

**Factors Influencing Employment Outcomes
of Legally Blind Rehabilitation Clients
Who Have Hearing Impairments**



MISSISSIPPI STATE UNIVERSITY

Factors Influencing Employment Outcomes of Legally Blind Rehabilitation Clients Who Have Hearing Impairments

Executive Summary

**B.J. Maxson, M.Ed., Principal Investigator
with
J. Martin Giesen, Ph.D., Co-Principal Investigator
Kevin Ford, M.S., Research Assistant**

**Mississippi State University
Rehabilitation Research and Training Center
on Blindness and Low Vision**

P. O. Drawer 5365, Mississippi State, MS 39762

July, 1986

Copyright © 1986

All Rights Reserved by

Mississippi State University
Rehabilitation Research and Training Center
on Blindness and Low Vision

P. O. Drawer 5365, Mississippi State, MS 39762

Development of this document was supported jointly by the Rehabilitation Research and Training Center Grant G008103981 from the National Institute for Handicapped Research, U.S. Department of Education, Washington, D.C. and the Helen Keller National Center for Deaf-Blind Youth and Adults Affiliate Grant Program. Opinions expressed in this document are not necessarily those of the granting agencies.

Mississippi State University does not discriminate on the basis of race, marital status, color, religion, national origin, sex, age, or handicap.

OVERVIEW

There has always been a concern among administrators of state vocational rehabilitation programs that the investment of agency resources, both human and fiscal, in services to deaf—blind people yields time effective and wage earning outcomes. This concern has become more intense recently because the 1964-1966 rubella epidemic children are "coming of age" and applying for services from the state vocational rehabilitation agencies. The issues for these administrators have not been whether or not deaf-blind people could benefit from agency services, but would the services facilitate the deaf-blind client in having a successful employment outcome.

Little information is available to assist rehabilitation administrators to make decisions about investing resources in programs for blind and severely visually impaired people (Giesen, Graves, Machalow, Schmitt, & Dietz, 1984; Schmitt, 1984; Giesen, Graves, Schmitt, Lamb, Cook, Capps, & Boyett, 1985). The information available to rehabilitation administrators about the rehabilitation outcomes for deaf-blind people is virtually nonexistent. While some research alludes to the impact of multiple disabilities and hearing impairment on the employment outcomes of blind clients, the results of the studies do not agree (Kirchner & Peterson, 1982; Gillman, Simon, & Shinn, 1978; McGowan, 1972; Giesen et al., 1985).

The data base generated by Giesen et al. (1985) contains information from the R3300 federal reporting form and additional case study data on 619 legally blind clients. Information on these clients is contained in 256 descriptive variables including personal characteristics, vision characteristics, vocational rehabilitation variables, program expenditures and environmental characteristics. These 619 cases were legally blind people whose rehabilitation cases were closed in status 26 or 28 from 1978 to 1980 in Kansas, Mississippi, Ohio, and Florida. Forty-four hearing impaired persons were included among these 619 cases.

The purpose of this study is to explore the relationship between the information contained in these case files and the employment outcomes of the 44 legally blind persons with hearing impairments who were included in the previous research. It is intended to assist vocational rehabilitation agencies serving blind and visually impaired persons with hearing impairments to identify client characteristics and rehabilitation process factors associated with four employment outcomes. It was also intended to fill gaps in the rehabilitation literature regarding the employment outcomes of the rehabilitation process for these clients of state rehabilitation agencies. The four employment outcomes are competitive employment, sheltered workshop employment, homemaker, and unemployed (Status 28). The categories of variables used to predict employment outcome include personal, financial, occupational, rehabilitation process, counselor, and environmental variables.

RESULTS

It is important to note that once hearing impaired/visually impaired individuals enter the rehabilitation system, they are treated in ways similar to all other visually impaired persons within the system. This has both positive and negative implications. On the positive side, they are, with the possible exception of vocationally related training opportunities, provided with the same service opportunities and vocational objectives as those who are not hearing impaired. On the negative side, it does not appear that the counselor's casework or the variety of training

provided to the deaf-blind person addresses the issues related to the presence of a hearing impairment. Audiological information, prescribed sensory or hearing aids, training, and placement considerations were incomplete or devoid of documentation related to the hearing loss.

Practice issues and issues which indicate a need for additional research were an important outcome of the study. The major issues are outlined in the following sections.

Practice Issues

1. The primary channel through which deaf-blind and hearing impaired-visually impaired persons successfully enter the vocational rehabilitation system is referral from the Social Security Administration. Counselors are either not actively looking for deaf-blind referrals or they have not identified sources of referral outside the Social Security system. This referral procedure needs to be improved and should include transition services to those referred from special education services, Developmental Disabilities Councils, and institutions. It is felt that there are some deaf-blind individuals who could benefit from vocational rehabilitation services who are currently not being referred to the system.
2. Once in the vocational rehabilitation system, deaf-blind and hearing impaired-visually impaired persons tend to be distributed among outcome groups (competitive, sheltered, homemaker, and unemployed) in a way that is not statistically different from persons who are legally blind and do not have hearing impairments. This indicates that counselors are generally treating this population equally with those who are not hearing impaired in regard to placement options.
3. As a group, deaf and hearing impaired persons with severe visual impairments tend to have significant numbers of additional disabilities which are distributed among the persons in all outcome groups. Services which address the needs of these other specific disabilities do not appear in the casework and may be the result of a need for counselor in-service training on the rehabilitation of and implications of other disabilities, the need for the development of community resources related to other disabling conditions, or the need for additional resource allocation to pay for such services.
4. Those who were closed as unemployed (status 28) for reasons related to severity of disability were not closed because of deafness or blindness, but rather the impact of the additional disability or disabilities. This reinforces the notion that counselors need additional training in the implications of other disabilities, as well as ways to improve the rehabilitation outcomes of those with severe additional disabilities. This also implies the need for an improved understanding of other agencies and services which may supplement vocational services. For example, in one case closed in status 28, the problem which hindered placement was nonexistent appropriate community housing. As a result, it was necessary for the individual to be institutionalized. Interaction with Developmental Disabilities, local group home facilities, foster

programs and/or an understanding of the operating criteria for community based housing might have offered possible solutions and resulted in a 26 closure.

5. The major factor influencing the outcome of the rehabilitation process was age. Those who were closed as homemakers are significantly older than those closed in the sheltered or unemployed groups. Using conservative statistical methods, the homemakers were not found to be significantly older than those closed in competitive employment. It should be noted that since hearing impairment and visual impairment are related to age, the homemaker outcome group (which had the oldest mean age) was twice as large as each of the other three outcome groups. There were very few rehabilitation process services related to the needs created by the hearing loss in this population. It appears that these needs are not currently being met by vocational rehabilitation services.
6. Those closed as unemployed remained in applicant status 00-02 for a longer period of time than all the other groups and significantly longer than the homemakers. This implies that there was some question about their eligibility for services. There is a need for improved vocational assessment instruments for multihandicapped blind and deaf-blind persons in order to provide counselors with better diagnostic and vocational planning information. There was infrequent use of status 06 (extended evaluation) and this appears also to be the result of the need for better vocational assessment instrumentation. Counselors need an improved and a systemized approach to determining service eligibility in severely multihandicapped- blind individuals.
7. All those who received their primary means of support at referral from sources other than family, friends, and public assistance were closed in the competitive outcome group. No other outcome groups had any persons receiving this type of income support. The sources of income fell into the categories of investments, trusts, wages, etc. Obviously, those with a better economic base were more likely to be placed in a competitive employment position. The reason for this phenomena is of definite interest and worthy of further exploration.
8. Severity of hearing loss and severity of visual loss were not significant indicators of employment outcome. Severity of visual loss ranged from 89 percent to 96 percent, with the more severe losses in the wage earner categories and the most severe visual loss among competitive closures. There was also a higher percentage of more severe levels of hearing loss among the competitive closures. Vocational rehabilitation counselors appear to be sensitive to the vocational abilities of severely hearing impaired and visually impaired individuals and do not discriminate against them on the basis of their combined disabilities.
9. The majority of factors influencing the employment outcome of this particular sample appeared to be factors beyond the control of the rehabilitation process (i.e., demographic, disability related, and biographical). Personal financial considerations

were also a major influence. It appears that the need exists for a study of how vocational rehabilitation services can impact in a positive manner on the employment outcomes of this population.

Research Issues

1. There continues to be a need for a viable research data base which contains information on the demographic, medical, biographical, vocational, and employment characteristics of deaf-blind persons. The sample extracted from this data base is small, and is restricted in its external validity beyond the present sample of deaf-blind persons.
2. Information is needed on training programs which can appropriately accommodate deaf-blind and hearing impaired-visually impaired persons. It was not clear if long term vocational training was not provided because of the deaf-blind individual's lack of ability or the lack of appropriate resources.
3. An examination of the attitudes of employers who hire deaf-blind workers and a follow-up on the long range employment mobility of deaf-blind persons would provide service providers with valuable information as to the long range effects of the rehabilitation process upon the deaf-blind individual's career. This would provide important supplemental information to this study.
4. Identification of the jobs held by deaf-blind persons and the accommodations needed to fully integrate them into an employment situation would be extremely helpful for rehabilitation placement personnel. Related to this are the effects of additional disabilities upon the placement process.
5. Study is needed to determine the impact of recently funded supportive employment programs on the mainstreaming and job satisfaction of deaf-blind persons. It would be most interesting to see if this recent development has impacted in any significant way on the employment outcomes of deaf-blind persons.
6. Identification of factors which lead to the successful employment of deaf-blind individuals in professional, technical, and managerial positions would perhaps open more employment opportunities to deaf-blind individuals.
7. A study is needed to identify the current levels of service to the Rubella population. Are they being appropriately served and by whom? Has there been a positive impact from the intensive educational services many of them received or are they being placed in institutions because rehabilitation services are not equipped to serve them?
8. There is a need for documentation related to the impact of housing situations and community resources as a factor in placement of deaf-blind persons.
9. A systematic approach is needed to measure vocational eligibility criteria for

accepting deaf-blind persons into rehabilitation services to provide for the lack of appropriate assessment instruments. Also, additional research into the development of more appropriate vocational assessment instruments is needed.

10. Analysis is needed to determine the value and effectiveness of different state plans for serving deaf-blind persons and the overall effect on employment outcome of those plans vs. the effectiveness of services in states with no designated plans.
11. Study is needed to determine the effects of services provided by Developmental Disability Councils on eventual referrals to vocational rehabilitation services and the effects of cooperative agreements between the two agencies on the employment and lifestyle outcomes of deaf-blind persons.

REFERENCES

- Giesen, J. M., Graves, W. H., Machalow, S., Schmitt, S., & Dietz, P. (1984, May). The impact of rehabilitation services on the employment status and job skills of blind clients of four state rehabilitation agencies. Paper presented at the meeting of the National Association of Rehabilitation Research and Training Centers, Chicago, Illinois.
- Giesen, J. M., Graves, W. H., Schmitt, S., Lamb, A. M., Cook, O., Capps, C., & Boyet, K. (1985). Predicting work status outcomes of blind/severely visually impaired clients of state rehabilitation agencies (Technical Report). Mississippi State: Mississippi State University, Rehabilitation Research and Training Center on Blindness and Low Vision.
- Gillman, A. E., Simon, E. P., & Shinn, E. B. (1978). An outcome study of intensive rehabilitation training for young adults. Journal of Visual Impairment and Blindness, 72, 388-392.
- Kirchner, C., & Peterson, R. (1982). Vocational and rehabilitation placements of blind and visually impaired clients: U.S. 1980. Journal of Visual Impairment and Blindness, 76, 426-429.
- McGowan, O. L. (1972). The predictability of selected variables on rehabilitation training success of blind patients at the Western Blind Rehabilitation Center at the Veterans Administration Hospital in Palo Alto, California. Dissertation Abstracts International, 33, 2661A. (University Microfilms No. 72-32, 234)
- Schmitt, S. A. (1984). The prediction of work status outcome of blind women. Unpublished doctoral dissertation, Mississippi State University, Mississippi State.