Dear Sunset Advisory Commission:

My name is Gabriel Cazares, and I am a member of the board of directors for the National Federation of the Blind of Texas. (http://www.nfbtx.org) I am writing in opposition to recommendations 1 and 3 found in the Sunset Commission Staff Report for the Department of Assistive and Rehabilitative Services, May 2014, which would bring significant changes to the way services are delivered to blind consumers in the state of Texas.

Recommendation 1 would negatively impact blind Texans because although blindness is a low-incidence disability, individuals who are blind require specialized instruction in areas such as Orientation and Mobility, (O&M) and Assistive Technology, (AT,) just to name a few. In merging both the Division of Rehabilitative Services, (DRS) and the Division for Blind Services, (DBS) Vocational Rehabilitation Counselors and Teachers would be confronted with the problem of providing services to all disabilities. Since blindness is a low-incidence disability, blind consumers could find themselves at the bottom of a list, waiting inexcusable amounts of time to receive services, training, and support. Additionally, There is current data to support separate structures (Cavenaugh, B. S. (2010). An update on services and outcomes of blind consumers served in separate and general/combined VR agencies.)

(http://www.blind.msstate.edu/research/nrtc-publications/download/questionaire.php?id=187&f=An Update on Services and Outcomes of Blind and Visually Impaired Consumers Served in Separate and General/Combined VR

Agencies&itk=bc7e6022c141e1b6096ab05d618d5f5b

Furthermore, blindness specialists require supervision from management who understands the individual needs of blind Texans. Should the recommended changes be made, rehabilitation professionals may find themselves encountering cases for which they do not have the specialized training required to properly manage and provide instruction or guidance to their employees.

Recommendation 3 asserts that DARS provides many independent living services that consumers would be able to access through Centers for Independent Living, (CILs.) However, the reality is that CILs are not readily accessible across the state, and the area that most CILs serve is a significant one. Acquiring transportation to these centers, especially for an aging population who are losing vision, is a true barrier. Finally, because most blind individuals will live at home, (and not at a center,) specialized in-home training is imperative. Specialized instruction by a blindness professional at a consumers home can assist that individual to continue to live safely in his/her home.

If recommendations one and three of the report are followed, the funds that are now earmarked for
blindness related services will be dispersed within the larger general community and services will suffer

Respectfully submitted,

Gabriel M. Cazares