

Centers for Independent Living (CIL) (CFDA No. 84.132)

I. Legislation

Part C, Chapter 1 of Title VII of the Rehabilitation Act of 1973, P.L. 93-112, as amended (29 U.S.C. 796e) (expires September 30, 1997).

II. Funding History

<u>Fiscal Year</u>	<u>Appropriation</u>	<u>Fiscal Year</u>	<u>Appropriation</u>
1979	\$2,000,000	1988	\$25,500,000
1980	15,000,000	1989	26,000,000
1981	18,000,000	1990	26,666,000
1982	17,280,000	1991	27,579,000
1983	19,400,000	1992	29,000,000
1984	19,400,000	1993	31,446,000
1985	22,000,000	1994	36,818,000
1986	22,011,000	1995	40,533,000
1987	24,320,000	1996	41,749,000

III. Analysis of Program Performance

A. Goals and Objectives

The purpose of the Centers for Independent Living (CIL) program is to maximize the leadership, empowerment, independence, and productivity of individuals with significant disabilities, and to integrate them into the mainstream of American society. The CIL program provides grants for consumer-controlled, community-based, cross-disability nonresidential private nonprofit agencies that are designed and operated within a local community by individuals with disabilities and provide an array of independent living services.

B. Strategies to Achieve the Goals

Services Supported

In FY 1996, over 137,000 individuals received Independent Living (IL) services and another 207,249 received information and referral services through the CIL and the IL State Grants programs. CIL staff and volunteers help increase access throughout the country by encouraging local transportation providers to convert to a majority of mainline accessible buses to meet the transportation needs of individuals with mobility impairments; developing extensive volunteer networks based at the CIL; creating accessible materials for individuals with significant visual impairment; developing innovative programs for individuals with mental illness, such as self-help and housing services for individuals who are homeless and peer counseling programs for individuals in locked wards; developing and managing local and state equipment loan and revolving fund programs; developing and operating a wide variety of consumer-controlled attendant-care approaches and funding strategies; counseling individuals with significant disabilities and their families as to their rights and the availability of benefits regarding

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appropriate school options and medical support; educating older individuals with emerging disabilities on independent living techniques and skills; and organizing and coordinating Statewide Telecommunication Device for the Deaf (TDD) services for individuals who are deaf or hard of hearing.

Strategic Initiatives

All centers must have a governing board composed of a majority of individuals with significant disabilities. All projects must complete a self-evaluation and audit by an independent auditor annually. Each year also at least 15 percent of CILs must receive an on-site compliance review by a team composed of federal and nonfederal reviewers.

Funds are allocated to states in accordance with their population, except that no state may receive less than the total amount received in FY 1992, and each state is provided a minimum allotment of \$462,600 or as close to this amount as funds allow. Between 1.8 and 2 percent of the funds in excess of the funds appropriated in FY 1993 for this program must be used for grants or contracts to provide training and technical assistance to centers for independent living and statewide independent living councils.

C. Program Performance—Indicators of Impact and Effectiveness

Statutory evaluation standards and compliance indicators established by the Department are used to measure the extent to which centers have achieved program objectives. These standards and indicators evaluate program performance in the following areas: philosophy, including client control and equal access; provision of services on a cross-disability basis; support of the development and achievement of the independent living goals chosen by clients; advocacy to increase the quality of community options for independent living; provision of independent living core services; resource development; and community capacity-building activities such as community advocacy, technical assistance, and outreach. RSA reviews compliance with the indicators before funding continues each year. The grantees must propose how to correct any areas of noncompliance before continuation funding is granted.

IV. Planned Studies

A study is planned to examine the relationship among RSA's three Independent Living programs, the resources committed to advocacy versus direct services, the consumer outcomes (e.g., the extent to which programs contributed to the consumers' achievement of their independent living goals), and the extent to which State Plans for Independent Living reflect the needs of clients.

V. Sources of Information

1. 1992 Annual Report on Federal Activities Related to the Rehabilitation Act of 1973, as amended (Washington, DC: U.S. Department of Education, 1992).
2. Program files.
3. Rehabilitation Services Administration Information Memorandum 96-23.

VI. Contacts for Further Information

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