guardianship with a local ARC, we are finding parents who are making plans for the future of their sons and daughters when they are no longer able to provide for them due to their own disability or death. These are most often families who have not asked the state or community to provide residential services for their children. These plans in some instances include leaving the family home in a trust. The family home, at the death of the parents, is available for their child who is mentally retarded to live in with two or three other persons who are retarded and a live in support person. This is a new concept for families and one which could be beneficial to not only the retarded person but to the state as well. It would be sad, indeed, if families were unable to provide a home for their sons or daughters in this way because the community in which they live are unable to accept the person with retardation as a part of the neighborhood even though they may have grown up in the house.

Page three
ARC/Kansas

We would ask you to consider HB 2275 in the light of what you would want for your own family member if you were faced with providing the most desirable living situation for them. We hope you would want them to be able to live in a neighborhood of their choosing, not in a neighborhood selected for them by those who do not understand them.

We believe that Judge Louis Brandeis was correct when he said, "Democracy insists that the full development of each individual is not only a right, but a duty to society." We believe this democracy includes living in single family residential neighborhoods.

First, I want to thank the Local Government Concerns Committee for the opportunity to speak to you. I am Jeanette Kroemer, the mother of a severely multiply handicapped young adult and co-chairman of Group Homes, Alternatives, & Programming (GAP), an organization of parents and providers who are concerned about the lack of services for those persons designated as "hard to serve".

This is really very hard for me. My husband and I were both raised on farms in Nemaha County and were taught to be self-sufficient and take care of our own problems. But as I grow older, I find some things are well beyond our control. Our son, Dirk, is severely multiply handicapped. In his case he is severely mentally retarded, non-verbal and in a wheelchair. He communicates with a communication book. His general health is good. We made the decision that Dirk would be raised at home with as normal a home life as possible. It has been a constant struggle to get appropriate programs for him so that he could progress as far as his capabilities would allow. He attended special education classes where he progressed beyond our expectations.

Dirk is now 23 years old. Under normal circumstances you would expect a son of his age to move onto a life of his own out into the world. But Dirk is sitting at home with nothing to do; no day activity program in the community, no group home. This has been a tremendous adjustment for both Dirk and me. After having him at home constantly for nearly 2 years, I have come to the realization that I can not physically do this indefinitely.

(And it isn't fair to Dirk. He needs the stimulation of new relationships and opportunities for growth that would under normal circumstances be the natural process of life.)

with more parents wanting to keep their handicapped children at home, I understand fully how hard this choice is when you know how much better it is for your child to be raised in a loving home atmosphere but the frightening realization that at age 21 there may not be any day activity program or group home for him to make the transition into after the school years are over. Community based services are needed badly. As frightening as these prospects are, I would still raise my son at home. My son has not been a big expense to the state, but now that we really need your help, there is none.

I want my son in a safe secure homelike environment. I Also want him in my own community where his family can continue to be involved in his life. I assure you this is not unique to my family. This same struggle takes place in every family all across Kansas that has a handicapped person in their home.

Last October I was privileged, along with 12 other GAP members, to visit two organizations which own and operate group homes for persons with severe handicaps. These homes were in Overland Park, Kansas and DeMoines, Iowa. I was very impressed and pleased to learn how well these homes provided for the severely multiply handicapped. The homes blended into their neighborhoods very well. They were neat, clean and very well maintained. Sheltered Living here in Topeka is a fine example of group homes provided for the higher functioning mentally retarded. If you haven't visited them, you should. The big push for de-institutionalization by the federal government and the long waiting lists at existing group homes proves that they are the best answer for our young people.

I think our biggest problem is that the general public

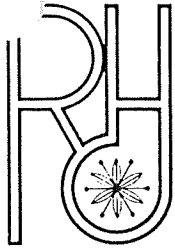
does not understand the mentally retarded population. Perhaps we parents are at fault for not educating them about our sons and daughters. When you have a handicapped person in your household the demands on your time are such that you really don't have the time or energy to do this job too. We parents were not prepared for all the things that were thrust upon us either.

What does all this have to do with HB2275? I wanted you to understand the struggles and obstacles we parents have gone through to progress this far. You have the power to remove ~~one~~ of these obstacles for us by supporting HB2275. The time, energy, and money spent on fighting unfair zoning laws could be much better spent on providing services for our sons & daughters. We need to go forward in providing for severely handicapped young people. Give them a chance to live in a homelike atmosphere. They deserve it. Again I thank you for this opportunity to speak with you.

Jeanette Kroemer
3426 Adams
Topeka, Kansas 66605

(a VII)

TOPEKA RESOURCE CENTER



FOR THE HANDICAPPED

MITCH COOPER, L.M.S.W.
Executive Director

TOPEKA RESOURCE CENTER FOR THE HANDICAPPED

West Tenth Professional Building
1119 West Tenth Topeka, Kansas 66604

Telephone
913-233-6323
TTY-233-6788

Testimony
to
House Committee on Local Government
Regarding HB 2275
A Bill Pertaining to Group Homes and Zoning
March 25, 1985

Presentor: Mitch Cooper, Executive Director
Topeka Resource Center for the Handicapped

LIVING & FREEDOM

HB 2275 is a bill about more than simply zoning and group homes. It is about *living* and it is about *freedom*. Persons without severely disabling conditions are guaranteed a wide degree of latitude in selecting a place to reside and lay claim to their rights of life, liberty and the pursuit of happiness.

Severely handicapped individuals are generally restricted in their range of choices. The obstacles to living as independently as possible in a local community are many. They include architectural and attitudinal barriers.

(Attachment VIII) S. LG
2/25/86

A Project of the Topeka Independent Living Resource Center, Inc.

ATTITUDINAL BARRIERS BAR FREEDOM OF CHOICE

This bill does not address architectural barriers. It does address *attitudinal barriers*. In order to gain a more complete understanding for the need for a law to eliminate these undesirable barriers, it is important to examine what currently happens to those persons who must continue to fight for the same rights already promised to their non-disabled counterparts.

When a person with a disability decides to relocate, regardless of whether it is from an institutional or another community living setting, a great deal of planning must be done. Some of the special conditions that may be considered, depending upon the nature and severity of the disability, include the availability of persons who can function as personal care attendants, the existence of curb cuts and adequate parking, the proximity to a public bus route, schools and merchants. They may even include the need for a quiet environment and good neighbors.

If some of these variables appear to be identical to those that you might deem important to consider for your own living situation, it is because, in large part, they are similar. The major difference is that you may choose to live wherever you want, constrained only by your ability and willingness to afford your choice of location, whereas a severely disabled person may need the advantages offered by a structured or unstructured group home setting.

GROUP HOMES PROMOTE A STRONG SENSE OF FAMILY

Local ordinances tend to be extremely restrictive in terms of what they consider to be a family for zoning purposes. Many of these ordinances were developed when most disabled persons were merely warehoused in institutions. Community living alternatives, with the exception of housing provided by blood relatives, were virtually non-existent and the local ordinances did not have to take such circumstances into account. As *group homes* developed and flourished, they helped to *promote a strong sense of family*. Unfortunately, they became targets of fear and discrimination.

Times have changed dramatically for the better, but the majority of these ordinances have not changed. This is largely based on the fact that zoning policies are generally established over time and strongly favor historical precedence as opposed to current circumstances.

FEAR THROUGH IGNORANCE

The pursuit of these archaic policies has resulted in de facto instances of wrongful discrimination. This situation is harmful to the disabled persons affected, to their families and to the communities within which the discrimination occurs. There are often prolonged legal battles, resulting in the loss of many dollars and long-lasting scars on the community. *Fear through ignorance* is routinely invoked by those seeking to deny freedom in housing choice and countless valuable hours of community education in relation to the lives and needs of disabled persons are wasted as interested parties choose up sides.

CONCLUSIONS & RECOMMENDATIONS

HB 2275 represents a significant step in the elimination of much of this unproductive behavior and the recognition of the rights of persons with disabilities. This committee would be wise to *support the conclusions and recommendations of the Special Committee on Local Government* which "endorses H.B. 2275 with an amendment to reinsert the 'mentally ill' . . . recognizing that such persons will not be permitted to live in a group home setting unless it is determined that they present no danger to the community or themselves."

Thank you for your time and consideration.

THREE RIVERS
INDEPENDENT LIVING RESOURCE CENTER
810 4TH STREET
WAMEGO, KANSAS 66547
913/456-9915 (VOICE/TTY)
Project of ADAPT, Inc.

Project Director
Laura L. Moore, L.B.S.W.

Board President/
Associate Director
Richard Charlton

Testimony to: House Committee on Local Government
Regarding: House Bill 2275 - Group Home and Zoning

Presenter: Laura L. Moore, LBSW
Project Director
Three Rivers Independent Living Resource Center
(serving Pottawatomie and Riley Counties)

House Bill 2275 and its implications for rural disabled persons

The Menninger Foundation, Division of Rehabilitation Programs, recently released the following statistics:

More than 8.5 million disabled individuals reside in rural areas or communities.

1. The rate of disability of the population living in rural area is GREATER than in urban areas (based on analysis of data published in 1980 from the National Health Interview Study).
2. Disability exists among 12.65% of the rural farm and 12.75% of the rural non-farm population compared to 10.37% of the urban population.

The higher rate of incidence of disability in rural areas, coupled with the dynamics of rural social, economic, and geographic factors, impose a great hardship on helping professionals and disabled persons seeking to stay in rural communities where their support system exist.

A Publication

National Policy for Persons with Disability states:

"Most modern disability-related programs have been developed in urban areas; the needs of hundreds of thousand of individuals with disabilities living in rural America have been seriously neglected."

2275 could increase the independent living options of rural disable person.

In rural communities, there is a strong relationship between work, family and ~~their~~ place of residence. The feelings of independence are heightened by pride in one's "place" and sense of family. The feeling to minimize one dependency on another person is alive and doing well in rural communities.

The development of appropriate housing for disabled persons has been a chronic problem. Lower income status has been a basic difficulty in either renting or buying a house. Rental landlords have assumed that the steady payment of rent could not be anticipated.

Federal and State ~~the~~ Lawmakers have recognized the need to support less expensive ~~the~~ "community living models" with:

1. Housing Act of 1958
2. Housing and Community Development Act of 1974
3. The Architectural Barriers Act of 1968
4. Section 504, of the Rehabilitation Act of 1973

House Bill 2275 supports Federal legislation and is a statement against discrimination in housing for both the rural and urban dwelling disabled persons. It does not minimize local control over zoning decisions, but rather, permits greater access to family, and community living for all persons regardless of a disabling condition.

The Interim Study report clearly states that there are no studies or research that supports the notion that group homes create traffic problems, effect property values or increase the crime levels in community neighborhoods.

Recommendation: Do not let FEAR be the basis for excluding a disability group. Accept the recommendation for inclusion of the mentally ill in House Bill 2275.

KALPCCA

KANSAS ASSOCIATION OF LICENSED PRIVATE CHILD CARE AGENCIES



EXECUTIVE COMMITTEE

PRESIDENT Bruce Linhos

The Villages Inc.
P.O. Box 1695
Topeka, Kansas 66601
(913) 267-5900

VICE-PRESIDENT Peg Martin

The Farm, Inc.
P.O. Box 90
Reading, Kansas 66868
(913) 528-3498

SECRETARY Sherry Reed

Temporary Lodging For Children
P.O. Box 2304
Olathe, Kansas 66061
(913) 764-2887

TREASURER Wayne Sims

Wyandotte House, Inc.
632 Tauomee
Kansas City, Kansas 66101
(913) 342-9332

AT-LARGE Sally Northcutt

Booth Memorial Residence
2050 W. 11th
Wichita, Kansas 67203
(316) 263-6174

Bill Preston

United Methodist Youthville
P.O. Box 210
Newton, Kansas 67114
(316) 283-1950

Marge Mintun

K.C.S.L.
1320 Faith Dr.
Salina, Kansas 67401
(913) 823-9405

Sr. Mary Lou Roberts

St. Joseph Children's Home
425 W. Iron
Salina, Kansas 67402
(913) 825-0208

POLITICAL ACTION

Judy Culley

The Shelter Inc.
342 Missouri
Lawrence, Kansas 66044

MEMBERSHIP

Sr. Frances Radencic

St. John Children's Home
720 N. 4th St.
Kansas City, Kansas 66101
(913) 371-3264

TO: Senate Local Government Committee
FROM: KALPCCA (Kansas Association of Licensed Private Child Care Agencies)
RE: HB2275
DATE: February 25, 1986

KALPCCA SERVICES:

The Kansas Association of Licensed Private Child Care Agencies is a voluntary association of thirty-five member agencies. These agencies provide various residential services to approximately 800 children in the state's custody in Kansas in licensed group homes and residential centers.

PURPOSE OF BILL:

This bill provides that group homes offering various services for a number of populations shall not be excluded from neighborhoods by municipal zoning ordinances or regulations.

POSITION:

KALPCCA supports HB2275 and supports the Interim Committee recommendation to put the "mentally ill" back into the list of populations to be served. We greatly appreciate the work that the legislature has done on this issue.

(Attachment X) S. LG
2/25/86

K.F.F.M.H.

Kansas Families For Mental Health

4811 W. 77th Place
Prairie Village, Kansas 66208

HB 2275

February 25, 1986

My name is Howard Snyder, and I'm from Prairie Village. I'm testifying today as President of KFFMH. KFFMH is a state-wide organization of family support groups made up of families who have long term mentally ill family members. We represent approximately 350 families in Kansas. There are local chapters in Lawrence, Topeka, Johnson County, Kansas City, Wichita, Concordia, Manhattan, Hutchinson, Newton, Winfield, Emporia, Phillipsburg, Marion, Leavenworth, Humboldt, Baxter Springs and Hiawatha.

In the 1960's the state of Kansas made the unilateral decision to reduce the population in the State Psychiatric Hospitals by approximately 80%. This was in line with a trend across the US to implement a policy called "deinstitutionalization." There were two parts to this policy. One was the reduction of the hospital population for humanitarian and economic reasons. The second was the establishment of community acceptance, and services to support the people being released from the hospitals. The first part was accomplished quickly, and people were dumped into nursing homes, family homes if available or the streets and jails where no homes were available. One result of this has been savings to the state of millions of dollars each year since, and a drastic reduction of services for the needs of the mentally ill.

The second part was not implemented. Communities were not prepared to absorb this population and services were not set up for their needs. Communities were not educated nor were they even advised of what was happening, therefore, today they are unable, and in many cases unwilling, to accept mentally ill persons into their neighborhoods.

In the city of Overland Park a few years ago an Optimist Club wanted to establish a group home for 6 teenage girls who were victims of molestation or inappropriate family life. These were not felons, they were victims. Over a period of 2½ years the Optimists went through the protest procedure in 3 different neighborhoods and were shouted down each time. After all, loud protestors represent more votes than quiet victims. The man who worked on this told me that he was even subjected to physical threats and abuse, including malicious and obscene phone calls from the citizens who were exercising their right to protest, but in a very irrational way. This person reported to me that the Optimist Club will never again try to establish any kind of group home if they have to face the citizenry of Overland Park.

There is a great need for group homes all over the state. There are people buried in the state hospitals who could come back to the community if they had supportive living services. 16 areas of the state, representing 42 counties, have no residential services for mentally ill people, and the other areas are woefully short of meeting the needs. In the 16 areas without residential facilities, it has been estimated by Mental Health and Retardation Services, that there is an immediate need for 280 spaces. In a survey of 78 families across the state, 58% reported that their ill member needed to be in a group home. They will probably not be established as long as ill informed, prejudiced neighbors are allowed to shout down places for group living. Of the 1600 beds lost at Osawatomie State Hospital, only 405 have been replaced in communities, and of these 405, only 15 are in group homes.

In addition to the need for residential spaces, there needs to be a massive educational effort to teach people the truth about mental illness so that there is less fear.

But attitudes are not changed overnight. In fact, it usually takes at least a full generation. In the 1960's national legislation was passed to make housing available in any neighborhood to minorities and yet today, 20 years later, in a landlords organization that I belong to, I still hear people talking about ways to avoid renting to minorities. The same thing applies to the minority of handicapped people. As long as we allow citizens to tell other citizens where they can't live, we are supporting a tyranny by the majority.

People are fearful that group homes will reduce their property values. This is absolutely untrue and there are studies to prove it. I am a professional real estate appraiser, and have been for 18 years, and I have never heard of a single case where a group home of any type reduced surrounding property values. The general public, because of ignorance and a bad image projected by the media, are fearful of people with mental illness. The truth is that they are no more prone to violence than is the so called normal population, in fact, they tend to be withdrawn rather than aggressive.

I have a 26 year old son who is mentally ill and will need a group home environment so that he can live in the community. When my wife and I moved into our house nobody had the right to protest. Nobody told me I couldn't live there. I want the same rights and privileges for my son. He is not a dangerous person. He is only an ill person. He is not a second class citizen and I don't want any loud neighbors to make him one. This bill is needed and needed badly to get residential opportunities for people that will not otherwise have them.

President



Howard W. Snyder