My name is Cammie Funston. My daughter, Charity, is an adult with a disability. She works in a sheltered workshop and lives in a group home. I have great peace of mind when Charity is cared for by loving and qualified staff. But, because of reimbursement rate cuts, her service agency has dangerously high staff turnover rates and staff shortages. I say dangerous because direct service staff are required to manage medications, prepare meals, assist with toileting and hygiene, deal with aggressive behaviors, transport clients, and provide 24/7 care. That is a great deal of responsibility and I want my daughter's staff to be paid fairly for it. It's difficult to attract and maintain skilled direct care staff, even when they are very devoted and love their work, if they cannot earn a living wage. And, it is impossible to adequately care for this high-needs population with inadequate staff.

Staff turnovers create a lot of anxiety for Charity. I don't know about you, but I get a little stressed out when my routine is changed. For persons with intellectual and developmental disabilities (IDD), who rely on routines for healthy functioning, that stress is considerably exaggerated. Charity, like many people with IDD, has a duo-diagnosis. In addition to Down Syndrome, she has mental illness. This makes change doubly difficult for her. Her bi-polar disorder, normally well managed by medication, is guaranteed to flare when a staff person she has become attached to leaves or a new staff person comes into the home. She may act out by becoming aggressive, or she may be overcome by uncontrollable crying. She hates feeling out of control this way, but she can't help it.

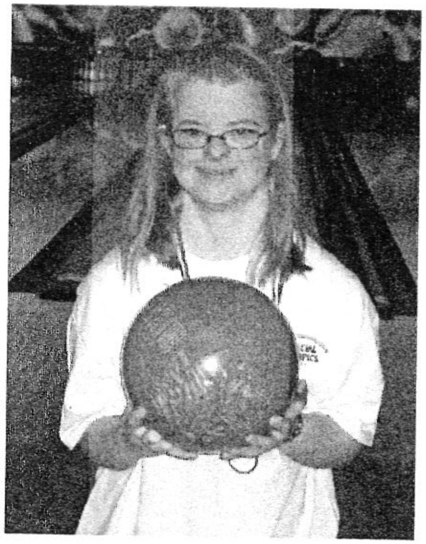
Speech and language difficulties are also part of Charity's syndrome, and she becomes very frustrated when she cannot understand others, or make herself understood to them. This is another reason why it is so important for her to have a consistent relationship with staff that is familiar with all her idiosyncratic language. She needs a care provider who understands that when she says *midnight* – she means any time after dark, and *yesterday*, she means any time before now. When she says *weekend,* she means calendar, *kite* means umbrella, and *he*, may mean she. These are just some examples of her language deficits and adaptations in temporal terminology, multisyllabic words, and pronoun confusion.

Charity did not choose to be born with Down Syndrome, nor did I plan to have a disabled child, and yet, here we are. When she was diagnosed, I quickly came to believe that she was sent to teach us about kindness, and compassion, and patience. I believe she is a gift – but she will never become a fully independent adult. Finally, I believe that in a civil society we have a moral imperative to care for the most vulnerable among us. So, not just for Charity, but for the more than 45,000 Kansans with IDD living in the districts you serve and represent, I ask you to support Senate Bill 173. Thank you.

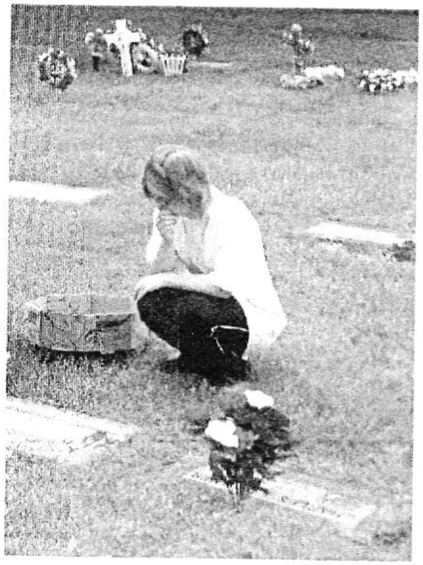
This is Charity

Charity has a boyfriend

Charity is an athlete



Charity cries



Charity laughs

Charity votes