

Running Head: USE OF THE HOMEMAKER CLOSURE

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Use of the Homemaker Closure with Consumers who are Blind or Visually Impaired

versus Consumers with Other Disabilities

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### Abstract

This study addresses the question of whether homemaker closures are used in the same way with consumers who are blind or visually impaired and consumers with other disabilities. Two sources of data were used: the Longitudinal Study of the Vocational Rehabilitation Services Program and the Rehabilitation Services Administration's public-use dataset (RSA-911). Logistic regression and descriptive statistics were the statistical procedures used to answer the research questions. The results indicate that there are substantial differences in the use of homemaker closures based on consumer disability type.

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Homemaking has been considered a successful outcome of the state-federal vocational rehabilitation (VR) program since its inception in 1920 (Lassiter, Lassiter, & Gandy, 1987). Today, closure as a homemaker is still classified as a successful employment outcome (i.e., status 26 closure) by the VR system, although the appropriateness of this has been questioned over the years. The definition of homemaker is a man or woman “whose activity is keeping house for persons in their households or for themselves if they live alone” (Rehabilitation Services Administration [RSA], 2000, p. 31).

The homemaker closure was used quite extensively by VR agencies in the past, particularly with women and persons who are blind or visually impaired. According to a report published in 1973, 32% of all women who were rehabilitated by the VR system between 1920 and 1970 were closed as homemakers (Federal Labor Laws of Special Interest to Women, as cited in Johnson & Hafer, 1985). For fiscal year 1976, the percentage of women closed as homemakers or unpaid family workers was reported to be 30%, while only 4% of men were closed in these categories (Vash, 1982). Between 1970 and 1980, the total percentage of homemaker closures (i.e., both men and women) ranged from 13.8 to 16.1% (RSA, as cited in Giesen & McBroom, 1986). Historically, blind and visually impaired consumers have been much more likely to be closed as homemakers compared to all other disability groups. Using 1980 RSA data, Kirchner and Peterson (1982) found that 40% of blind and visually impaired consumers were closed as homemakers or unpaid family workers, while 14% of those with other disabilities were closed in these categories. This discrepancy has continued and has even become

more pronounced as homemaker closures for consumers with other disabilities have decreased (Capella, 2001; Johnson & Hafer, 1985; Warren, Cavanaugh, & Giesen, 2004).

Despite the longstanding status of the homemaker closure as a successful employment outcome, its validity has been questioned, most notably in the early 1980s (Goldner & Liebman, 1985; RSA, as cited in Giesen & McBroom, 1986). The conclusions of RSA's 1982 report, entitled "An assessment of the validity of the homemaker closure," were generally negative (Kirchner & Peterson, 1982). Goldner & Liebman report that some state VR agencies discouraged the use of this closure; for example, one gave it an extremely low weight (which equates to credit given to the counselor for the closure) to try to dissuade counselors from using it. Misuse of the homemaker closure has often been suggested as a problem. The United States' General Accounting Office (GAO, 1982) also published a report which documented the misuse of the homemaker closure by state VR agencies (among other improprieties). Specifically, some counselors closed cases as homemakers when the consumers did not fulfill their rehabilitation plans, despite homemaker not being the original vocational goal. Danek and Lawrence (1985) found this to be a problem in one state: almost half of the women closed as homemakers originally had a different vocational goal. They did not report similar information for men.

Recently, attention has again been given to the topic of homemaker closures. The appropriateness of the homemaker closure is once more being questioned by RSA (2004). In their Fiscal Year (FY) 2004 Monitoring and Technical Assistance Guide, one of RSA's five focus areas was "Homemaker Outcomes." RSA began this section with the following statement: "It is the policy of the Rehabilitation Services Administration that the optimal employment outcome under the VR program is competitive employment in integrated settings..." (RSA, 2004, p. 98). RSA also notes that considering homemaking as an employment outcome is

inconsistent with the policies of other Federal employment-related programs. The tone and content of the section clearly indicate that RSA wants agencies to focus on competitive employment outcomes. With the introduction of the evaluation standards and performance indicators by RSA in 2000, by which state agencies are now evaluated, not only the preference for competitive employment but the importance of it being emphasized in practice was established. The Monitoring and Technical Assistance Guide outlined a plan for a homemaker review to be conducted by RSA in FY 2004, which involved assessing written agency policies pertaining to homemaker outcomes, interviewing agency personnel and consumers who were closed as homemakers, and reviewing service records of consumers closed as homemakers. This review was in progress at the time of this writing and results are not being shared with the public yet (R. Ashby, personal communication, July 18, 2005).

The National Council of State Agencies for the Blind (NCSAB) also recently gave attention to the topic of homemaker closures (Mock, 2002). The high percentage of consumers who are blind or visually impaired closed as homemakers received notice from this organization at their Spring 2002 meeting. A “homemaker panel” was convened that presented the results from a survey on homemaker issues conducted with 26 VR agencies. The survey covered policies and procedures, eligibility requirements of consumers, benefits, disadvantages, and general views of homemaker closures. Concerns about the extensive use of homemaker closures in some VR programs was also discussed.

The topic of homemaker closures, especially in the context of rehabilitation of women and consumers with visual impairments, received some attention in the rehabilitation literature during the 70s and 80s, but since that time very little research has been published on homemaker closures. What do we currently know about consumers closed as homemakers and the use of the

homemaker closure by VR agencies? We know that they are predominately female and/or blind or visually impaired; they also tend to be older, have lower education levels, have a secondary disability, and be either married or widowed (Goldner & Liebman, 1985; Hill, 1989; Kirchner & Peterson, 1982; Warren et al., 2004). As already mentioned, evidence has been provided that some persons closed as homemakers did not have this as their original vocational goal, implying that these cases were an inappropriate use of the homemaker closure and also that these consumers did not obtain their desired vocational goal (Danek & Lawrence, 1985; GAO, 1982). No recent evidence on how state agencies are using homemaker closures has been provided in the literature. While RSA (2004) reports that the overall percentage of consumers closed as homemakers has decreased (from 15% in 1980 down to 4.2% in 2002), the percentage of blind or visually impaired consumers closed as homemakers has remained high (Capella, 2001; Warren et al., 2004).

Given that a large percentage of consumers who are blind or visually impaired continue to be closed as homemakers, while closures as homemakers for other disability groups have decreased, the question of whether homemaker closures are used in the same way with consumers who are blind or visually impaired as they are with consumers with other disabilities is pertinent. This issue is relevant to rehabilitation administrators as each state agency can establish its own policies and procedures related to homemaker closures (Mock, 2002). The policies of each agency influence use of the homemaker closure among the consumers served. An examination of homemaker closures and how they are currently being used will be informative to policy makers of state agencies.

This study will address the following research question: Are there differences in the use of the homemaker closure by VR agencies for consumers who are blind or visually impaired

compared to consumers with other disabilities? The following specific questions will be addressed, evaluated separately based on type of disability (i.e., blind/visually impaired versus other disabilities):

1. What variables predict homemaker closure?
2. Did consumers who were closed as homemakers want this as their employment outcome?
3. How much has the use of the homemaker closure decreased?

## Method

### *Data Sources*

Two sources of data were used for these analyses. One was the Longitudinal Study of the Vocational Rehabilitation Services Program (LSVRSP), which is public use data that were obtained from Cornell University's website (School of Industrial & Labor Relations, 2003). The LSVRSP was a large-scale research project initiated by Congress for the purpose of evaluating the performance of the state-federal VR program. Data were collected over a period of five years from more than 8,500 VR consumers at all stages of the VR process, from application to three years after case closure. As the name implies, data were collected from each consumer at more than one point in time, usually for a three-year period. Data collection for the project began in January of 1995 and was completed in January of 2000. A multistage, complex design was used for sample selection, which resulted in a nationally representative sample of VR consumers from this time period. Data for each consumer were collected on work history, functioning, vocational interests and attitudes, community integration, psychological characteristics, and consumer perspectives on their VR experience. The methods for data collection were primarily abstraction from VR case records and personal interviews. The second data source was RSA-911, RSA's public use dataset. This dataset is available for each fiscal year and includes information about

each person whose case was closed during that year. It contains information from each state as well as territories of the United States that also provide VR services. Fiscal years 1992, 1994, 1996, 1998, 2000, 2002, and 2004 were used for the analyses.

### *Samples*

#### *LSVRSP Data*

Sample 1 consisted of all consumers in the LSVRSP data who had a primary disability of blindness or visual impairment (i.e., had major disability codes between 100 – 149), who were closed successfully (i.e., had a 26 closure), and who did not have any missing data on the variables included in the analysis ( $N = 353$ ). The population used for the second sample was consumers in the LSVRSP data with a disability that did not include blindness or visual impairment (therefore persons who were deaf-blind or who had a secondary disability of blindness or visual impairment were excluded) who were closed successfully and did not have missing data on the variables in the analysis. Sample 2 consisted of all of these consumers who were closed as homemakers or had this as their original vocational goal ( $n = 94$ ) and a random sample of 500 of the remaining consumers who were closed in another category of successful closure ( $n = 3120$ ) was taken. A sample of these consumers was necessary because the independence parameters of the logistic regression model would not converge (causing unpredictable results and possibly an incorrect solution) when the entire population was included. Contributing to the problem was the small percentage of consumers closed as homemakers, resulting in a 3%-97% split on the dependent variable. Therefore, a sample of the consumers closed in a category other than homemaker was taken, resulting in a 15%-85% split on the dependent variable. Sample 2 consisted of a total of 594 consumers with other disabilities.

Demographic information on the variables included in the analyses for each sample, separated by homemaker versus other closure, is presented in Table 1.

#### *RSA-911 Data*

There were two different samples used for each FY of the RSA-911 data. One was all consumers with a major disabling condition of blindness or visual impairment who were closed successfully. The second sample was all consumers with a major disabling condition excluding blindness or visual impairment who were closed successfully. Seven years of data were analyzed (even years from 1992 to 2004), resulting in a total of 14 samples, ranging in size from 15,894 to 217,730.

#### *Data Analyses*

##### *LSVRSP Data*

The LSVRSP data was used to investigate research questions one and two. Logistic regression was the statistical procedure used to address question one, analyzing Sample 1 and Sample 2 separately. SUDAAN (Version 9.0) was the software package used to analyze the data. Use of a software package designed for the analysis of samples obtained with complex sampling designs is necessary with this data. SUDAAN allows the user to specify which type of sampling design was used, the design stages, and the weight assigned to each person in the dataset. Logistic regression is a multivariate technique that allows the evaluation of each variable's impact on employment outcome success, while holding the other variables in the model constant. By evaluating the significance of each independent variable in the model, we know whether that variable has a significant impact on the dependent variable, when the other variables in the model are considered. Logistic regression also allows for the calculation of odds ratios, used to

compare groups in terms of the response variables. Information from the logistic regression analyses, along with descriptive statistics, was used to answer research question two.

#### *RSA-911 Data*

The RSA-911 data was used to investigate research question three. The percentages of each group that were closed as homemakers were calculated for each year. These percentages were compared across groups and across years. An analysis of the change over time in the percentage of consumers in each group who were closed as homemakers was conducted.

#### *Variables*

The one variable common to all of the analyses (using both the RSA-911 and the LSVRSP data) was homemaker closure. This was the dependent variable in the logistic regression analyses. The independent variables in the models were: whether vocational goal at application was homemaker, age, gender, presence of a secondary disability, whether married or not, years of education, and receipt of financial support. Five of these seven independent variables have been established by prior research to be related to homemaker closure, and receipt of financial assistance has also been mentioned as a variable that may have a relationship with homemaker closure (Warren et al., 2004). What has not been used in prior research, but was assumed to be the best predictor of homemaker closure, was having homemaker as the original vocational goal. Prior to the LSVRSP data, this variable was not available in public use data. This variable also enabled me to evaluate whether the consumers closed as homemakers wanted this as their outcome (research question 2).

## Results

#### *LSVRSP Data*

##### *Sample 1 Analysis*

The overall model for blind and visually impaired consumers was statistically significant, Wald  $\chi^2(7, N=353) = 306.74, p < .01$ . Two of the seven independent variables were significant predictors of homemaker closure: (a) having homemaker as original vocational goal, Wald  $\chi^2(1, N=353) = 63.60, p < .01$ , and (b) age, Wald  $\chi^2(1, N=353) = 4.13, p = .04$ . Full statistical results for this model are reported in Table 2. As expected, homemaker as the original vocational goal was the best predictor of homemaker closure. This model was able to explain a large amount of the variance in homemaker closure (Cox and Snell's  $R^2 = .69$ ), with homemaker as the original vocational goal explaining the vast majority of it on its own (.68, or over 98%). The fit of the model was assessed with Hosmer and Lemeshow's goodness-of-fit chi-square test. The chi-square value was not significant, indicating a good fit for the model,  $\chi^2(8, N=353) = 6.41, p = .60$ .

### *Sample 2 Analysis*

The overall model for consumers with other disabilities was also statistically significant, Wald  $\chi^2(7, N=594) = 92.92, p < .01$ . Four of the seven independent variables were significant predictors of homemaker closure: (a) having homemaker as original vocational goal, Wald  $\chi^2(1, N=594) = 35.06, p < .01$ , (b) age, Wald  $\chi^2(1, N=594) = 5.01, p = .03$ , (c) gender, Wald  $\chi^2(1, N=594) = 6.49, p = .01$ , and (d) number of years of education, Wald  $\chi^2(1, N=594) = 7.62, p = .01$ . The complete results for this model are presented in Table 3. Having homemaker as the original vocational goal was again the most significant predictor of homemaker closure, although its effect was not as large with this group. This model explained 27% (Cox and Snell's  $R^2$ ) of the variance in homemaker closure, with original vocational goal of homemaker again explaining a large percentage of that amount (.227 or 84%). Hosmer and Lemeshow's chi-square test was

used to assess model fit,  $\chi^2(8, N=594) = 7.41, p = .49$ . The non-significant results indicate that the model fits well.

#### *Post-hoc Analysis of Age*

Because age was found to be a significant predictor in both models, even after taking homemaker as original vocational goal into account, an analysis of the percentage of consumers in each group who had this as their original goal by age group was conducted. The entire samples for each group were used for this analysis. Results are presented in Table 4. Across all age groups, the consumers with other disabilities were less likely to choose homemaker as their goal, but the differences between the groups increased substantially with age.

#### *RSA-911 Data*

In 1992, 5.8% ( $n = 10,002$ ) of consumers with other disabilities were closed as homemakers, while 45.4% ( $n = 8,334$ ) of consumers who were blind or visually impaired were closed as homemakers. The percentages for each group have generally decreased during the following 12 years, to a low of 1.4% ( $n = 2,786$ ) for consumers with other disabilities and 28.2% ( $n = 4,475$ ) for consumers who are blind or visually impaired in 2004 (see Table 5 for frequencies and percentages for each year). This represents a total percentage decrease of 75.6% for consumers with other disabilities and a 38% decrease for consumers who are blind or visually impaired. Although the difference between percentages of consumers closed as homemakers for each group has decreased substantially, a large gap still exists.

#### Discussion

These results indicate that there are substantial differences in the use of homemaker closures for consumers who are blind or visually impaired compared to consumers with other disabilities. The logistic regression models illustrated that there are different patterns for

predicting which consumers from these groups will be closed as homemakers. For both groups having homemaker as the original vocational goal and older age were significant predictors. Two additional variables contributed to the prediction of homemaker closure for consumers with other disabilities: being a woman and years of education, with lower education levels predicting homemaker closure.

A large majority of the variance in homemaker closure was explained by the blind/visually impaired model, and over 98% of this explanation could be attributed to having homemaker as the original vocational goal. While having homemaker as the original vocational goal also accounted for a large amount of the total variance explained by the other disability model (i.e., 84%), the model itself only explained .27 of the variance in homemaker closure. The predictors other than homemaker as original goal accounted for a larger portion of the total variance explained in this model compared to the blind/visually impaired model. The lower amount of variance explained indicates that other variables not included in the model also significantly contribute to determining whether a consumer with a disability other than visual impairment will be closed as a homemaker. These findings indicate that consumers with other disabilities are more likely to be moved to a homemaker closure for reasons that were not explained by this model, while consumers who were blind or visually impaired that were closed as homemakers almost always had this as their original vocational goal.

Age is a significant factor in determining both whether a person will choose homemaker as a goal and whether he/she will be closed as a homemaker. As seen in Table 4, there is a steady increase in the percent of consumers from both groups who choose homemaker as their original vocational goal as they age. Age has a more pronounced effect for consumers who are blind or visually impaired, as the percentages for each age group are substantially higher than for

consumers with other disabilities, other than for the youngest age group. The difference is most striking for the oldest age group, where a vast majority (92%) of those aged 65 or older selected homemaking as their goal while only 25% of consumers with other disabilities in this age group selected this as their goal. The data in this table also illustrate the differences in consumer age between the groups. For consumers with other disabilities, most are in the younger age groups, while the majority of consumers who are blind or visually impaired are 55 or older.

In terms of the RSA data, there is a clear trend of decreasing use of the homemaker closure, for both groups. Over the time period reviewed (1992-2004), this decrease has been much more significant among consumers with other disabilities (a 75.6% decrease compared to a 38% decrease). Hopefully, this indicates that fewer consumers with other disabilities are being moved into the homemaker closure when this was not the outcome they wanted from their rehabilitation program. With such a significant trend, it seems likely that many state agencies have also changed their policies concerning homemaker closures. The small number of homemaker closures among consumers with other disabilities in 2004 is certainly encouraging.

Despite the substantial decrease over the years, a much larger percentage and number of VR consumers who are blind or visually impaired are still closed as homemakers. Why are so many blind and visually impaired consumers closed as homemakers, compared to consumers with other disabilities? This research indicates that a major reason is that their original vocational goal was to be a homemaker. Also, age certainly has a big influence on this. Visual impairment is a disability that disproportionately affects older people, and consumers who are blind or visually impaired are as a group substantially older than other consumers of VR. Another reason may be that visual impairment is a disability that requires people to learn alternative methods to perform many everyday tasks, including skills that are required to live independently and “keep a

home.” Rehabilitation training is needed to learn these alternative methods, and this training is commonly provided by VR agencies. Considering the unique needs of this population, persons who are blind or visually impaired may be the group of consumers for whom the homemaker outcome is most appropriate. The older age of the population and their unique needs may help explain the continued discrepancy between percentages of consumers from each group closed as homemakers.

Because visual impairment occurs most frequently in the elderly, a special program for this population was created under Title VII, Chapter 2 of the Rehabilitation Act. The program is entitled “Independent Living Services for Older Individuals Who are Blind” and serves people who are 55 or older. Services are provided under this program by each state individually and include services to help correct blindness, provision of eyeglasses and visual aids, mobility training, Braille instruction, guide services, reader services, and rehabilitation teaching, among others. The older age and fact that the majority of blind/visually impaired consumers who are closed as homemakers are age 55 or older raises the question of why these consumers are being served by state VR agencies rather than under the Title VII, Chapter 2 program. In 2000 funding for the program was increased and it became a formula grant program, meaning that every state receives a minimum award of \$225,000 per year. States with larger populations of persons aged 55 and older receive additional funding. One answer to this question may be that the low level of funding for this program does not allow states to provide extensive services to consumers. When an Older Blind program cannot meet the needs of its consumers, it may refer them to VR for more extensive services. If more funding were available for this program, it is likely that fewer older persons who are blind or visually impaired would need to access the VR system and use the homemaker closure.

### Limitations

One limitation of this study was the type of design used: ex-post facto. This type of design was necessary for the analyses but limits the conclusions that can be drawn from the findings. Another potential limitation was the data used; the LSVRSP data is meant to be representative of all consumers who received services from VR during the years the data collection was occurring. However, the group of blind consumers who are included in the data may not necessarily be representative on the outcome of interest to this study because many of them were drawn from only two agencies for the blind. Every state agency has different policies and procedures about homemaker closures, and the policies and procedures that an agency has established influence the percentages of consumers closed as homemakers. We cannot know whether the results would have been any different if two different agencies for the blind had been included in the LSVRSP sample, but it is a consideration to keep in mind. Also related to the LSVRSP data is the limitation that consumers who were legally blind were not evaluated separately from consumers with less severe visual impairments (due to the relatively small sample size available in this data). Because it was not possible to separate this sample, all analyses were conducted with these groups combined. However, it is important to note that consumers who are legally blind are substantially more likely than consumers with less severe visual impairments to be closed as homemakers. The percentage of consumers closed as homemakers who are legally blind has remained much more stable during the past 13 years compared to consumers with less severe visual impairments and consumers with other disabilities. Ideally, these two groups could have been evaluated separately. Finally, one goal of this research was to determine whether consumers who were closed as homemakers wanted this as their outcome. The variable used to evaluate this was having homemaker as the original

vocational goal. However, it is possible that some consumers with homemaker as their goal did not make their own decision, but were influenced by their counselors to select this, or, conversely, that some consumers who started with a different vocational goal made a personal decision to change their goal to homemaker sometime during the rehabilitation process. Unfortunately, this information was unavailable, but could have potentially had an influence on the results.

### Conclusions

One of the most significant findings of this study is that almost all of the blind/visually impaired consumers who were closed as homemakers had this as their original vocational goal (96%). This was clearly not the case with other consumers, as only 46% of the homemakers with other disabilities had this as their original goal. Based on these results, concerns about the misuse of this outcome seem to be an issue primarily for consumers with other disabilities rather than consumers who are blind or visually impaired.

Being a homemaker constitutes a socially productive activity and is a job, although one that does not earn a salary. There is a philosophical and programmatic question of whether homemaker closures should be considered a successful outcome of the VR system. This is a question for administrators and policy makers to answer. As of now, homemaker closure is still a valid outcome, and VR agencies and consumers should be able to use it, *assuming it is an outcome that the consumer wanted*. In the case of most blind or visually impaired consumers, this seems to be the true. However, for many consumers with other disabilities, this may not be the case. As has been documented in the past, many of these consumers who were closed as homemakers did not have this as their goal, and at least some of these likely did not meet their original goal and were closed as homemakers to “salvage” the case with a successful closure. On

the positive side, the use of the homemaker closure for all consumers, particularly those with other disabilities, has decreased. As this number continues to decrease, we can hope that the frequency of misuse of the homemaker closure is also decreasing.

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Table 1

*Demographic Information for Samples Used in Logistic Regression Analyses (Separated by Closure Type)*

Variables	Blind/VI	Blind/VI	Other disability	Other disability
	Homemakers	Other closure	Homemakers	Other closure
Homemaker as goal	95.7	1.3	46.1	0.7
Female	78.9	36.4	70.9	47.6
Married	34.2	45.5	47.6	30.1
HS education or above	88.0	72.4	56.3	77.3
Receiving financial support	61.9	56.0	61.7	38.8
Secondary disability	69.7	33.9	36.4	32.3
Age: 55 or older	88.5	21.9	37.3	7.6
Average age	75.20 (14.07)	43.01 (14.76)	50.45 (15.34)	37.28 (12.23)

Note. All values are weighted percentages other than “Average age,” which is reported as an unweighted mean and standard deviation.

Table 2

*Logistic Regression Model of Homemaker Closures for Consumers who are Blind or Visually Impaired*

Variable	$\beta$	SE of $\beta$	DF	Wald $\chi^2$	Odds Ratio (95% CI)
Homemaker as goal	6.36	0.80	1	63.60*	577.50 (113.81 – 2930.23)
Age	0.05	0.02	1	4.13*	1.05 (1.00 – 1.10)
Gender	-0.89	0.57	1	2.47	0.41 (0.13 – 1.30)
Married	-0.52	0.63	1	0.68	0.60 (0.17 – 2.14)
Receiving financial support	0.76	0.80	1	0.90	2.13 (0.42 – 10.90)
Has secondary disability	-0.05	0.82	1	0.00	0.95 (0.18 – 5.03)
Number of years of education	<-0.01	0.07	1	0.00	1.00 (0.87 – 1.14)

\*  $p < .05$

Note. Model  $R^2 = .69$

Table 3

*Logistic Regression Model of Homemaker Closures for Consumers with Other Disabilities*

Variable	$\beta$	SE of $\beta$	DF	Wald $\chi^2$	Odds Ratio (95% CI)
Homemaker as goal	4.14	0.70	1	35.06*	62.83 (15.69 – 251.69)
Age	0.04	0.02	1	5.01*	1.04 (1.00 – 1.08)
Gender	-0.86	0.34	1	6.49*	0.42 (0.22 – 0.83)
Married	0.65	0.36	1	3.36	1.92 (0.95 – 3.90)
Receiving financial support	0.15	0.37	1	0.16	1.16 (0.56 – 2.43)
Has secondary disability	0.53	0.32	1	2.71	1.70 (0.90 – 3.22)
Number of years of education	-0.14	0.05	1	7.62*	0.87 (0.78 – 0.96)

\*  $p < .05$ Note. Model  $R^2 = .27$

Table 4

*Percentages of Consumers with Homemaker as Original Vocational Goal by Age Group*

Age Group	Blind		Other	
	<i>n</i>	%	<i>n</i>	%
Under 35	56	1.8	1526	0.2
35 – 44	45	15.6	956	0.8
45 – 54	43	18.6	607	1.3
55 – 64	42	40.5	249	4.4
65 or older	172	92.4	52	25.0
Total (all ages)	358	53.6	3390	1.3

Note. The data source is the LSVRSP, with all available observations included. The *n*'s represent the total frequency for the age group.

Table 5

*Percentages and Frequencies of Consumers Closed as Homemakers 1992 – 2004*

Year	Blind/VI		Other disabilities	
	Percent	Frequency	Percent	Frequency
1992	45.4	8334	5.8	10002
1994	46.7	8814	4.2	7691
1996	43.0	8058	3.5	6731
1998	38.3	6777	2.6	5387
2000	34.4	6355	2.1	4487
2002	32.0	5624	1.9	3757
2004	28.2	4475	1.4	2786