30 Years After the ADA, Access to Voting for People with Disabilities is Still an Issue

The Americans with Disabilities Act was heralded as landmark legislation, offering people with disabilities protection from discrimination while guaranteeing their rights. But three decades after the ADA was signed, activists and advocates say people with disabilities are still facing barriers exercising a fundamental right: the right to vote.

"Under the law, every option that a non-disabled voter has also has to be accessible to voters with disabilities."

July 26th just marked the 30th anniversary of the signing of the ADA, falling in the same year as what many voters see as one of the most important elections of their lifetime. But Americans with disabilities still face access issues when they go to vote, including inaccessible polling locations, under-trained poll workers and nonworking voting machines for people with disabilities.

As the coronavirus pandemic adds another layer of uncertainty over the safety of voting in person during the November election, disability rights advocates are even more concerned. People with disabilities make up the country’s largest minority group, with 61 million Americans living with a disability.

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What a year it has been for RICV’s Independent Living Specialist, Maria Barragan. She could not have imagined last August when she began to work at RICV, the adventures which lie ahead--from an office move to a new location--to the COVID-19 pandemic. Yet, she remains committed to serving RICV consumers and the disability community.

Despite twelve month of challenges, Maria’s success can be attributed to her love of listening, a skill she acquired at an early age. She learned about the world around her through the stories of family guests who would visit and share stories of life far beyond Mexico and California’s Central Valley. According to Maria, they brought tales of other places, people, and ways of living.

“They were a vivid reminder there was more to life than what I called “home,” she shared. “In listening to them, I not only learned to enjoy listening to others, but also to wonder about what it would be like to be in their situation, in their side of the world.”

From West Hills Community College, to Fresno Pacific University, to Fresno State University, Maria’s curiosity to learn and listen became a tangible force. With the help of friends, Maria discovered she could use her gift of listening to help others.

“Enrolling in psychology classes helped Maria to realize she wanted to help others to have a better understanding of themselves. As she contemplated graduate school, Maria knew providing services to people with disabilities because not only could she relate, but she understood the ambiguity faced with life goals, expectations, and societal roles.

“AS A PERSON WITH A DISABILITY, SOMETIMES THE WORLD CAN APPEAR GIGANTIC, AND SUFFOCATING,” she explained. “BUT IF WE LOOK UP, WE MIGHT SEE WE ARE A LITTLE TALLER, STRONGER, AND MORE COURAGEOUS THAN WE BELIEVE.”

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Five Things to Know About COVID-19 and Persons with Disabilities

The COVID-19 coronavirus pandemic has everyone concerned, and taking steps to control it. But people with disabilities, including anxiety and chronic diseases, face additional risks and consequences. Here are five points to keep in mind about how the coronavirus outbreak affects people with disabilities:

1. The people most often at serious risk are, by some definition, people with disabilities.

While simply having a disability probably doesn’t by itself put someone at higher risk from coronavirus, many persons with disabilities do have specific disabilities or chronic conditions making COVID-19 more dangerous for them.

Unfortunately, any natural anxiety persons with disabilities might have about the COVID-19 pandemic is likely made worse every time news reports and official statements seek to reassure everyone by saying “only” elderly and chronically ill people are at serious risk. It feels awful to hear people reassure each other that coronavirus isn’t that scary because it will mainly hurt and kill “high risk” people.

At the same time, the connection between people with pre-existing medical and disability conditions could become blurred, and people with disabilities and those who are chronically ill could be unfairly stigmatized. Everyone should be on guard against any fear-based impulse to ostracize or confine people who have, for example, chronic coughs or breathing difficulties that are normal for them, and are not by themselves evidence of exposure to COVID-19.

Because of all these and other factors — both active and anticipated — people with disabilities may be experiencing a higher level of anxiety about COVID-19, and anxiety poses risks of its own.

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COVID-19: Fight Isolation Among People with Disabilities

People with disabilities often experience isolation and exclusion. Physical distancing during COVID-19 may make it harder than ever with disruptions to support services and information. Here’s how we can work together to make it better during the COVID-19 pandemic:

Connect and Communicate - We all need to make a plan to regularly stay in touch during physical distancing. Talk on the phone or through the door. Write a letter. Send an email. Discuss shared interests. Ask friends and family “How are you doing?” or “Do you need anything?”

Share Experiences - Watch the same movie or tv show, then talk about it. Use technology to go on virtual tours of museums or national parks. Or have a virtual game night.

Expand Community - Who else can you connect with? Have their information available in order to maintain contact through phone or video calls. Zoom in on RICV’s Peer Support Group, attend virtual Disability Advocacy meetings, or connect with the Be About It youth group.

Set Up Safety Nets - Have an emergency plan, for example who else could help if you got sick? Or if the electricity went out?. What if you have to evacuate for a wildfire? Encourage everyone to have a plan. Connect with others to formulate your plans.

Use State and Local Resources - Connect to 833-544-2374 or 211. Also, California’s State Council on Developmental Disabilities for more activities and tips. Visit: scdd.ca.gov
About the Voice Options Program

Through a partnership with the California Public Utilities Commission’s Deaf and Disabled Telecommunications Program, the California Department of Rehabilitation’s Voice Options program offers eligible Californians who are unable to speak, or who have difficulty speaking, with a free speech-generating device. The goals of this program is to ensure full and equal telephone communications access for all Californians with disabilities.

When it comes to choosing a speech-generating application, it is imperative to select one that highlights your strengths, skills, and fully meets your needs without leaving you feeling restricted. Through this program, any eligible Californian referred to a Voice Options provider will have the opportunity to test five different speech-generating applications for up to 14 days.

The five applications provided are: GoTalk NOW Plus, LAMP Words for Life, Predictable, Proloque4Text, and TouchChat HD with Word Power.

Getting Started

STEP ONE: Contact RICV at 559-221-2330 to schedule an orientation and demonstration.

STEP TWO: Participate in a Voice Options orientation and receive a speech-generating device demonstration.

STEP THREE: Take a short-term loaner iPad for a 2-14 day trial period. Practice using the preloaded speech-generating applications to help you determine which application works best for you.

STEP FOUR: Receive a new iPad with one speech-generating application of your choice downloaded on the iPad.

Webinar will offer a basic Zoom training

Zoom is an online audio and web conferencing platform which has become an integral tool for staying connected during the COVID-19 pandemic. People use it to make phone calls or participate in video conferencing meetings. An important technology, Zoom has allowed RICV to continue to provide services and stay connected with our consumers and the community we serve.

RICV’s Assistive Technology Specialist, Gerald Jones, is offering a training on Zoom for Beginners on Thursday, August 13th at 2 p.m. He will cover getting started with Zoom, how to participate in a webinar, how to live stream, hold meetings, and conduct meetings. He will also offer additional Zoom tips and tricks. Contact Gerald via email at gjones@ricv.org to participate.
Stay Safe.  
RICV Has You Covered.

As COVID-19 cases continue to rise, it is more important than ever to wear a mask and use hand sanitizer if you have to go out in public.

To help, RICV has masks, gloves and sanitizer available. If you need personal protection equipment (PPE), give us a call at 559.221.2330. Leave a message stating your need of PPE. We will call you back to either set up a pick-up time, arrange delivery, or mail you a package of PPE.

We encourage continued physical distancing, mask usage, and frequent hand washing. Remember, RICV has you covered.

Get Cooking in August

Virtual Cooking for Independence classes have been popular and will continue on Tuesday, August 11th and Tuesday, August 25th at 2:30 p.m. Special guests and menu items will be announced.

Please contact Tanesha Morris at tmorris@ricv.org for details and the Zoom link.

RICV Cares: Assistance Available

RICV is dedicated to empowering the independence of people with disabilities during these unprecedented times surrounding the COVID-19 global pandemic.

If you or someone you know is a person with a disability experiencing a hardship due to the pandemic, please visit our website, www.ricv.org. Click on the RICV Cares icon. You will be asked questions regarding food, durable goods, hygiene products, and technology. Complete and submit the form requesting assistance. A RICV Team Member will contact you within 48 business hours.

Disaster Readiness Program Supports Persons with Disabilities

The program will enable RICV to provide qualifying customers who use electrical medical devices with access to backup portable batteries through a grant, lease-to-own, or a low-interest financial loan program. Transportation resources, lodging and food, emergency planning, education, and outreach about PG&E programs such as Medical Baseline will also be part of the program. Applications for portable backup batteries will be available through RICV or online. Individuals who use life-sustaining electrical support will be the highest priority. Individuals can visit disabilitydisasteraccess.org or call RICV at 559.221.2330 for help with the application process.
Preparedness Workshops via Zoom Include Incentives for Participation

RICV will be hosting a new webinar series called Learn Preparedness Now/Listos Ahora! Join us on Zoom every first and third Thursday of the month from 2 to 3 PM and learn more about how you can be prepared for any emergency or disaster as a person with a disability.

Our first workshop in the series will include a guest speaker from PG&E discussing the new changes they are making this year to help the disability community be better prepared for public safety power shutoffs.

In partnership with PG&E and CFILC, RICV is now providing assistance to anyone who uses assistive technology or medical equipment that would be affected by a power outage because of extreme weather or wildfires.

For every webinar attended, you will have the chance to earn one ticket to be entered into a raffle to win a grand prize at the end of the year for a $100 visa gift card, a to go bag packed with emergency supplies and a battery powered lantern flashlight. The more workshops you participate in, the better chance you have of winning all of this!

We will also have additional monthly giveaway prizes to assist any individuals on working to be better prepared for any emergency or disaster with the supplies, information and tools to continue living independently with confidence from this preparedness education offered online until the end of December.

Call 559-221-2330 or email ctran@ricv.org to register.
“Nobody should have to make a choice between being able to cast their ballot and protecting their health,” said Michelle Bishop, who works on voter access initiatives for the National Disability Rights Network.

Barriers to voting are common for people with disabilities.

The ADA’s passage brought with it the requirement that state and local governments make voting accessible, including voter registration and voting locations for both early voting and Election Day.

The ADA accessibility checklist for polling places includes guidelines for everything from parking spaces to ramps to ensure people with disabilities can go to the polls.

But often, according to a study done by the Government Accountability Office (GAO), polling places aren’t in full compliance with requirements.

The GAO surveyed a sample of 178 polling locations in the 2016 election and found that 60% of them had at least one potential barrier to access a voting location, the most common of which were related to ramps, signage for accessible paths, and parking or path surfaces. That is down from 2008, when about 73% of the 730 surveyed locations had some potential architectural barrier.

Additionally, the GAO surveyed 137 voting areas in its 2016 study and found 65% had potential barriers to using at least one of their accessible voting systems, such as voting stations and ballot-marking machines that didn’t accommodate persons using wheelchairs.

Of the sites where the GAO could also examine whether there was an accessible voting system present, most polling places had them. But taken together, the GAO study in 2016 found that only 17% of the surveyed sites had completely barrier-free access for people with disabilities.

“It has real consequences for voters on Election Day, when you show up to your polling place, and the equipment that’s accessible to you isn’t even ready, or the poll workers haven’t been trained on it,” Bishop said.

Lou Ann Blake, who works on voting as deputy executive director for blindness initiatives at the National Federation of the Blind, said a survey conducted by the NFB shows one of the biggest issues experienced at the polls for blind and low-vision individuals is workers untrained on machines.

“More and more often people are just giving up and voting with assistance … so the trend in our surveys has been fewer blind voters are voting independently at the polls,” Blake said.

The Help America Vote Act of 2002 requires that voters with disabilities be able to use an accessible voting station that affords them the same right to a private and independent vote as non-disabled voters. Voters with disabilities are not afforded that same treatment when they have to rely on a poll worker or other person to assist them with voting.

Rebecca Cokley, director of the Center for American Progress’ Disability Justice Initiative, recounted an experience voting in Washington, D.C., when a poll worker asked for her identification. Registered voters are not required to show ID to vote in D.C.

“I honestly think it’s because I’m little,” Cokley said. “People in front of me were not asked. People behind me were not asked. And I was like, ‘What?’”

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COVID-19 may make voting even less accessible.

More than 4.5 million Americans have been diagnosed with COVID-19, and deaths from the virus have now surpassed 146,000. Health experts know that the virus poses more of a danger to people with certain disabilities and underlying conditions, which makes whether to vote in-person come November a health decision for many people.

Mail-in voting is in the spotlight as a potential solution to reducing the virus spread that comes with big crowds and in-person interactions at the polls. It is generally heralded as a positive thing, expanding the options to vote for Americans, including many disabled voters. But mail-in voting isn’t always accessible to voters with disabilities, Bishop said.

Blind and low-vision people, for example, may be unable to fill out a paper ballot and require the accommodation of an electronically delivered ballot that can be filled out by computer, printed and then returned, or may require an accessible voting machine to be used in person.

"Over 30 years ago, people with disabilities threw themselves out of their wheelchairs and climbed up the Capitol steps on their hands to fights for passage of the ADA."

For those who need to vote in person, the pandemic further complicates things. The number of polling places may be dramatically reduced, so people have to travel further distances to reach them, Cokley noted. Accessible public transportation may be operating on limited schedules. Fewer poll workers — who draw heavily from older populations more affected by the coronavirus — may be volunteering, with less experience or training.

Bishop said voting by mail, in-person voting, early voting and same-day voter registration need to be options this year and during every election.

"It’s making every option as accessible as possible, which, oddly enough is what we recommend any year, not just during COVID-19," Bishop said. "Under the law, every option that a non-disabled voter has also has to be accessible to voters with disabilities. So it’s really just bringing to light some of the things that we should have been doing all along."

Cokley said that the coronavirus pandemic may cause the country to rethink voting methods altogether, because while experts still don’t know the full extent of long-term effects of the virus, some are experiencing lung damage, chronic fatigue, neurological problems in children, and other conditions.

"COVID’s going to result in the largest boom in the disability population since AIDS and HIV, if not bigger," Cokley said.

'You don't ever get to rest': What the fight looks like going forward

In March 1990, disabled activists who were gathered in Washington, D.C., to push for the passage of the ADA abandoned their assistive devices to crawl up the steps of the Capitol Building in a visible demonstration of the inaccessibility they faced in public spaces and the need to urgently move the legislation through Congress.
Five Things to Know About COVID-19 and Persons with Disabilities

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2. It can be harder for persons with disabilities to take steps to protect themselves from the COVID-19.

Expert advice on preparing for an outbreak makes logical sense and should be followed as much as possible. But many persons with disabilities and chronic illnesses’ past experiences with medical bureaucracy and obtaining responsive, flexible assistance can make persons with disabilities skeptical they will be able to follow all of the recommended advice successfully.

Some people with disabilities can’t isolate themselves as thoroughly as other people, because they need regular, hands-on help from other people to do everyday self-care tasks. Also, laying in supplies of groceries can be difficult for some people with disabilities to do, when shopping of any kind is always extra taxing, and they rely on others for transportation. For some, even cleaning house and frequent hand washing can be difficult due to physical impairments, environmental barriers, or interrupted services.

Those with chronic health conditions worry about obtaining the extra supplies of medications recommendations. Depending on the medications, and what kind of health insurance a disabled person has, just getting regular refills in a timely manner can be a challenge, even when there isn’t a public health crisis.

3. COVID-19 coronavirus threatens not only people with disabilities’ health, but their independence.

Some people with disabilities depend on regular help and support from others to maintain their independence and live in their own homes rather than in nursing homes, group homes, and other institutional settings. Outbreaks of communicable disease can disrupt these services. Aides and caregivers may become sick themselves, or the risk of catching or spreading illness may require aides and caregivers to stay home, interrupting the services for persons with disabilities.

When taking into account centralized care in institutional facilities vs. decentralized home and community-based services, many disability activists contend the purported safety of nursing homes and group homes for elderly and persons with disabilities is overrated. COVID-19 highlights the fact despite the apparent advantages of more controlled, medically-supervised environments, there are also health risks involved in housing people with health vulnerabilities in hospitals and other kinds of care facilities.

Congregate care facilities are not necessarily safer for elderly and persons with disabilities as they are the opposite of isolated. Facilities may have access to more medical resources to treat and control the illness but, a single person with disabilities at home, with one or two caregivers, may actually benefit from their relative isolation. Health and safety as related to living arrangements, looks different for each individuals depending on his/her disabilities.

The risks of COVID-19 for persons with disabilities don’t run only in one direction, or take only one form. The greater risks may not be from actual disease, but from the disruptions in services and routines it can cause.

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2-1-1
United Way 2-1-1 provides free and confidential health and human services information for people. 2-1-1 is available 24 hours a day, 7 days a week to connect you with the resources and information you need. Whether you are in crisis, or need a little support, just call 2-1-1 for help.
COVID-19 has the potential to add new perspectives and urgency to a number of long-time disability issues. People with disabilities and chronic illnesses regularly struggle to carve out flexible work arrangements, including reasonable accommodations and telecommuting. Due to COVID-19, such measures are now being looked at in a different light by many employers, as it affects all workers, not just those with disabilities and ongoing health conditions.

COVID-19 highlights the fact despite the apparent advantages of more controlled, medically-supervised environments, there are also health risks involved in housing people with health vulnerabilities in hospitals and other kinds of care facilities.

Controlling COVID-19 and other contagious diseases requires immediate access to care, with a minimum of red tape and affordability barriers. When people have to weigh the possibility of huge bills resulting from taking prudent preventative steps, public health for everyone suffers.

You can help a lot just being aware and sensitive to the specific risks and obstacles faced by persons with disabilities during the COVID-19 pandemic.

It’s not unreasonable for persons with disabilities to be concerned—along with worries about getting sick, there is the concern of whether the healthcare system will provide the proper care and treatment. Employers, teachers, health care providers, families, and friends can help by allowing people with disabilities practical and emotional support as needed.

If you live and work with a person with disabilities—or if you assist, care for, or serve people with disabilities and/or chronic health conditions—take the risks to persons with disabilities seriously and be extra careful with your own precautions so you can remain healthy and able to help.

Learning to listen paved the way for Barragan’s road of compassion and commitment to serve

Maria went on to obtain her BA in Psychology, followed by a Master of Science in Rehabilitation Counseling, and even interning at RICV.

Now, as part of the team at RICV, Maria explains her first year as a rollercoaster ride and feels she has been challenged by working remotely from home and admits it has at times been stressful and lonely.

“What I miss most is the sound of consumers coming to the office,” she said. “I miss having opportunities to greet them and learn about them.”

Maria feels nothing compares to the feeling she experiences when a consumer thanks her for listening, providing them information, or helping them apply for a particular program.

There is no greater satisfaction than to know I helped others to have a better day, to be in a better mood, and to feel connected to others,” she explained.

As she tries to think of one highlight from her first year of work with RICV, she struggles. But she does admit working at RICV has allowed her to think on her feet, and discover to broad reach of her beliefs, flaws and talents. Through it all—she does acknowledge who inspires her the most.

“Consumers have been my best teachers,” exudes Maria. “They bring out of me the courage to step out of my comfort zone. I have learned the least I can do is to be as humane as possible, to listen with an open mind, and to give to others with a caring heart.”
"It's not right that there are voters with disabilities who have to advocate for themselves to be able to cast their ballots accessibly, privately, and independently. But we've got to do what we've got to do if we want to see real change..."

Bishop said Americans with disabilities must remember that spirit and advocate now for their right to vote going forward.

"Over 30 years ago, people with disabilities threw themselves out of their wheelchairs and climbed up the Capitol steps on their hands to fight for passage of ADA. We have to keep that same fight alive 30 years later," Bishop said. "Unfortunately, you don't ever get to rest."

Andraéa LaVant, who works in consulting on disability inclusiveness, will be voting in Arizona for the first time after moving there, and is unsure if she'll vote in person due to safety reasons but had planned on it. Because she is unfamiliar with her new polling place, LaVant might decide to scope it out in advance to make sure it is wheelchair accessible, though she's had good experiences in the past.

If she did wait for Election Day instead of voting early and arrived to find that she couldn't access her polling place, LaVant said, "I don't know what I would do. I would be devastated, especially this year."

Blake, too, has had to expend extra energy making sure she is able to vote. Blake says in the past she has requested the use of an audio ballot — a feature of an accessible voting machine that uses headphones to read aloud a ballot for those with visual disabilities — but the poll workers at her voting location in Maryland did not know how to set it up. Blake had to insist on the accommodation and explain it to the poll workers before it was figured out. She has used Maryland's electronic delivery system since 2014 instead.

Bishop said people with disabilities shouldn't have to take these extra steps to be able to vote; the process should be as seamless as it is for those without disabilities.

"It's not right that there are voters with disabilities who have to advocate for themselves to be able to cast their ballots accessibly and privately and independently," Bishop said. "But we've got to do what we've got to do if we want to see real change, and so I hope that everyone will cast their ballot this November."

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