



Disability Rights New Mexico

Services and Needs for people with DD/MI

Crisis Intervention Team (CIT) versus Police

Personal Experience

- Police with 6 police cars and staff in uniform with guns drawn, live ammo, yelling at my son and chasing him over fences in the neighborhood during a psychotic episode. My son received an emergency injection of Thorazine and was belligerent with staff and family.
- CIT dressing in everyday jeans and shirts, calmly sitting down and talking with my son, offering him a cigarette after a psychotic episode, and quietly offering a seat in his car, driving him to the psychiatric ER. Treatment began with his approval and family and staff were seen by him as supportive.

Some Statistics

DD/MI

- 40% of people with Developmental Disabilities have co-occurring serious mental illness, sometimes called “Dual Diagnosis”.
- 90% of people with Developmental Disabilities have been sexually abused at some point in their lives. 49% will experience 10 or more abusive incidents, leading to a need for trauma-informed care. Neglect, bullying, restraint and other traumatic events may spark more mental health symptoms.
- Many people with Down’s Syndrome have Anxiety, ADHD, Oppositional Disorder, Obsessive Compulsive disorder, and Depression often in reaction to loss of a key attachment figure.
- Many people with Down’s Syndrome have Alzheimer’s Dementia as they age, sometimes as early as age 30. About 50% of people with Down’s Syndrome have Alzheimer’s dementia in their 60s.
- One out of every 54 people has autism as of 2018
- People who have autism are 3 times more likely to have schizophrenia

Behaviors are Communication with People with DD/MI

Example of person at LLH&TS -example of red flag!



- Nonverbal
- Eloping
- Staff was providing BIP, restraint, and antipsychotic medication.
- One staff was found to be sexually abusing this man.
- Whenever perpetrator/staff was around, person attempted to elope.
- Person was communicating with his behavior by eloping in the only way he knew how.

Kids with DD/MI

Special education scenarios

- School Resource Officers-
- handcuffing and basket holds or chicken wing holds



Children in special education



- A 5 year old was touching other children inappropriately. The school refused to evaluate him for a 504 for special education. The plan was to isolate him from the rest of the class. The school wrote him up for sexual harassment.
- Child pulled out his eyelashes and hair when he was isolated.
- Parent had a neuropsychological evaluation done and realized from a past head injury when a TV crushed his skull that although he healed and gained back his language that his frontal lobe and executive function was still damaged which interfered with his sense of boundaries.
- School made student eligible for TBI in special education.

Children with Special Education

DD/MI issues

- A 7 year old girl with 2 autism diagnoses and extreme behaviors came back from an RTC to her home in a rural school district.
- The school district ignored the autism diagnoses and placed the child in an emotional disturbance classroom, saying her diagnosis was now bipolar disorder.
- Because the school district did not address her sensory integration issues and BCBA needs, the student ran away every day, and was picked up by the police.
- Lack of FAPE led the child into the school to jail pipeline.



Special education Children

DD/MI



- A middle schooler with autism hit a School Resource Officer and ran from him.
- The officer referred him to the probation office.
- The JPO recognized the child had self stemming behavior and other characteristics of autism, and diverted him back to the classroom.
- School to Jail Pipeline averted.



Residential Treatment Centers



- An out of state RTC During COVID discharged a child back to NM with very few supports.
- Large NM RTC, Desert Hills closed and sent 12 children with DD/MI/ and deafness to out of state placements.



Adults with DD/MI in NM

Examples of problems in services

- Acute Care- Patient with Pica behavior drinking coffee straight out of the pot with no supports from nursing staff.
- Long Term Care- BHI with Carol Peterson's son dying within 24 hours of admission.
- Boarding Homes- Many people transition from BHI to boarding homes rather than being homeless. 2 men died a few years ago due to lack of standards and oversight from the boarding home operators putting up a shed for their home with no ventilation from the propane. Boarding homes are beginning to develop certification, but still not completed.

One of the Best Resources in NM for DD/MI

Behavior Support Consultants



- DD Medicaid Waiver-Can access Behavior Supports
- Mi Via Medicaid Waiver-Can access Behavior Supports
- New Supports Waiver for the waiting list-Can Access Behavior Supports
- Community Benefits with Medicaid- offers the service of behavior supports, but no one is utilizing it.

Recommendations From DRNM:

DD/MI- University level training and ongoing professional development

- Board Certified Behavior Analysts-BCBAs
- General education teachers
- Educational assistants
- Psychiatrists, Pediatricians, Psychologists, therapists
- Social Workers and CYFD staff
- Police and Crisis Intervention Teams
- Care Coordinators
- Providers



Recommendations from DRNM Continued

Systems Work-Delivery system needs to be rethought



- Person Centered Planning with self direction self determination in mind.



- Flexible Funding-regulations between systems need to allow for seamless movement between systems so that funding can be barrier free for reimbursement to providers and easy to access for parents whichever system they choose to utilize for care.
- Ensure coordination between DD Systems, Medical Services, Mental Health services, Schools, and other systems so that funding, services, and housing are readily available to families.

