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## **Letters to the Editor**

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Institutional care an outmoded model

The Sun has recently published several letters extolling the virtues of the Rosewood Center (e.g. "Care centers need better state support," Nov. 23 and "Rosewood dedicated to training residents," Nov. 25).

I am the parent of a 40-year-old man who has autism and intellectual disabilities.

I know from my advocacy work with state and national organizations that all parents and families are fearful that the quality of care that their sons and daughters receive will not be adequate. Our greatest fear is what will happen to our loved ones when we die.

But there is no magic in walls. The care and support our loved ones receive in such institutions is contingent on the commitment and dedication of their staff and management.

And any of the services mentioned by the letter writers who defend the Rosewood Center can easily be provided in the community.

As a matter of fact, this happens every day. The residents at Rosewood have disabilities similar to those many people now served in the community face.

And my experience has convinced me that a person with a disability, whether severe or moderate, is better protected from abuse and neglect by being part of their communities.

Nosy, concerned neighbors, friends and families in the community can be an asset.

The truth is that institutional care is an outdated service model.

Research demonstrates that moving people from institutions to the community has been extremely successful and that outcomes for people who are treated in the community are better than for individuals segregated in institutions.

Recent research has also found this to be true for people who face very serious challenges.

No one is suggesting that the Rosewood Center be closed tomorrow, but rather that the state find a way to offer the most supportive and cost-effective services possible to each individual in the community.

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