

Health and Government Operations Committee
HB0010: Public Facilities – Changing Facilities
January 29, 2020
Position: Support

My name is Angie Auldridge and I live in Washington County with my husband and our three children. I am a Disability Advisor at Hagerstown Community College where I work with adults with disabilities. I am also the mom of a child with autism and complex medical needs, and I'm here today share what it's like to care for someone who does not have access to appropriate restroom amenities.

When we sat in the developmental pediatrician's office over five years ago on diagnosis day, there were many things that I anticipated when it came to caring for our son with autism and a rare genetic disorder. I knew that I would need to learn about special education, insurance, and therapy, but I was not prepared for the challenge of helping my child feel dignified and included in the activities that everyone else around us seemed to be able to enjoy with ease.

My son Mark will be seven years old this year and is not fully toilet trained due to his developmental disabilities. He is too large for baby changing tables, and cleaning him standing up is often not feasible due to the GI complications with which he suffers.

The only building that has ever been equipped with an adult size changing table has been his school. Beyond that, we have yet to encounter a bathroom with a changing table large enough to accommodate him. In light of this lack of adequate facilities, we have been forced to stay home or change him in less than ideal conditions.

A field trip to the pumpkin patch ended in embarrassment and frustration when there was no place to change him. A staff member suggested a wooden shed where they kept students lunches. Of course that was not a safe or healthy option for anyone. We had to do it in the back of our SUV on a cold rainy day, while families and peers passed by from his school.

Following a doctor's appointment, we were forced to change him on a grassy median near a busy street while I tried to conceal my husband and son to maintain some level of privacy.

I chaperoned a field trip with my son's class and found myself stuck, once again, with no place to change him. Someone suggested that I just lay him on the bathroom floor in the public restroom, but instead of laying my immune-compromised child on a public restroom floor, I chose to take him on the long walk back to the car, where he found himself confused about why we had to leave so early. We didn't include that in the social story that prepared him for that day so he was too upset to return to the building.

All of these scenarios are often compounded by the fact that my son struggles with transitions and departure from routine and most often if we leave to change, we are leaving the activity for good.

Mark is nonverbal, delayed and has social deficits. It's already hard for him to fit in and be included. His anxiety about new places and deviations from routines give us pause when we consider trying anything new, but it becomes nearly impossible to join the world and participate in activities when there are no bathroom facilities adequate for his needs.

So it's not just about having dignified, private, hygienic places for changing, it's about recognizing how challenging the alternative is and how much this violates the rights for inclusion for anyone who requires an adult changing table.

Mark is not alone. The students that I serve at the community college are not alone. People with developmental disabilities, the elderly, disabled veterans, and those with complex medical conditions all deserve privacy and human dignity.

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Respectfully submitted.