

## LC14 – Final Submission

Our community partner was Hamilton County Developmental Disabilities Services. Their mission was to promote and support opportunities for people with intellectual and developmental disabilities to live, work, learn, and fully participate in their communities. These services range from assisting clients in finding employment opportunities to organizing homemaker personal care to medical case management. Though advances have been made in the treatment and medical care of people with IDD, there are still issues that need to be discussed. In particular, the social determinants of health that they hoped to address were access to individualized care, communication challenges, and approaches to behavioral support both in the community and medical context.

COVID-19 impacted the execution of their work by making it more difficult to provide services for individuals with IDD/DD. Part of our project were to distribute surveys to different groups in the specific community we worked with, however, COVID required us to deliver these via email which may not have been accessible to everyone at that time. Interviews with advocates and patients with intellectual and developmental disabilities were also conducted virtually, and there would be times where technical problems hindered our ability to properly communicate and have a proper discussion with our interviewees.

COVID also impacted our service learning experience by disallowing us from being able to meet in person with our community partners and inhibiting our ability to see the population that we are serving in person. Some examples of the negative impact of COVID were that meetings with our community partner, Hamilton County DDS, were virtual. Email communications were slow and frequent follow-ups were limited, affecting the timing of our project schedule and efficiency of coordinating events. We hoped to visit the clinic that served many patients with IDD, but the visits were repeatedly delayed and rescheduled because of limited communication methods.

COVID has severely decreased the amount of community services available to this community. Many events have had to be canceled, shifted to a virtual format, or decreased in the amount of allowed members in attendance due to safety restrictions. Additionally, it can be even more challenging for our community partners to solicit engagement and community-building in a virtual format compared to an in-person one, and our community partners feared that some of the individuals they serve might “fall through the cracks.” Community services are vital to the IDD population because they often like to gather with others like themselves so they can talk through their struggles with others that understand. There is a strong sense of community among the IDD population and COVID has taken away opportunities for them to gather, in addition to making everyday tasks like doctor’s appointments more formidable and stressful. Community resources also provide valuable information to those with IDD and their caregivers, like workshops on advocacy and working through the trauma these individuals experience. Lack of this important information can further isolate those with IDD and their caregivers from the help and information they may need.

Many members of the IDD community are considered susceptible to COVID and exercise caution when out in public, so during the COVID pandemic many have stayed inside and away from others. This has the potential to increase mental health issues within this community and exacerbate already existing conditions. As with many fields, the Hamilton County Developmental Disabilities Services is understaffed and underfunded, and many requests for

help from individuals with IDD or caregivers fall through the cracks. During COVID, this pressure to assist those with IDD has increased tenfold while the staff and resources available has not. Many people with IDD have unique situations and require personalized care, but it has been difficult for HCDDS to work with people virtually and find adequate resources to compensate.

HCDDS provides incredibly valuable resources, opportunities, and experiences for the IDD community. Since the HCDDS receives most of its funding through tax levies, federal funding, and Medicaid, it is incredibly important to ensure that local and funding to the organization matches what they need to support those in our community with IDD. Students and physicians can educate the Cincinnati government about the goals and financial needs of HCDDS, especially related to programs that would benefit people with IDD both in the healthcare setting. Examples of programs could include providing resources to clinicians for communication supports, trauma informed care, and behavioral supports. Including details about the current need and lack of support for this patient population would be very important to include as well. There are very few programs and competent healthcare systems that can provide quality care to this patient population, and stressing the need for further implementation of the above described programs are important, but we also need to emphasize that those actions need to be widespread enough to accommodate the significant IDD population in the Cincinnati area. By building this infrastructure now, the younger IDD population will have a strong, tested and reformed set of programs in place that can continue on into the future.

Additionally, given the continued risk that COVID can pose to everyone, and particularly those with IDD, the city of Cincinnati should continue to promote vaccination. Since the new bivalent vaccination available, the city has the opportunity to host vaccination events and increase vaccination rates across the city. Educating the city government on the continued importance of promoting vaccination would benefit the health of our community as a whole and could also accelerate the process of getting HCDDS events back in-person. It would be pertinent to mention the burden lack of in-person interaction places on this community specifically. Communication is a common challenge when providing care to these individuals, but it is further worsened by lack of face-to-face interaction. Without proper communication, the healthcare provided to individuals with IDD is not optimal.

Overall, patients with intellectual and developmental disabilities face a number of unique challenges in the healthcare field. Few people outside of the IDD community are aware of these issues, including members of the healthcare field. Educating city officials on the challenges that people in the IDD community face can increase awareness and may help initiate changes in the health care field and across our broader community. Lasting change can happen with continued funding and support.

### **Additional resources**

<https://catalyst.nejm.org/doi/full/10.1056/CAT.21.0051>

<https://www.sciencedirect.com/science/article/pii/S193665742030100X>

<https://www.cdc.gov/ncbddd/humandevlopment/COVID-19-Materials-for-People-with-IDD.html>

<https://www.cdc.gov/ncbddd/humandevdevelopment/documents/covid-easy-read/CDC-RTI-ProviderGuide-508.pdf>

<http://annualreport.hamiltondds.org>