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[ILRU - Independent Living Research Utilization Survey - 1983-1984] [2]

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March 1, 1984

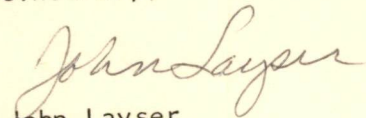
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Mr. Frieden,

To inform you that this program does not train in the area of Independent Living/Rehabilitation skills.

Our training is based on skills for managers and line staff foremen of the Disabled Workshop facilities. Therefore, we cannot complete your survey.

Sincerely,


John Layser,
Director



UNIVERSITY OF MISSOURI-COLUMBIA

RECEIVED MAR 5 1984

Hospital and Clinics

Division of Nursing Services

Rehabilitation Area
Rusk Rehabilitation Center
Room IR-03
One Hospital Drive
Columbia, Missouri 65212
Telephone (314) 882-1543

February 27, 1984

TO: Lex Frieden

In response to your request regarding information about courses or training programs about rehabilitation education and independent living skills the program at Rusk Rehabilitation Center integrates these needs into specific programs designed for the individual. Each department designs a program to promote as much independence as possible. We do not have courses outlined as such.

The Occupational Therapy Department has a group designed for Spinal Cord Injury patients and Head Injury patients that focuses on Community Re-entry Skills as a major component of the group process.

Attendant training is completed by nursing service when applicable to patient's needs. The importance of planning for possible needs in the future are also reviewed with patients and significant others.

Social Service and Nursing Review Assertion and Stress, Sexuality, Community Resources, Attendant Care, Budgeting, and Contracts with patients and significant others in a group process.

Hopefully, this information will be helpful.

Kim Blake

Kim Blake RN

Patient Care Manager, Rusk 4

KB/kp

The Staff for Life

Respondent's Name Marta Donell

Independent Living Training Program Survey

Organization: NCREDate: Feb. 12, 1984

RECEIVED FEB 27 1984

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
This was a joint course offering from: U. of Md. Gallaudet G.W. Univ. Coppin State	MA	Overview of history & philosophy, legislation plus applications in various service settings (see course outline)	Depended on which instit. registration was through range of \$35 per ch. for Gallaudet to over \$100 per ch. for G.W. Univ.	40+	approx 30% incl. deaf-blind and blind (mainly)	VR graduate student plus some related disciplines e.g. pec. Therapy

1/84

© ILRU Project
Houston, Texas

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Gallaudet College
Department of Counseling
7th & Florida Avenue, N.E.
Washington, D.C. 20002



National Council on Rehabilitation Education

"A Professional Organization Dedicated To Quality Services For
Persons With Disabilities Through Education and Research"

ADMINISTRATIVE OFFICE

MARVIN D. KUEHN
Administrative Secretary
Rehabilitation Programs
Emporia State University
1200 Commercial
Emporia, Kansas 66801
316-343-1200 Ext. 469

February 14, 1984

LEGISLATIVE OFFICE

JACK G. DUNCAN
Legislative Consultant
1213 - 29th Street, N.W.
Washington, D.C. 20007
202-232-6963

MEMORANDUM

TO: Lex Frieden
FROM: Marita Danek *MD*
Gallaudet College
RE: NCRE Independent Living Information

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Seattle University

Enclosed is my response to your survey about Independent Living courses.

Four rehabilitation education programs in Region III jointly taught a course in Independent Living in the spring of 1982. The course was highly successful but due to a variety of factors including faculty changes and loss of funding, we did not repeat it. I've also enclosed an article which describes the course on pp 7-9.

You might be interested in another independent living project in which our graduate program in rehabilitation counseling participates. This is a joint effort with a community agency to provide independent living services to multiply handicapped deaf individuals within the District of Columbia. Our graduate students provide independent living counseling while the community agency provides case management services and Gallaudet's adult basic education program provides an independent living skills classroom. This network of services is supported by D.C. Services for Independent Living.

Also, I've recently completed a survey of independent living services for deaf persons within federally funded ILC's. I'm working on tabulating that information now and will be happy to send it to you when completed.

RECEIVED FEB 27 1984

Lex Frieden
February 14, 1984
Page 2

Finally, just by way of information, I should mention that all formal surveys or requests to NCRE members to participate in research should go through the NCRE Research Committee. You might get a few inquiries about this from members. George Wright and I are co-chairs of the Research Committee which is why I bring it up. I believe George would agree with me that since this is an "in house" survey done for our own newsletter that the strict adherence to Research Committee review of the survey instrument is not necessary. For future reference, I have enclosed research committee guidelines for conducting research with NCRE members.

Good luck with your survey and the article. If I can be of further assistance, please don't hesitate to contact me.

MD:kod

xc: George Wright
Ken Reagles
Mae Smith

enc.

RESEARCH COMMITTEE: PURPOSE AND FUNCTION

Rehabilitation Education

PURPOSE: The Research Committee of the National Council on Rehabilitation Education was established for the following purposes in order to:

- Stimulate research questions from which information can be derived that is relevant to the practice of Rehabilitation Education.
- Assure the quality of Rehabilitation Education research through review of and commentary on its research products.
- Maintain ethical standards in conducting rehabilitation research.
- Assist rehabilitation organizations in establishing national policies and priorities in regard to rehabilitation research which treats Rehabilitation Education as its population of study.

FUNCTIONS: In carrying out its purposes, the Research Committee of the National Council on Rehabilitation Education provides the following functions in order to:

- Evaluate the relevancy of the questions and hypotheses of Rehabilitation Education research.
- Evaluate the competency of methodology of Rehabilitation Education research proposals.
- Examine the needs for and the implementation of relevant research in the area of Rehabilitation Education.
- Provide consultation and technical assistance to investigators who treat Rehabilitation Education as the population of interest.

NATIONAL COUNCIL ON REHABILITATION EDUCATION

RESEARCH COMMITTEE: PURPOSE AND FUNCTION (continued...)

Page #2

--Endorse and suggest dissemination of Rehabilitation Education research which has potential for advancing the quality of Rehabilitation Education.

SUMMARY:

The Research Committee of the National Council on Rehabilitation Education (NCRE) is charged with carrying out specific purposes and functions. In accomplishing that, NCRE requests that all investigators who wish to treat Rehabilitation Education as their population of interest submit their research proposals to the Committee for endorsement. These will be reviewed by a research subcommittee and a response will be provided to the principal investigator in which endorsement by the Committee will be granted or withheld.

The NCRE Research Committee process is designed to enhance the quality of Rehabilitation Education Research. Though the Research Committee acts on behalf of the National Council on Rehabilitation Education, its findings are suggestive only. Principal investigators are encouraged to submit proposals for Rehabilitation Education Research to the Chairperson of the Research Committee:

George N. Wright, Ph.D., CRC
Rehabilitation Counseling
Psychology Program
432 N. Murray Street
University of Wisconsin-Madison
Madison, WI 53706
Phone: (608) 263-5971

Networking Among Rehabilitation
Education Programs

Marita M. Danek
Gallaudet College

Don Linkowski
George Washington University

Paul Power
University of Maryland

Sudhansu Mitra
Coppin State College

Abstract

Four rehabilitation education programs developed a consortium for professional collaboration over a two year period.

This article describes the activities of the consortium including a Job Fair, Resource Directory, and joint course offering in Independent Living.

Included are recommendations and suggestions for developing and implementing similar networks.

Networking Among Rehabilitation Education Programs

Recent reductions in government expenditures for human services has affected every segment of the rehabilitation community. Rehabilitation counselor education programs have not been spared. Graduate level training programs for rehabilitation counselors have experienced severe cuts in funding, including, in some cases, the cessation of all RSA training support when project cycles ended. Because of the abruptness of such cuts in funding, many programs have had little opportunity to plan for alternative sources of support. As a result, the continued existence of these programs is threatened.

In anticipation of diminished federal support, four rehabilitation education programs in close geographic proximity developed a consortium which has provided a cooperative rather than competitive approach to the uncertain status of funding. The purpose of this article is to describe the development and implementation of this consortium model called the Capital Area Rehabilitation Educators (CARE).

The term consortium is used to describe the affiliation formed among the participating rehabilitation education programs. However, "network" more aptly describes the actual activities of this group. Networking has become a major theme of the 1980's and is described as a "Cooperative relationship among information and service providers who collectively can deliver better services than could be provided by the same set of information and service providers operating as

isolated, single entities" (Burkhalter and Walden, 1981, p.24). The creative use of networking by CARE over a two year period demonstrated the effectiveness of using networking strategies in rehabilitation education.

Development of the Consortium

Although the four rehabilitation counselor education (RCE) programs involved in CARE had existed in the Washington-Baltimore area for many years, there was no vehicle for professional interaction among the programs. Each program was developed to meet a separate training need and has a unique emphasis and scope.

The rehabilitation education program at Coppin State, a public institution in Maryland, was established to train counselors to serve predominately minority, inner city rehabilitation populations. The generalist rehabilitation counseling program at George Washington University, a private institution in the District of Columbia, draws upon the resources of such institutional projects as a Research and Training Center, and a Regional Rehabilitation Research Institute to train masters level counselors. Gallaudet College's rehabilitation education program prepares master's level counselors to work with deaf clients (RCD's) nationwide. The fourth program at the University of Maryland in College Park trains both masters and doctoral students and meets the training needs of many state agency personnel.

It seemed logical that these programs could draw upon each other's faculty expertise, programmatic resources and coursework offerings. But networking was not really facilitated until a small grant was provided by RSA Region III to the University of Maryland RCE program in

the fall of 1981. The funding was to support activities and projects which would benefit all four programs.

First Year Activities

An initial meeting was held at Gallaudet College in November, 1980 to explore ways in which the programs could collaborate and provide mutual support and service. The meeting was attended by faculty from all four RCE programs as well as staff from the Center for Manpower and Rehabilitation Services at the University of Maryland and the Research and Training Center at George Washington University. At this time common areas of need were identified as: recruitment of qualified graduate students, particularly minority and handicapped students, placement of graduate students in fieldwork sites, increased linkages with community service providers, expanding job placement opportunities for graduates, and the sharing of coursework offerings, curriculum resources and faculty expertise. Consortium members met monthly with meeting sites rotated among the four campuses.

During these subsequent meetings, consortium members identified strategies to meet these needs. These strategies included the following activities: 1) sponsorship of a major activity in honor of the International Year of Disabled People (IYDP), 2) development of a Rehabilitation Resource Directory listing area rehabilitation educators and agencies, facilities and organizations serving disabled people, 3) introduction of a joint course offering on a special topic in rehabilitation.

The implementation of these activities took place over the two year term of the grant. During the first year of the consortium a Job Fair/Workshop was held and a resource directory compiled; during

the second year a joint course offering in independent living was planned and implemented.

Job Fair/Workshop

The first major event, a Job Fair/Workshop, occurred in the Spring of 1981. This was a one day event which involved rehabilitation educators, graduate and undergraduate students, and professionals representing various community agencies, many of which were also fieldwork sites for the various RCE programs. In addition to meeting major needs of consortium members for student recruitment and fieldwork site strengthening, it brought together the various sectors of the rehabilitation community through both formal and informal information sharing.

A general morning information session for all participants and small afternoon group workshops on selected topics provided the structure for formal information sharing. The morning session provided an overview of current rehabilitation issues and priorities by representatives of RSA Region III, the International Year of Disabled Persons(IYDP) and rehabilitation educators. Presentations included the IYDP, future of rehabilitation, and legislative developments in rehabilitation. In the afternoon, small group round-table discussions by program representatives and students focused on specific issues. Topics included community residential treatment programs, students concerns and employment opportunities for graduates.

Informal information sharing occurred at the Job Fair component of the program. This consisted of booths for community agencies which were fieldwork sites for graduate students in rehabilitation. The booth exhibits afforded undergraduate students the opportunity to explore possible career options in rehabilitation and provided a

convenient way for masters-level students to identify possible placement opportunities after graduation.

The Job Fair/Workshop met the consortium objectives in fieldwork site development and information sharing among RCE programs. It also promoted closer relationships between rehabilitation educators and service providers. Because of the diverse nature of both the educational institutions and the rehabilitation community, many of these individuals were previously unaware of the others' existence. For example, specialists in various disabilities such as hearing impairments or mental illness were brought in contact with resources such as psycho-social rehabilitation services which were appropriate for their client populations.

Rehabilitation Resource Directory

Prior to and during the Job Fair/Workshop information was obtained on community service providers in terms of basic identifying data, target population, services provided and contact persons. This information was compiled into a Rehabilitation Resource Directory. The format of the Directory was arranged under the headings: Community Resources and College Resources and provided an easy reference to rehabilitation services and services in the Baltimore - Washington area. It was subsequently expanded and updated the following year.

Second Year Activities

Joint Course Offering

During the Consortium's second year the planning committee decided to initiate a joint course offering sponsored by all four RCE programs.

The needs and resources of each program were assessed relative to student interest in electives and faculty areas of expertise. These planning meetings identified independent living as a curriculum topic in need of emphasis among all programs.

Accordingly, the consortium developed a course in Independent living which was offered simultaneously on all four campuses. Each RCE program had one faculty member responsible for the course. These four faculty members also took responsibility for planning selected lectures and they rotated among campuses for this purpose. Guest lecturers were also rotated. In this manner the same content was covered on each campus but in a different sequence. Three times throughout the semester the classes from all campuses met as a group for a special presentation. This large group class afforded the students the opportunity to interact with each other and become familiar with the resources of the different campuses.

Topic areas for the course included:

- The Rehabilitation Process and Independent Living:
A Developmental Approach to Independent Living

- Age-related Issues

- Mental Illness and Independent Living

- The Client in Independent Living

- Types of Severe Disability and Their Implications
For Independent Living

- Emotional Reaction to Severe Disability

- Sexuality and Disability:
Implications for Independent Living

- The Law and Independent Living:
Advocacy Issues

- Role of the Family in Independent Living

Home Management Issues in Independent Living:
Approaches for Group Living Situations

Developing Programs in Independent Living:
Steps in Program Development

Skills for the Program Administrator

Developing Community Linkages

Developing Rehabilitation Plans for Independent Living Clients

The joint course in independent living permitted faculty and student interaction across campuses and was an efficient and cost-effective way of providing a special topics course. Another benefit was the inclusion of independent living practitioners from the community and from related major areas (e.g., recreation therapy) which provided the stimulation of varying disciplines. Several students who were themselves handicapped (deaf, blind, and deaf/blind) added personal insights into their daily struggles with independent living, as did the exposure to students from different cultures. Because of the in-depth treatment of the topic of independent living, students (including community professionals in the class) developed an increased awareness of university resources in independent living.

Implications

The linkages developed by the consortium have implications at many levels; professional, program, student and community. The networks established among these groups have continued well beyond the termination of the grant cycle.

At the professional level, the advantages included improved communication and increased understanding of each other's professional areas of interest and expertise. The monthly planning meetings afforded

the opportunity to communicate current issues and concerns among programs and within the rehabilitation community. It functioned as a mutual support system for RCE faculty during a period of change in rehabilitation and assisted the faculty in understanding the distinct needs of various disability and culturally different clients. Finally, it has had a broadening effect in promoting new networks such as the D.C. Rehabilitation Resource group, which is a collaboration of education, research, and service programs in the District of Columbia. This group which meets informally over lunch to share information and ideas includes D.C. Bureau of Vocational Rehabilitation in service training staff, G.W.U.'s RCE Program, Gallaudet's Program, staff from the National Rehabilitation Information Center and a new grant program in minority rehabilitation at Howard University.

At the programmatic level, curriculum was strengthened by the concentrated efforts at course development and suggestions for new approaches to recruitment, admissions and coursework specializations and sequencing. The exchange of information about materials and other campus resources was extremely helpful. As a group, it was possible to attempt projects and ventures together which would be impractical or not feasible at the individual program level. Neither the Job Fair/Workshop or the course in Independent Living would have been as successful without the mutual efforts and resources of several programs.

At the student level, the consortium provided the experience of participating in collaborative efforts, developing professional contacts for fieldwork and job placement, and networking with students in other programs.

Recommendations for Implementing a Consortium

Although this rehabilitation education consortium was unique because of the geographic proximity of the programs involved, a network of rehabilitation resources can be established in any community. Specific recommendations for implementing a rehabilitation consortium include the following: 1) identify areas of mutual need. Members must believe that they are getting as much as giving to the consortium and that there is a commonality of need with other participants. Needs should be clearly articulated and understood by all members. 2) Translate needs into goal statements and develop realistic strategies to meet these goals. A crucial ingredient is the word realistic - burdensome activities with dubious pay-offs will discourage participants. It is better to scale down goals and strategies than to unduly tax members. For example, if a need is for increased communication among members, one simple strategy is a monthly luncheon at a restaurant with an informal focus on specific topics or programs. This is easier to accomplish than a formal luncheon meeting with speakers, elaborate arrangements for a room etc. and achieves much the same purposes. Similarly, the need for a special topics or elective course can most easily be met through a consortium. Such topical course titles as Private Sector Rehabilitation, Legal Aspects of Disability, Geriatric counseling and the like can be jointly offered on a periodic basis. 3) Share leadership. All members must feel that they equally own the consortium. A network implies collaboration by equals rather than a hierarchical structure.

In conclusion, the creative use of networking by the consortium

demonstrated the effectiveness of using such linkages in rehabilitation education.

It is recommended that RSA consider funding such consortiums on a regular basis to facilitate closer cooperation and sharing of resources. This funding would need to be in addition to the usual institutional funding. A very limited amount earmarked for networking activities can go a long way.

References

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Gallaudet College
Department of Counseling

*Instructor's
copy*

EDCP 668: Special Topics in Rehabilitation
EDCP 795: Independent Living in Rehabilitation
Spring Semester, 1982 - three credits

University of Maryland
Gallaudet College

Focuses on those issues necessary for the development and implementation of independent living services for the disabled. Intended for human service professionals, such concerns as the rehabilitation process, home-management, independent living centers, and program development will be covered.

COURSE OBJECTIVES

Upon completion of the course the student should be capable of:

- 1) Describing the philosophical and legislative basis of the Independent Living movement.
- 2) Distinguishing among vocational and independent living rehabilitation programs.
- 3) Comparing the various personal, social and environmental limitations imposed by severe disability.
- 4) Listing the range of reactions to loss in the individual and the environment.
- 5) Contrasting the roles and functions of professional and peer service providers in independent living.
- 6) Describing the steps involved in assessing client and community needs in independent living.
- 7) Describing the techniques involved in community organization and resource development in independent living.
- 8) Distinguishing among counseling and coordination strategies involved in developing independent living programs.
- 9) Developing a proposal for an independent living program for a specified severely disabled population(s).

PROCESS TO ACHIEVE OBJECTIVES

Through class lectures, field visits, guest lecturers, and selected reading, the student will be able to achieve the designated course objectives.

CLASS OUTLINE/SCHEDULE

- January 14th: Introduction
Overview of Course and Assignments
Concepts in Independent Living
History of Independent Living
- January 21st: The Rehabilitation Process and Independent Living
(Gallaudet) (Joint Meeting of four programs & Guest speaker on topic)
- February 4th: Developmental Approach to Independent Living: Age-related
(Maryland) Issues — *Paul & I try to get together*
Mental Illness Issues and Independent Living — *Clair*
Guest Speaker: Pam Finnerty
- February 11th: The Client in Independent Living
(Gallaudet) Types of Severe Disability and their implications for Independent Living
Emotional Reaction to Severe Disability
Guest Speaker (Don Linkowski)
- February 18th: Sexuality and Disability: Implications for Independent Living
(Maryland) Guest Speaker (Sue Bregman)
- February 25th: The Rehabilitation Process in Independent Living
(Gallaudet) Guest Speaker (Bonnie Richards)
- March 4th: The Law and Independent Living
(Maryland) Advocacy Issues
Guest Speaker (Frank Ridley, Lawyer)
- March 11th: Field Visits (Maryland)
Spring Recess (Gallaudet)
- March 18th: Spring Recess (Maryland)
Field Visits (Gallaudet)
- March 25th: Role of the Family in Independent Living
(Gallaudet) (Paul Power)
- April 1st: *Andy Mason - Fairman at Maryland*
(Maryland) ~~Home Management Issues in Independent Living~~
Approaches to Administration, Finance, Supervision, and
programming for group living situations
- April 8th: Developing Programs in Independent Living
(Gallaudet) Steps in Program Development
Skills for the Program Administrator
Developing Community Linkages
(Marita Danek)

- April 15th: Developing Rehabilitation Plans for Independent
(Maryland) Living Clients
(Paul Power)
- April 22nd: Joint Seminar on Independent Living *assembly in*
Gallaudet *get larger room (Bill Bean)*
- April 29th: Student Reports
(Gallaudet)
- May 6th: Summary and Projections for Independent Living
(Maryland)

READING

Attached to this course outline is a bibliography. These books will be available to the students and other selected readings will be distributed by the Instructors.

ASSIGNMENTS

- 1) Report of a Field Visit to an Independent Living Facility
(Outline of this report will be discussed in class)
This will be due on April 1st
- 2) Reaction paper on an article related to independent living issues
(Format will be discussed in class)
This will be due on March 4th
- 3) A project paper on Independent Living. The student will select one topic in the area of independent living, and will write a 10-14 pg., double-spaced, typewritten paper on the topic. The following issues will be covered:
 - a) Literature review on the topic
 - b) Integration of topic with material presented in class
 - c) Programmatic issues related to the topic
 - d) Implementation and Application

This paper is due on May 6th

- 4) A case study analysis from Independent Living. This will be distributed in class on April 8th, and is due on April 15th.

Points will be attached to each assignment, and the student's final grade will relate to the points accumulated. Any late assignment will be penalized in points subtracted.

EXPECTATIONS

Students are expected to attend every class. If for some reason the student cannot attend, please notify Dr. Danek or Dr. Power:

Dr. Power: 454-2027/28

Dr. Danek: 651-5586

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LECTURE DATES

Don Linkowski (The Client: Reaction to
Disability and Types of
Severe Disability)

February 4th: George Washington

February 11th: Gallaudet-6:30 PM

February 18th: Coppin State College

Pam Finnerty (Developmental Approach to
Independent Living; Age
Related Issues)

February 4th: Maryland-6:30 PM

February 11th: George Washington

February 25th: Coppin State College

Sue Bregman (Sexuality and Disability) 577-1577

February 18th: Maryland-6:30 PM

February 25th: George Washington

March 4th: Coppin State College

Estelle Davis (Models of Independent Living) (W) 459-0700

January 21st: Gallaudet-6:30 PM

February 11th: Coppin State College

April 1st: George Washington

Bonnie Edwards (Rehabilitation Process contd)

February 4th: Coppin State College

February 25th: Gallaudet-6:30 PM

March 4th: George Washington

Frank Ridley (Law and Independent Living)

March 4th: Maryland-6:30 PM

March 11th: Coppin State College

March 25th: George Washington

Marita Danek (Developing Own Programs in Independent Living) -

April 8th: Gallaudet (6:30 PM)

(W) 651-5586

April 15th: George Washington

April 19th: Coppin State College (Video Tape)

Paul Power (Role of the Family)

(W) 454-2027/28

March 25th: Gallaudet

April 1st: Coppin State College

April 8th: George Washington

COURSE SCHEDULE: INDEPENDENT LIVING IN REHABILITATION-SPRING, 1982

	University of Maryland Gallaudet College	George Washington University	Coppin State College
January 14th	Introduction to Course		
January 21st	Models of Independent Living (Estelle Davis)	Introduction to Course	Introduction to Course
January 28th	Joint Meeting: Rehabilitation Process	Joint Meeting	Joint Meeting
February 4th	Developmental Approach to Independent Living; Age Related Issues (Pam Finnerty)	The Client: Reaction to Disability; Severe Types of Dis. (Don Linkowski)	The Rehabilitation Process (Bonnie Edwards)
February 11th	The Client: Reaction to Disability and Severe Disability Types (Don Linkowski)	Developmental Approach to Independent Living; Age Related Issues (Pam Finnerty)	Models of Independent Living (Estelle Davis)
February 18th	SExuality and Disability (Sue Bregman)	Home Management Issues in Independent Living (To be Obtained)	The Client: Reaction to Disability (Don Linkowski)
February 25th	The Rehabilitation Process (Bonnie Edwards)	Sexuality and Disability (Sue Bregman)	Developmental Approach to Independent Living (Pam Finnerty)
March 4th	The Law and Independent Living (Frank Ridley)	The Rehabilitation Process (Bonnie Edwards)	Sexuality & Disability (Sue Bregman)
March 11th	Field Visits Spring Recess	Field Visits	Law and Independent Living (Frank Ridley)
March 18th	Spring Recess Field Visits	Spring Recess	Spring Recess
March 25th	Role of Family in Independent Living (Paul Power)	Law and Independent Living (Frank Ridley)	Home Management Issues in Independent Living
April 1st	Home Management Issues in Independent Living (To be Obtained)	Models of Independent Living (Estelle Davis)	Role of Family in Independent Living (P. Power)
April 8th	Developing Own Programs in Independent Living (Marita Danek)	Role of Family in Independent Living (P. Power)	Field Visits
April 15th	Developing Rehabilitation Plans for Clients	Developing Own Programs in Independent Living (Marita Danek)	Developing Own Programs in Independent Living (Tape)
April 22nd	Joint Seminar	Joint Seminar	Joint Seminar
April 29th	Student Reports		Student Reports
May 6th	Summary and Reports		

Independent Living

Coppin State
Gallaudet College
George Washington U.
University of Maryland

Field Visit Report

Your field visit report should be a narrative of approximately 3-4 typewritten pages in length which discusses and evaluates an independent living facility/service according to the following dimensions, when relevant.

1. Location and type of neighborhood in which it is located.
 - A) Accessibility of location; availability of public transportation
2. Physical description
 - A) architectural barriers
 - B) lighting
 - C) design; special features
 - D) overall attractiveness and impression it made on you
3. History of the facility
 - A) When was the facility/service begun?
 - B) What was the original purpose of the facility/service?
To what extent has this changed over the years?
 - C) What literature/printed material is available? Is this printed material easily understood by consumers or potential consumers?
4. Purpose of the facility
 - A) What is the mission of the service/facility with respect to the individuals being served?
 - B) How well is this mission understood and communicated by the staff?
 - C) What type of funding or support does it have? Cite all sources and note changes in funding over time.
 - D) What is its relationship to the community and to other facilities?

5. Organization of the facility

- A) departments; organizational structure
- B) staff: roles, education, qualifications, turnover, contact with clients. What percentage of staff are handicapped?

6. Clients

- A) What disability groups are served?
 - B) How are they referred? Are active casefinding efforts made by the service/facility? How long do the clients usually receive services?
 - C) What eligibility requirements exist, if any?
 - D) What is the number of clients served monthly/yearly?
 - E) What other demographic information exists on clients, e.g. age range, sex, incidence of multiple disabilities?
7. A) What client needs do you assess that are not being served by this service/facility?
- B) What arrangements are made with other community resources to meet these needs?

8. Relationship with vocational rehabilitation agencies

- A) Are arrangements made with local rehabilitation agencies to provide for vocational rehabilitation services once independent living services are completed?
- B) What percentage of clients become clients of vocational rehabilitation?

9. Evaluation

- A) How is client progress measured by the agency/facility?
- B) What program evaluation is performed by the agency/facility?
- C) What reporting requirements are specified by the funding service?

10. Future Plans

- A) Describe the facility/services plans for continued services.
- B) What funding is proposed for continued growth?

OBJECTIVES

This course is designed to provide continuing education and graduate credit for professionals who wish to increase their knowledge of the issues involved in recent Independent Living Legislation and implementation strategies. It should be particularly useful for rehabilitation personnel, special educators, residential facilities personnel, program planners, and other human service professionals.

Specific Objectives include:

- . the development of skills to assist severely disabled individuals in a broad range of life planning activities.

- . an awareness of varying approaches and modalities available to assist the severely disabled person with personal skills autonomy.

- . the utilization of competencies developed during the course to create a proposal for an Independent Living program.

To be presented jointly by....

Coppin State College
Gallaudet College
George Washington University
University of Maryland

A one semester course on Thursday evenings beginning in January 1982

For further information contact:

Dr. Sudhansu Mitra
Coppin State College
(301) 383-5970

Dr. Marita Danek
Gallaudet College
(202) 651-5586

Dr. Don Linkowski
George Washington University
(202) 676-6376

Dr. Paul Power
University of Maryland
(301) 454-2026

To Register as a Special Student Contact

Coppin State Admissions Office
(301) 383-5970

George Washington University
Admissions Office
(202) 676-6040

University of Maryland
(301) 454-2026

CONTENT

- I History, philosophy, concepts and models of Independent Living
- II The Client
 - . severe disability and its implications
 - . reactions to disability
 - . sexuality and disability
 - . consumer involvement
- III The Rehabilitation Process in Independent Living
 - . service providers and their roles
 - . comprehensive assessment approaches
 - . community resource utilization
 - . issues and approaches in counseling: professional and peer counseling; self-help groups
 - . rehabilitation programming
 - . placement
- IV Issues in Independent Living
 - . legislation
 - . advocacy
 - . transportation/housing
 - . therapeutic recreation

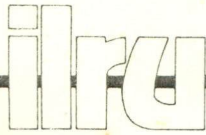
V Developing your own program in
Independent Living

- . steps in program development
- . skills for program administration
- . developing community linkages
- . financial considerations
- . facility management
- . residential arrangements

INDEPENDENT
LIVING

A JOINT COURSE
OFFERING FROM THE CAPITAL AREA
REHABILITATION EDUCATORS (CARE)

For rehabilitation
and human service personnel



TO: Rehabilitation Educators Involved in Independent Living Training

FROM: Lex Frieden *LF* *Send to*

SUBJECT: Assistance Needed

DATE: January 24, 1984

I have been asked to prepare an article related to independent living and rehabilitation education for the NCRE newsletter. I believe this article can provide valuable information to people in both the rehabilitation education and independent living fields if it is based on current data. Consequently, I am requesting your assistance in completing the attached survey instrument.

I believe the survey instrument is self-explanatory. Please provide information about all of the courses or training programs which you are involved with that focus on independent living. If only a portion of the course or program is related to independent living, please indicate by appropriate notation. This instrument is designed to produce generally descriptive, non-scientific data, so approximate responses are useful. If there is a need to copy the response form in order to provide additional data, please do not hesitate to do so. If course descriptions or brochures are conveniently available, please enclose them with the survey form when it is returned. I would like to have the completed survey forms returned to me by February 20.

I really appreciate your assistance with this project. I anticipate that the results of this survey will be published in April or May. If you have any questions about this instrument or the survey, feel free to call me.

LF:rms

Attachments

I look forward to reviewing the results of your study

LF

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1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

One of eight faculty members is physically disabled & confined to a wheelchair

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

See above

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

Interesting philosophical type issue but not one of overriding concern here

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

Course content should be a requisite in this area

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

None offered

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

None planned

Russ Sales
Respondent's Name

Respondent's Name

Amos Sales

Independent Living Training Program Survey

Organization:

Rehab. Dept, UofH

Date:

RECEIVED FEB 27 1984

Please return to:

Lex Frieden

ILRU/TIRR

P.O. Box 20095

Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost (3 units per course)	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
The department offers the BA degree in rehabilitation, the BA degree with a specialty in interpreting with the deaf, the MS degree in Rehabilitation within five specialty areas and the doctorate Ed.D. or Ph.D. in Rehabilitation. Emphasis on independent living is provided within core coursework required of all students pursuing degrees at the undergraduate or graduate levels. Almost 100% of students are full-time.						
Undergraduate						
Rehab 300 Intro. to Rehab	B.A.	History + Philosophy	\$44 per unit	120	10%	Student
Rehab 320a+b Survey of Human Disabilities	BA	Rehab Process + services	\$44 per unit	130	10%	Student
Rehab 460 Super. 1784 Case work in Rehab	B.A.	Applications of Philosophy + theory to practice	\$44 per unit	80	10%	Student

Respondent's Name

Amos Salas

Independent Living Training Program Survey

Organization:

Rehab Dept, UofA

Date:

Please return to:

Lex Frieden

ILRU/TIRR

P.O. Box 20095

Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
<u>Graduate</u>						
Rehab 500 Principles of Rehab.	MA, Ph.D.	History & Philosophy	\$44 per unit	45	15%	Student
Rehab 510 Med. Aspects of Dis.	MA, Ph.D.	Rehab Processes & Services	\$44 per unit	45	15%	"
Rehab 520 Psych. Soc. Aspects of Disability	MA, Ph.D.	"	"	45	15%	"
Rehab 620 Client Assessment	MA, Ph.D.	Rehab Service	\$44 per unit	40	15%	"
Rehab 600 Coun. Practices in Rehab Settings	MA, Ph.D.	Couns & Rehab Services	\$44 per unit	45	15%	"
Rehab 730 Invest. in Rehab	Ph.D.	Research & Utilization	\$44 per unit	20	8%	"
Rehab 695 Rehab Psych	Ph.D.	History & Philosophy	\$44 per unit	20	8%	"

1/84

© ILRU Project
Houston, Texas
 DEPARTMENT OF REHABILITATION
 COLLEGE OF EDUCATION 412
 UNIVERSITY OF ARIZONA
 TUCSON, ARIZONA 85721

Respondent's Name Bill Weber

Independent Living Training Program Survey

Organization: SFA Undergraduate Rehab. Program

Date: 2/22/84

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Introduction to Rehabilitation	B.A.	History & Philosophy		50	10%	student
Psycho-Social Aspects of Disability	B.A.	Psy. Aspects of Disability		40	10%	students
Advanced Rehab. Techniques	B.A.	Psy. Aspect Approaches to Working with disabled		35	15%	students
Rehabilitation						

Stephen J. Austin

Respondent's Name FLORIDA STATE UNIVERSITY

Independent Living Training Program Survey

Organization: Jea-ne Boland Patterson/Florida State UniversityDate: February 21, 1984

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Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Principles & Practices of Rehabilitation Couns.	M.S.	over view of rehabilitation (3 hrs. on indep. living)	\$114	18	4	grad student
Assessment & Evaluation in Rehabilitation	M.S.	assessment (3 hrs on I.L.)	same	same	same	same
Psycho-Social Aspects of Rehabilitation	M.S.	3 hrs. on I.L.	same	same	same	same
Field Experience	B.S.	8 hrs. week - can be in I.L. setting 1/semester	same	same	same	undergrad student
Internship	B.S./M.S.	can be in I.L. setting 2/semester	\$400	30	6	grad and undergrad
Research in Rehab.	M.S./Ph.D.	2 hrs. on I.L.	\$114	15	3	grad
Case Studies in Rehab.	M.S.	3 hrs. on I.L.	\$114	15	3	grad
Practicum in Community Resources	M.S.	3 hrs. on I.L.	\$152	15	3	grad

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Disabled persons comprise approximately half of the speakers/consultants who are used to talk about Independent living programs. Also one of our three faculty members has a disability and uses an electric wheelchair (post-polio)

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

Our advisory committee includes about 1/3 persons who have disabilities; they are the major source of local input on our curriculum

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

I think there is a need for both professionals and consumers to be involved in independent living. My ideal is the "trained" disabled person, that is an M.S. in Rehabilitation Counseling. Florida centers for Independent Living have been very supportive of this--they hire either B.S. or M.S. level persons who also have a disability (and they hire some persons who are not disabled).

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

An entire course on the history and philosophy of independent living would not fit in our program, except as a special topics course. The CORE guidelines are such that students have few electives. I do believe that the history and philosophy of independent living should be included as part of any rehabilitation curriculum

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

We do not, however we have a separate contract to provide independent living services to developmentally disabled clients. Thus students (both graduate and undergraduate) learn some about independent living in class, and also have the opportunity to work with a select group of clients who need independent living services.

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

We have no such plans. If there is a documented need, that issue might be revisited. The Independent Living Centers in Florida seem pleased, thus far, with the knowledge our graduates have, without the necessity of a degree or certification program specifically in Independent Living.

Memorandum



DATE: February 21, 1984

TO: Lex Frieden

FROM: Jeanne Boland Patterson

RE: Attached survey

Florida
State
University

These are approximations. Independent living is addressed in almost all courses and some terms many students intern with an Independent Living Center (we have two in town, as well as my grant project).

I enjoyed meeting you in Washington. Will look forward to reading your article in the NCRE REPORT.

RECEIVED FEB 27 1984

FSU FORM NO. FM94 Rev. 10-72



The Florida State University
Tallahassee, Florida 32306

College of Education
Department of Human Services and Studies

Respondent's Name Kathy Tyler

Independent Living Training Program Survey

Organization: U of U Rehab Center, SLU, UT. 84132

Date: 2/23/84

RECEIVED FEB 27 1984

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Alternatives: Survival Skills & Physical Disability	MA level thru cont. educ.	Counseling & Skill Building (See attached Course outline)	\$30 (No credit) \$90 (2 credits)	40	75%	Counselor & SCI Center Coordinator

Respondent's Name _____

Independent Living Training Program Survey

Organization: _____

Date: _____

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
1/84 © ILRU Project Houston, Texas						

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Persons with disabilities are used as consultants & presentors in $\frac{1}{2}$ of the course.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

Heavily, to determine course content, community needs & to provide ^{a list of} community role models to use within the course.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

Mixed, as this is not so in our area — but is perhaps much more relevant in higher populated areas.

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

I would tend to agree that any rehab. degree person should have training in these areas.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

n/a

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

None at present

Kathy Tyler, MSW
Coordinator

Respondent's Name

Social and Business Center

ALTERNATIVES
Survival Skills and Physical Disability

COURSE OUTLINE

Course Objectives - To provide the disabled person with:

- 1) Information to facilitate an independent lifestyle
- 2) Skills to enhance communication, assertiveness, and personal effectiveness
- 3) Increased motivation for growth and change
- 4) An opportunity to explore and share personal feelings
- 5) An introduction to role models from within this community
- 6) Introduction to community resources for functional use and self-advocacy

A basic outline for the 10-part series is as follows:

- 1) Transitions/Changes
 - Group introduction and bonding
 - Program introduction
 - Explanation of the process of adaptation and facilitation of change
- 2) Values
 - What are values and formation of values
 - Value clarification exercises
- 3) Assertive Behavior - Part 1
 - Communication skills
 - Introduction to assertive behavior (What is passive, aggressive, passive-aggressive, and assertive behavior)
 - Goals and components of assertive behavior
 - Blocks to assertive behavior
- 4) Assertive Behavior - Part 2
 - Role play of assertion skills
 - Successful interactions with attendants, landlords, and medical personnel
 - Conflict styles, management of conflict and conflict resolution
 - Negotiating behavior changes
- 5) Stress Management and Coping
 - What is stress and how do people cope (drugs, etc.) and coping skills
 - Relaxation techniques
 - Goal setting and attainment
 - Time management
 - Motivation

- 6) Personal Power and Integration, Rights, Community Resources
 - Self-awareness and self concept
 - Personal rights and responsibilities
 - Community Resources (consumer affairs and public issues, housing, jobs, independent living skills, etc.)
- 7) Travel and Mobility
 - Public transportation
 - Ambucar, Servicar, T.H.E. Van, Buses, Trains, Airplanes, Boats, etc.
 - Vans, modifications, and equipment
 - How to find, what to look for, where to buy, precautions
 - Driving, licensing, and insurance
 - Access to area and national parks
 - Planning a vacation
 - Medical Emergency Card/Complications
- 8) Body Image, Sexuality, Dating, and Socialization
 - Film
 - Panel and Discussion
- 9) Recreation - Leisure - Self Defense
 - Community resources
 - Film
 - Personal safety and self defense demonstration
- 10) Group Termination and Closure
 - Continuing support group/networking
 - Evaluations
 - Pot luck dinner

For other course information contact:

Kathy Tyler, 581-2267

or

Barbara MacDonald, 581-4182

jh/9-83

Univ. of Utah

Respondent's Name Aiko Oda

Organization: University of Hawaii

Date: _____

Independent Living Training Program Survey

RECEIVED FEB 27 1984

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Ed CE680 Principles & Practices of Rehabilitation Counseling	MA	History & philosophy, Community resources, Scope of rehabilitation services	Core Course taught by regular faculty	8-10	0-10%	1) Education Graduate Student 2) VR Cslr.
Ed CG681- Psycho-Social Aspects of Disability	MA	Adjustment to & Coping w/ Disability, Social & Cultural & psychological factors	"	8-10	0-10%	and 3) private rehab cslrs.
Ed CG682- Medical Aspects of Disability	MA	Terminology, etiology, functional limitations, resources	"	8-10	0-10%	1, 2, & 3

E.A. Oda



University of Hawaii at Manoa

College of Education • Counselor Education
Wist Hall Annex 2 • Room 222 • 1776 University Avenue • Honolulu, Hawaii 96822

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

In the 3 courses Ed CG 680, 681 & 682, we invite disabled persons to make presentations on specific topics related to their disabilities & the focus of the course. We have occasionally had disabled individuals teach classes but not because they were disabled as much as because they were interested in teaching & were highly qualified.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

We assume that disabled people have been involved in preparing some of the course material that we presently use (primarily from R & T Centers such as West Virginia, Kent, Oregon, etc.) We also have disabled persons on our Advisory Committee.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

No need to worry — the only way over professionalization could happen is if families give up their primary care-takers' privileges and responsibilities. The type of teaching & caring that is most beneficial to severely disabled can & probably should be done by ^(and is being) ~~done~~ people who can be trained to be effective without going to college.

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

- 1) I think that the materials should be integrated into all of the core courses in rehabilitation counseling. The philosophy, principles & practices of independent living are the "habilitation" part of "re-habilitation".
2) Some of the material would be more appropriately taught in Special Education.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

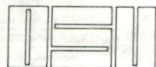
N/A

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

N/A

Aiko Oda

Respondent's Name



Oklahoma State University

REHABILITATION COUNSELOR EDUCATION

STILLWATER, OKLAHOMA 74074

(405) 624-6030

February 20, 1984

Lex Frieden
Independent Living Research
Utilization
P.O. Box 20095
Houston, TX 77225

Dear Lex:

Various aspects of independent living are included in different courses in the Rehabilitation Counselor Education Program at Oklahoma State University. No one course per se is designated as Independent Living.

The spring semester in particular lends itself to emphasizing independent living. During this semester our students have a curriculum specifically tailored for them at the O'Donoghue Rehabilitation Institute in Oklahoma City. Among other experiences, students become acquainted with and have continuing contact over a period of several months with severely disabled clients who are mastering skills of independent living. Von Miers, himself a quadriplegic, is the person in charge of the independent living program at O'Donoghue. In addition to having class time scheduled with the students for providing a better understanding of independent living, Von serves as the liaison person between O'Donoghue and the students.

In short, students have continuous contact with the person whose primary assignment is the independent living program. This enables them to benefit from the many informal contacts in a "laboratory for learning about independent living". Too, time is scheduled with rehabilitation engineers and students are introduced to case studies of those who are severely disabled and how technology, manipulating the living environment (architecture barrier removal, etc.), use of computers and other assistive devices can be used to achieve the goals of more independent functioning.

People with a diversity of disabilities are scheduled each year as resource persons and discussion leaders. In addition almost always we have students who have disabilities. For example, in this class now at O'Donoghue we have two who use wheelchairs. One is blind, has cerebral palsy and has

RECEIVED FEB 27 1984

Lex Frieden
February 20, 1984
Page two

impairment of both hands. Responding to him and his efforts to become more independent is a constant reminder of many of the variables involved in independent living.

I trust this information will be of assistance in the preparation of your article.

Best personal regards.

Sincerely yours,

Clayton A. Morgan
Clayton A. Morgan, Coordinator
Rehabilitation Counselor Education

CAM/esf

*Lex - I keep getting reports of the
outstanding work you are doing -
It's great to claim you as a colleague -
Blessings on you -
Cam*

*Survey not
included with
letter*

Respondent's Name Dr. Joseph S. Fiorelli

Independent Living Training Program Survey

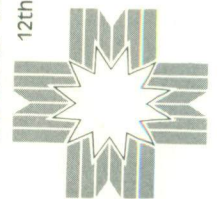
Organization: Moss Rehabilitation Hospital

Date: February 16, 1984

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Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Cope-Ability Program	Patient Education	General program to orient patients to physical disability	Free	200	100%	Interdisciplinary
Diabetic Management Clinic	Patient Education	Management of Diabetes	Free	150	100%	Interdisciplinary



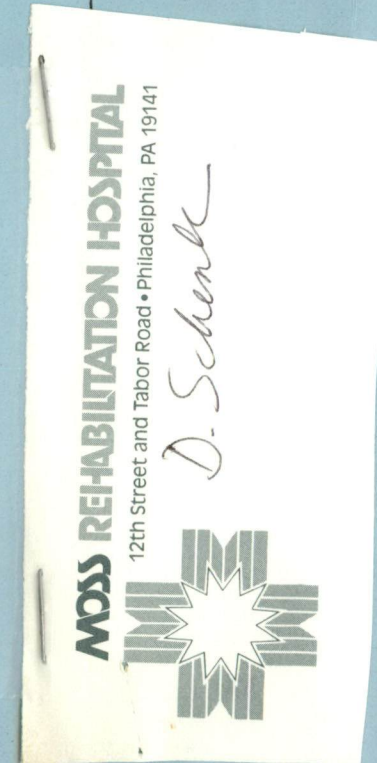
Respondent's Name Debra J Schenk MROK/C Independent Living Training Program Survey

Organization: Moss Rehabilitation Hospital
12th and Tabor Road
Date: Phila, PA 19141

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Please return to:
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na						



1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Independent living skills training is done by Occupational Therapists in 1:1 treatment sessions. Occasionally groups are held depending on patients' needs and patients are resources for each other i.e. hemiplegic self range of motion group, feeding group, joint protection & energy conservation group.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

We seek input from patients ongoingly and built this into all programming.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

Occupational Therapy as a profession has always and continues to facilitate maximal independent living. In doing so, the patient is part of the team (family also). Their values, motivation, habits and culture have much bearing on the goals of occupational therapy.

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

To my knowledge most occupational therapy programs give some info on this throughout their courses. A question that I have is: How much is there available to justify a whole course? I could see it as a component of a larger course.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

I firmly believe that of all allied health professionals, Occupational Therapists are best prepared to work in the area of independent living.

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

nd

John Schenk MSOTR/L
Respondent's Name
Director O.T. 11/22/80

Respondent's Name Nicholas LaRocca, Ph.D.

Independent Living Training Program Survey

RECEIVED FEB 28 1984

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Organization: Research and Training Center for Multiple Sclerosis

Date: _____

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
5. Stress strdy of of energy reserve in MS	continuing ed.	research	N/A		100	varied
6. Multiple Sclerosis: A guide for patients and their families	continuing ed.	consumer education			anticipate 90,000 consumers or more in USA who belong to MS Society, as well as additional perspective consumers	varied

MEDICAL REHABILITATION RESEARCH & TRAINING CENTER
FOR MULTIPLE SCLEROSIS
ALBERT EINSTEIN COLLEGE OF MEDICINE
YESHIVA UNIVERSITY
1300 MORRIS PARK AVENUE
BRONX, NY 10461

Independent Living Training Program Survey
Page 2

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Two staff members are disabled. They participate on a day-to-day basis in all of the activities, both clinical and research, of the Research and Training Center.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

Indirectly. All programs are planned in response to the needs of disabled people.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

No comment.

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

a) Courses on the history and philosophy of independent living should be covered in any Rehabilitation program.

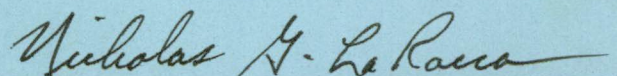
b) Courses in Rehabilitation should be included in the training for anyone in the health field.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

Not applicable

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

Not applicable.


Respondent's Name

Respondent's Name Nicholas LaRocca, Ph.D.

Independent Living Training Program Survey

Organization: Research and Training Center for Multiple Sclerosis

Date: _____

Please return to:
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ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
1. Independent Living: Day hospital rehabilitation and independent living for handicapped MS patients	continuing ed.	research and evaluation	N/A (cost supported by grants)		100	varied (all are MS patients)
2. Neurogenic bladder management in MS.	continuing ed.	consumer education program regarding bladder management	N/A	64	50	varied.
3. Patient conference on bladder management	continuing ed.	consumer education program regarding bladder management	N/A	36	50	varied.
4. Medical rehabilitation: The value of physical therapy in improving gait in MS.	continuing ed.	research	N/A		100	varied.

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(914) 723-7916

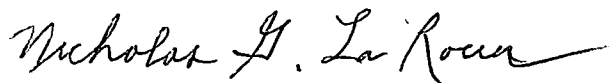
February 15, 1984

Mr. Lex Frieden
Independent Living Research Utilization
P.O. Box 20095
Houston, Texas 77225

Dear Mr. Frieden:

Our program and many of our training activities are only peripherally related to what is ordinarily referred to as "Independent Living." Nevertheless, we have responded to your survey. I think that your questionnaire was so vague that it was hard at times to know exactly what information you needed. If it were repeated, you might try to focus the questions more while retaining the opportunity for open-ended responses.

Sincerely,



Nicholas LaRocca, Ph.D.

NGL:nad

D. Lohmeyer

George Washington University

C-504

Washington, DC 20052

Respondent's Name DONALD C. LINKOWSKI, Ph.D. Independent Living Training Program Survey

Organization: George Washington University

Date: _____

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Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Independent Living in Rehabilitation	MA	See enclosed outline	\$750 for 3 s.h. tuition	24 offered in 1982 only	25%	Education grad student, ILP Manager
First, Second, and Third Annual Regional Independent Living Conference	Continuing Education Reg III RRCEP	Note: This course was done cooperatively by the Capital Area Rehabil. Educators Assn. It was offered at the same time at GWU, Gallaudet, Univ. of Md. and Coppin State College Rehab Counseling Programs - See notes of Planning Meeting for 1984 Conference	Registration fee \$35 plus Travel Expenses	60-80	60%	ILP Manager This year ILP Board Members will be invited.

RECEIVED MAR 2 1984

Focuses on those issues necessary for the development and implementation of independent living services for the disabled. Intended for human service professionals, such concerns as the rehabilitation process, home-management, independent living centers, and program development will be covered.

COURSE OBJECTIVES

Upon completion of the course the student should be capable of:

- 1) Describing the philosophical and legislative basis of the Independent Living movement.
- 2) Distinguishing among vocational and independent living rehabilitation programs.
- 3) Comparing the various personal, social and environmental limitations imposed by severe disability.
- 4) Listing the range of reactions to loss in the individual and the environment.
- 5) Contrasting the roles and functions of professional and peer service providers in independent living.
- 6) Describing the steps involved in assessing client and community needs in independent living.
- 7) Describing the techniques involved in community organization and resource development in independent living.
- 8) Distinguishing among counseling and coordination strategies involved in developing independent living programs
- 9) Developing a proposal for an independent living program for a specified severely disabled population (s).

PROCESS TO ACHIEVE OBJECTIVES

Through class lectures, field visits, guest lecturers, and selected reading, the student will be able to achieve the designated course objectives.

CLASS OUTLINE/SCHEDULE

January 14th: Introduction
Overview of Course and Assignments
Concepts in INdependent Living
History of Independent Living

January 21st: Models of Independent Living
(Gallaudet)

January 28th: The Rehabilitation Process and INdependent Living
(Joint Meeting of four programs & Guest speaker on topic)

February 4th: Developmental Approach to Independent Living; Age-related Issues
(Maryland) Mental Illness Issues and Independent Living
Guest Speaker: Pam Finnerty

February 11th: The Client in Independent Living
(Gallaudet) Types of Severe Disability and their implications for Independent Living
Emotional Reaction to Severe Disability
Guest Speaker (Don Linkowski)

February 18th: Sexuality and Disability: Implications for Independent Living
(Maryland) Guest Speaker (Sue Bregman)

February 25th: The Rehabilitation Process in Independent Living
(Gallaudet) Guest Speaker (Bonnie from Coppin State College)

March 4th: The Law and Independent Living
(Maryland) Advocacy Issues
Guest Speaker (Frank Ridley, Lawyer)

March 11th: Field Visits (Maryland)
Spring Recess (Gallaudet)

March 18th: Spring Recess (Maryland)
Field Visits (Gallaudet)

March 25th: Role of the Family in Independent Living
(Gallaudet) Paul Power

April 1st: Home Management Issues in Independent Living
(Maryland) Approaches to Administration, Finance, Supervision, and programming
for group living situations.

April 8th: Developing Programs in Independent Living
(Gallaudet) Steps in Program Development
Skills for the Program Administrator
Developing Community Linkages
Marita Danek

April 15th: Developing Rehabilitation Plans for Independent Living Clients
(Maryland) (Paul Power)

April 22nd: Joint Seminar on Independent Living

April 29th: Student Reports
(Gallaudet)

May 6th: Summary and Projections for Independent Living
(Maryland)

READING

Attached to this course outline is a bibliography. These books will be available to the students and other selected readings will be distributed by the Instructors.

ASSIGNMENTS

- 1) Report of a Field Visit to an Independent Living Facility
(Outline of this report will be discussed in class)
This will be due on April 1st
- 2) Reaction paper on an article related to independent living issues
(Format will be discussed in class)
This will be due on March 4th
- 3) A project paper on Independent Living. The student will select one topic in the area of independent living, and will write a 10-14 pg., double-spaced, typewritten paper on the topic. The following issues will be covered:
 - a) Literature review on the topic
 - b) Integration of topic with material presented in class
 - c) Programmatic issues related to the topic
 - d) Implementation and Application

This paper is due on May 6th

- 4) A case study analysis from Independent Living. This will be distributed in class on April 8th, and is due on April 15th.

Points will be attached to each assignment, and the student's final grade will relate to the points accumulated. Any late assignment will be penalized in points subtracted.

EXPECTATIONS

Students are expected to attend every class. If for some reason the student cannot attend, please notify Dr. Danek or Dr. Power:

Dr. Power: 454-2027/28

Dr. Danek: 651-5586

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October 31, 1983

TO: CIL's Planning Committee

FROM: Donald C. Linkowski *Alan*
Co-Director RRCEP/GWU
CIL'S Meeting Coordinator

SUBJECT: Notes on Planning for 1984
Region III CIL'S Meeting

PLEASE READ THESE NOTES CAREFULLY. MAKE NECESSARY
CORRECTIONS OR ANY SUGGESTIONS IN THE MARGIN. FEEL FREE TO ADD
ANY AND ALL FURTHER IDEAS YOU MAY HAVE FOR THIS TRAINING CONFERENCE.
RETURN TO DON LINKOWSKI AT THE RRCEP/GWU AS SOON AS POSSIBLE, BUT
NO LATER THAN NOVEMBER 18TH. THIS FURTHER INPUT WILL BE THE BASIS
FOR A TELEPHONE CONFERENCE CALL AMONG JOHN CHAPPELL, ANNE WEEKS,
KEITH BEICHNER, AND MYSELF TO TAKE PLACE NOVEMBER 21ST OR 22ND.

*Beichner Annor
1 PM 21st
Day*

Meeting Notes - October 20, 1983 - Regional Office,
Philadelphia, PA.

All Committee members were in attendance except that
Robin Weinstock substituted for Linda Wasserman.

Following a warm welcome and introduction from the
Region III RSA Commissioner, Dr. Ralph N. Pacinelli,
and the CIL's Regional Representative, Mr. Keith
Beichner, the members of the Planning Committee in-
troduced themselves and their interests related to
the next Regional CIL's Training Conference. Next,
the RRCEP Coordinator for the 1984 CIL's Conference,
Don Linkowski, reviewed the agenda and results of the
previous year's conference. *and survey info.* After considerable

discussion and revisions of themes the following emerged:

SUPPORT FOR INDEPENDENCE: NETWORKING FOR ADVOCACY AND ACCOUNTABILITY.

Some possible objectives for the conference are:

1. To review the philosophical principles of and commitments to advocacy in the independent living program;
2. To enhance knowledge and specific skills related to accountability as supportive of advocacy in independent living;
3. To provide an opportunity for the development of an independent living network within the region;
4. To share information about independent living programs among the six states within the Region;
5. To identify and prioritize independent living issues within the States and the Region;
6. To develop a plan for action for the next year for each of the States and the Region.

The Planning Committee nominated and elected John Chappell and Anne Weeks as Co-chairs, one to focus on the subtheme of Advocacy and the other on the subtheme of Accountability. They along with Keith Beichner and Don Linkowski will be following-up on the Committee's input.

The tentative three-day program plan follows:

Day 1 (Tuesday, April 10th)

1:00-3:00 PM Registration

3:00-5:00 PM State Reports (one CIL from each State to
present a single asset of their program)

5:00-7:00 PM Social Period

7:00-8:30 PM Group Dinner

8:30-10:00 PM Executive Session (CIL, State VR, and
Regional Representatives ? ?)

Introduction of Networking Proposals

Day 2 (Wednesday, April 11th)

8:30-9:00 AM Opening

Welcome - Dr. Pacinelli

Introduction - Mr. Chappell

- Ms. Weeks

Logistics - Dr. Linkowski

Others ? ?

9:00-10:30 AM Keynote Panel

Two or three people to each address
both themes of Advocacy and Account-
ability. Each can present a 15-20
minute address, then react to each other,
and respond to questions and ideas from the
audience. Topic of Panel: Advocacy and
Accountability in Support of Independence.
(Ed Roberts, Judy Heumann (Spelling?) and
June Kaioles have been suggested. Need
more names).

10:30-10:45 AM Break

Concurrent

10:45-12:15 PM First Workshop Sessions. Four to six

workshops to be specifically focused in Accountability and/or Advocacy areas.

Each to have objectives regarding knowledge and skills to be developed.

Some possible areas for workshops include:

- Medicaid Waivers for VR Services.
How some IL Programs have done it.
 - Demonstration of computer software for accounting, and other management functions.
 - Advocacy workshops including areas of Legislation, Finances, and Services (Need to locate and review DD resource documents on advocacy developed by Carolyn White-Hodgins).
 - Grant Management and the auditing process (could involve the Inspector General and Grants management personnel within the regional office?).
 - Networking by use of computer bulletin boards
- Other???

12:15-1:30 PM Lunch On Your Own

*Spec. Net -
HEX -
Deaf Net -
Other*

1:30-3:00 PM Second Concurrent Workshop Sessions

Repeat of Workshops -

Participants may select another one
to attend.

3:00-3:15 PM Break

3:15-4:45 PM Third Concurrent Workshop Sessions

Repeat of Workshops

Evening

7:00-9:00 PM Informal Sharing (Need your input)

Day 3 (Thursday, April 12th)

8:30-9:45 AM Executive Session (CIL, State VR,
Regional Representatives)
Resolutions re Network within Region

9:45-10 AM Break

10:00-11:30 AM Work Groups meet by State to:

1. Identify IL Issues
2. Prioritize Issues
3. Outline State Action Plans
for Next Year and Beyond (?)

11:30-12:15 PM Group Reports to Total Group

12:15-1:30 PM Lunch On Your Own

1:30-3:00 PM Small Groups (Not by State?)

Identify issues and identify ideas for
Regional
a ~~State~~ plan.

3:00-3:15 PM Break

3:15-4:15 PM Panel of Representatives from small groups to present and discuss issues and ideas toward development of a Regional Plan.

4:15-4:45 PM Summary and Synthesis
(Need your ideas here)

4:45-5:00 PM Evaluation by RRCEP/GWU

The tentative dates for the conference are April 10, 11, and 12, 1984 in Philadelphia, PA. The University City Sheraton (formally the Holiday Inn where we met last year) is not available during these dates. Other hotels and/or dates are currently being investigated by the RRCEP/GWU.

THANKS FOR ALL OF YOUR HELP. YOU ARE A GREAT GROUP TO WORK WITH.

Philad. PA
Need to sign
contract to
commit space
15-17, 1984
T-R

Don't forget
to wrap up

U.S. Department of Education
Rehabilitation Services Administration
Region III

Planning Committee Members
for the
Third Annual Region III Independent Living Conference
Meeting Date - October 20, 1983

Ms. Virginia Oettinger, CIL Coordinator
Delaware Division for the Visually Impaired
305 West 8th Street
Wilmington, Delaware 19801
Telephone (302) 571-3576

Ms. Gloria Carpeneto, Executive Director
Maryland Citizens for Housing for the Disabled, Inc.
Independent Living Service Center
406 West Franklin Street
Baltimore, Maryland 21201
Telephone (301) 225-0900 or (301) 243-5445

Mr. W. Anthony Dean, Assistant Director
Maryland Citizens for Housing for the Disabled, Inc.
Independent Living Service Center
406 West Franklin Street
Baltimore, Maryland 21201
Telephone (301) 225-0900 or (301) 243-5445

Mr. Merton Gilliam, CIL Coordinator
Rehabilitation Services Administration
Commission on Social Services
Department of Human Services
Government of the District of Columbia
605 "G" Street, N.W.
Washington, D.C. 20004
Telephone (202) 727-0946

Mr. Don Galloway, Director
District of Columbia (D.C.) Services for Independent Living
1400 Florida Avenue, N.E.
Suite 3
Washington, D.C. 20002
Telephone (202) 397-8510

Ms. Linda Wasserman, CIL Coordinator
Nevil Services for the Blind
919 Walnut Street
Philadelphia, Pennsylvania 19107
Telephone (215) 627-3501

Page 2 - Planning Committee Members for the Third Annual Region III
Independent Living Conference

Mr. John Wade, CIL Project Director
Virginia Department of Rehabilitative Services
4901 Fitzhugh Avenue
Richmond, Virginia 23230
Telephone (804) 257-0281

Mr. John Chappell, Jr., Executive Director
Endeppence Center of Tidewater
855 Brambleton Avenue
Norfolk, Virginia 23510
Telephone (804) 623-8069

Ms. Anne Weeks, Acting Director
Huntington Center for Independent Living, Inc.
914½ Fifth Avenue
Huntington, West Virginia 25701
Telephone (304) 525-3324

Mr. Keith Beichner, Regional Representative for Independent Living
Ex Officio Member of the Planning Committee
Rehabilitation Services Administration
Department of Education
3535 Market Street
P. O. Box 13716
Philadelphia, Pennsylvania 19101
Telephone (215) 596-0314

Dr. Donald C. Linkowski, Co-Director RRCEP/GWU
Coordinator for the CIL Training Conference
George Washington University
Building C-504
Washington, D.C. 20052
Telephone (202) 676-7204

RRCEP/GWU
11/2/83

Respondent's Name Susan Daniels

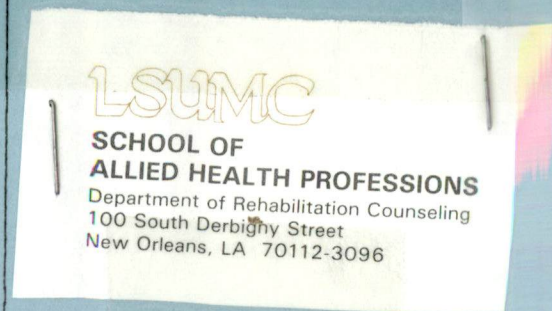
Independent Living Training Program Survey

Organization: LSUMC - Dept of Rehab Counseling

Date: _____

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Rehab for Independent Living	BS	history, case management IL skills	185	15	2	undergrad students
Individualized Rehab Planning	BS	assessing client skills community resources case planning	185	15	2	undergrad students



RECEIVED FEB 13 1984

DEPARTMENT OF HUMAN RESOURCES
THE UNIVERSITY OF SCRANTON
SCRANTON, PENNSYLVANIA 18510
(717) 961-7634



Undergraduate Programs
Health & Human Services
Human Services
Health & Human Services Administration

Graduate Programs
*Rehabilitation Counseling Program
Human Resources Administration

February 8, 1984

Lex Frieden
Independent Living Research Utilization
P.O. Box 20095
Houston, Texas 77225

Dear Lex:

Did you have the NCRE Research Committee approval of your study? Contact Ken Reagles at Syracuse University for details.

Sincerely yours,

Joseph A. Szuhay, Ph.D.
Chairman/Professor

JAS/krh

Respondent's Name Martha Walker

Independent Living Training Program Survey

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225Organization: Kent State University

Date: _____

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Introduction to Rehabilitation	MA	History and philosophy, community resources (a portion of this course deals with IL movement, its history and philosophy and relationship to rehabilitation)	\$95.25 per hr.	25	8-12%	graduate student
Medical Information	M#	Medical, bioengineering information (a portion of this course is devoted to IL model contrasted with medical model. Videotapes of IL centers are shown, assistive devices are demonstrated, and consulting skills are practiced for rehabilitation planning to include Independent Living.)	"	25	8-12%	graduate students (the course attracts exercise physiology, speech and hearing, occupational therapy students as well as rehabilitation counseling)

Respondent's Name Bonita Walker

Independent Living Training Program Survey

Please return to:

Lex Frieden

ILRU/TIRR

P.O. Box 20095

Houston, TX 77225

Organization: Kent State University

Date: _____

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and management, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Psychi-Social Impact of Disability	MA	Ecological analysis of the effect of disability on the individual, the family, employers, public. International studies of different countries' views and programs are included. Finklestein's work on stigma is used in concert with a simulation in an attempt to personalize experience of disability.	\$95.25 per hour (graduate cost)	25	8-12%	graduate student
Occupational Aspects of Disability	MA	Vocational/independent living concerns Rehab engineering, site modifications				
Internship and 1/84 Practice	MA	Supervised experience involves disabled students services at KSH, internship placements in FC Centers and rehab facilities	"	25	8-12%	graduate student

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Disabled persons are invited speakers/discussants in every class session where their expertise is desirable. This amounts to about 20 hours of contact per year, distributed over the courses described on the survey. Disabled persons often function as supervisors of our students' internships, if they are CRCs.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

Doris Brenner, of Cleveland's Services for Independent Living is on our Advisory Board and has been very helpful. In addition, two other members of our Advisory Board are disabled and work as rehabilitation counselors. Our students who are disabled also teach, evaluate, and redesign our curricula.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

If "over-professionalization" means focusing on the individual's problems and not attending to the ills of our society, I would say I am concerned. I am in complete agreement with Doris Brenner, that rehab counselors and disabled persons should work as partners in IL, with a humility and mutuality often not observed in "professional-consumer" interaction. To the degree that IL becomes dependent upon government funds →

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

I am in full agreement, and think legislation, resources, and the skill of community organization should also be part of a "rehabilitation related" program. Rather than separate courses however, I think IL is an outgrowth of rehabilitative history and is most correctly taught as part of a continuum of change in this country.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

KSU does not offer a degree, specialty, or other certification in IL. I think new degrees, specialties, or certifications may "over-professionalize" in the sense of cordoning off information and concern that should be available to a wide range of health, education, political, social and legal workers and leaders.

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

Your survey has made me realize how few IL managers or board members we meet with our typical graduate structure. I will plan toward workshops/continuing education experiences that will bring the broader rehabilitation community (MR, MH, PMR, etc.) in contact with the excitement of IL thought of leaders.

Martha L. Walker
Respondent's Name

I fear IC will become as "institutionalized" as any other system which must be accountable to the funding source. I have never understood the antipathy of consumer vs. professional, except as the "fall-out" of professional arrogance. Hopefully, the training and motivation of rehabilitation counselors prevents such attitudes, making a real partnership possible.

Lex,
I'd appreciate it if you or someone
you esteem could read through this and advise
us about its appeal (or insult) to I.L. Martha

Kent State



REHABILITATION COUNSELOR
EDUCATION PROGRAM

AREAS FOR ELECTIVE STUDY

Students are encouraged to use elective hours to build areas of specialization. The following concentrations and courses are suggested:

Mental Retardation

SPED 53961	Behavior Management in Special Education	(3)
SPED 53400	Introduction to Developmental Disability and Community Services	(3)
SPED 53952	Occupational and Leisure Preparation of M.S.P.H. Individuals	(3)
CPSE 6/77593	Behavioral Science in the Health Professions (Selected Topics)	(1-3)

Psychiatric Rehabilitation

PSYC 51363	Physiological Psychology	(3)
PSYC 6/70170	Behavior Disorders	(3)
PSYC 50111	Abnormal Psychology	(3)
PSYC 6/87595	Psychiatric Rehabilitation	(2)

Deafness

SPED 53320	Methods in Manual Communication I	(3)
SPED 53321	Methods in Manual Communication II	(3)
SPE 53402	Clinical Audiometry	(3)

Gerontology

SPE 54130	Communication Problems of the Aging	(2)
SOC 52010	Death and Dying	(3)
HOEC 54021	Homemaker Rehabilitation	(3)
CPSE 6/77593	Behavioral Science in the Health Professions (Selected Topics)	(1-3)

Corrections

CORR 66762	The Administration of Criminal and Juvenile Justice Systems	(3)
CORR 66765	Types of Criminal Behavior	(3)
CORR 66766	Institutional and Community Corrections	(4)

Substance Abuse

HSED 54050	Drug Education Programs	(2)
CPSE 6/77665	Drug Counseling	(3)
CPSE 6/77593	Behavioral Science in the Health Professions (Selected Topics)	(1-3)

Rehabilitation Administration

CPSE 6/77746	Administration and Coordination of Rehabilitation Services	(2)
BAD 6/74272	Industrial Relations	(3)
BAD 6/75051	Marketing Management	(3)
PADM/BAD70373	Public Budgeting and Financial Management	(3)

REHABILITATION COUNSELOR CERTIFICATION

Following completion of a master's degree program in rehabilitation counselor education, the graduate is eligible to sit for written examination by the Committee on Rehabilitation Counselor Certification. This nationally standardized examination is scheduled for those desiring to become a Certified Rehabilitation Counselor (C.R.C.). This is a credential recognized in the United States as evidence of competence in rehabilitation counseling. Kent State University's rehabilitation counselor education program is accredited by the Commission on Rehabilitation Education.

FOR FURTHER INFORMATION:

Program Coordinator
Rehabilitation Counselor Education Program
Counseling & Personnel Services Education
310 White Hall
Kent State University
Kent, Ohio 44242
Telephone: (216) 672-2715

Edition 12/82

KENT STATE UNIVERSITY

Graduate School of Education

Department of Counseling and Personnel Services Education

THE REHABILITATION COUNSELOR EDUCATION PROGRAM

OVERVIEW

Rehabilitation counseling is a separate program emphasis at Kent State University; it is a focus in counseling which demands unique skills. This description has been written to clarify the role and function of the rehabilitation counselor and the preparation offered at Kent State University. It is important that you understand precisely the unique competencies you would acquire in this program, for they are not interchangeable with social work, school counseling, or other counseling specialties.

Rehabilitation counseling is a process--a process which moves a person with a disability toward fullest functioning. Typically, clients of rehabilitation counselors are late adolescents or adults who have physical, emotional, or intellectual disabilities. The goal of rehabilitation counseling is the return of the client to productive membership in society; so a vocational and independent-living emphasis is basic in rehabilitation philosophy. The mission of the Rehabilitation Counselor Education Program at Kent State University is to prepare committed, competent professionals who will provide quality service to handicapped individuals.

Skills Required

The competence of a rehabilitation counselor rests in a variety of skills used throughout a process which returns clients to independence, activity and participation in society. Counseling is the core of every interaction the counselor has with the client. Understanding the clients' feelings about themselves, their disability, their world, and their work in that world makes it possible for the counselor to plan strategies for dealing with the problems which brought them to the counselor. The counselor must also make decisions and expedite a wide range of other services, such as further psychological or vocational evaluation, medical evaluation and restorative procedures, training or education for the client, and job placement. Individualized planning and utilization of community resources are also essential in the performance of a rehabilitation counselor.

The Practice

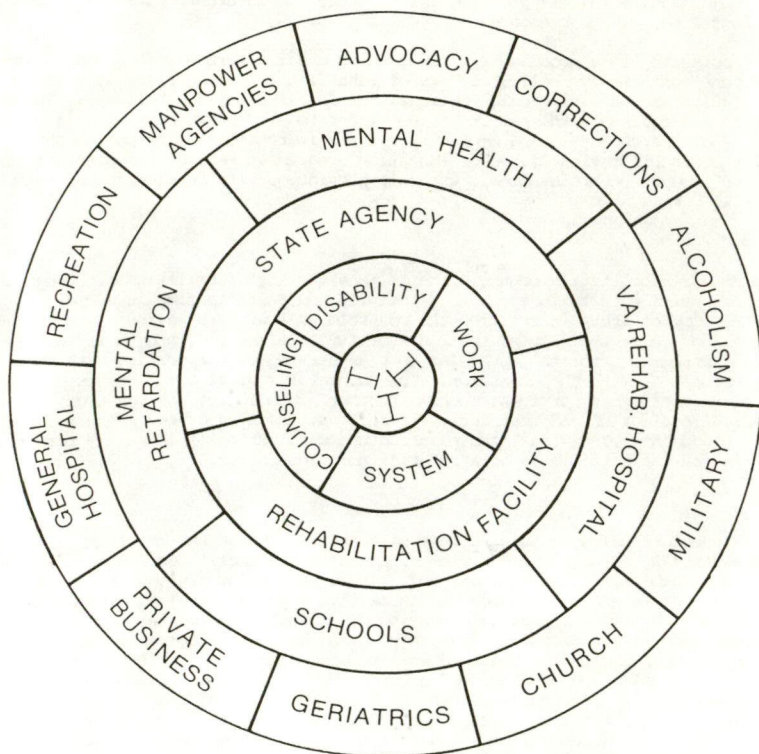
Rehabilitation counselors may work in a variety of settings, though the major employer is the state/federal vocational rehabilitation system of agencies and facilities. A counselor with a state vocational rehabilitation agency may be assigned a special caseload or a general caseload containing people with many types of disability. Special caseloads are usually composed of clients with severe disabilities--blindness, alcoholism, mental illness, deafness. Other employers of rehabilitation counselors are veterans hospitals, correctional institutions, mental hospitals, private and public health agencies, comprehensive rehabilitation facilities, private industry, and evaluation programs. The outer three circles on the figure on page 2 illustrate the types of work setting available to the rehabilitation counselor. The inner-most of the three (state agencies and facilities) represent the most frequent employment site, the middle is less frequent but with a distinct rehabilitation function, and the outer circle contains settings where rehabilitation is secondary to the primary objective of the setting.

The Philosophy

In the Kent State University rehabilitation counselor training program, the process of rehabilitation is defined by four values which permeate all the phases of the rehabilitation process: individualization, integration, independence, and industry. These values are represented by the inner circle of Figure 1.

FIGURE I

Rehabilitation Counseling: Philosophy and Practice



EDF 60098 Research in Education (2 hours): Offers studies in types of research, selection of problems, collection and classification of data, organization, presentation, interpretation of materials.

CPSE 6/77723 Medical Information for Rehabilitation Counselors (3 hours): Rehabilitation counselors must know the effect of injury to the body systems and the newest techniques available to their clients. Basic vocabulary and rehabilitation concepts are taught via multi-media, self-instructional units. Skills in consultation and rehabilitation planning are taught through simulation and the use of selected speakers. Demonstrations of techniques or equipment are utilized to acquaint students with advances in knowledge.

SUMMER I (Total 6 semester hours credit)

CPSE 77792 Internship in Rehabilitation Counseling (2 hours): Under the joint supervision of a skilled practicing rehabilitation counselor and a University instructor, the student applies the specialty and counseling competencies he/she has accumulated during academic coursework. Refinement of these competencies is accomplished by the student's assumption of responsibility for a limited rehabilitation caseload within a rehabilitation agency or facility. As the first step in the learning process, the University instructor, agency supervisor, and student evaluate and integrate the practical and academic experience through joint discussion and use of performance scales. The student will work two days per week for a ten-week period.

CPSE 6/77776 Seminar on Research in Rehabilitation (2 hours): Students learn to develop a systematic approach to testing theories and practice of rehabilitation through research. Students learn how to review and interpret journal articles for personal and professional use. They learn how to develop research questions and conduct small experiments related to the field of rehabilitation. As students progress in knowledge and practice, they are involved in larger research projects. The projects will be used as a basis for students to produce journal articles and presentations at conferences.

EDF 68904 Learning Theories Applied in Education (2 hours): Theories of learning and their application to the educative process. Special emphasis on application of learning theories to problems of classroom teaching generally and to classroom management.

SUMMER III (Total 7 semester hours credit)

CPSE 77792 Internship in Rehabilitation Counseling (2 hours): (Continuation from Summer I)

EDF 6/79567 Social, Legal and Professional Issues in Education (2 hours): Educational implications of significant social and professional issues and controversies. Legal aspects of current educational policies and practices will also be analyzed.

Electives (3 hours)

FALL SEMESTER (17 semester hours credit)

CPSE 6/77725 Psycho-Social Impact of Disability (3 hours): Familiarity with basic concepts in rehabilitation is accomplished by reading widely in biography, autobiographies and fiction concerned with persons adjusting to disability or loss. Simulation of a disability is required to personalize concepts. Guidelines for establishing the "normal deviant" in society's view are discussed and formalized through the development of intervention modules built upon concepts. The writings of sociologists, psychologists, and educators are utilized to underscore concepts of stigma, somatopsychology, coping, sexual adjustment, parenting, and societal rehabilitation.

CPSE 6/77810 Group Process and Analysis (3 hours): Experiential/didactic study of group dynamics to gain familiarity with group dynamics research and application with an emphasis on task groups.

CPSE 77792 Internship in Rehabilitation Counseling (8): Student works for four days per week in a rehabilitation agency or facility under the direction of a certified rehabilitation counselor. The student assumes more responsibility for client services during this advanced placement.

Electives (3 hours)

Students are asked to evaluate each course at the end of each grading period. At the conclusion of academic work, a thorough evaluation of the program is completed by students and faculty.

PROGRAM DESCRIPTIONS AND CLASS SCHEDULE

FALL SEMESTER (TOTAL 15 SEMESTER HOURS CREDIT)

CPSE 6/77712 Introduction to Rehabilitation (3 hours): Rehabilitation is described as part of a larger system of state/federal programs, complemented by private, not-for-profit facilities. The scope of services and interface with other systems is emphasized. Legal and historical bases are explored, as well as current practice and concerns within the field. Exposure to varied settings is provided through field trips. Personal exposure to persons with different functional limitations is provided within a structured experience.

CPSE 6/77526 Principles of Measurement and Appraisal (3 hours): Extensive review of measurement theory and principles of appraisal. Overview of types of measurement instrument.

CPSE 6/77727 Appraisal Laboratory: Rehabilitation Counseling (2 hours): Rehabilitation counselors evaluate clients for rehabilitation potential and assist clients in detailing vocational goals. The conduct of a thorough appraisal of pertinent data is essential to perform these functions. Knowledge of sources of information and skill in interpreting the results of an appraisal is stressed in this course. Effective use of psychological consultation is also emphasized, with terminal skills developed in decision making and appropriate rehabilitation planning. A survey of psychometric, vocational, work evaluation and educational strategies and instrumentation is included.

CPSE 6/77530 Introduction to Counseling (2 hours): A historical and developmental survey of counseling practice examines the nature of counseling process and relationships as described from major theoretical perspectives. Must be taken concurrently with CPSE 67531.

CPSE 6/77531 Individual Counseling Procedures (2 hours): Didactic and experiential training in basic interviewing and counseling techniques prepares the student for practicum through role playing, videotaped feedback, and simulation. Must be taken concurrently with CPSE 67530.

Elective(s) - 3 hours

SPRING SEMESTER (TOTAL 16 SEMESTER HOURS CREDIT)

CPSE 6/77736 Rehabilitation Counseling Practicum (4 hours): Students having completed the procedures course are assigned a practicum supervisor and begin successive approximations to actual demands of a rehabilitation counselor's job. Client-teachers are utilized for immediate feedback to students focusing on communication skills and interviewing skills learned in a previous semester. As students demonstrate readiness, they are assigned a client with immediate problems. Problem identification, goal-setting, and choice of strategies are practiced. Sessions are held under supervision within practicum facilities, initially. As students progress, they may be assigned placement in the rehabilitation community.

CPSE 6/77732 Occupational Aspects of Disability (4 hours): Rehabilitation counselors must be vocational experts if they are to assist clients in gaining independence. Traditional sources of information such as the Dictionary of Occupational Titles and the Occupational Outlook Handbook are studied, along with local job information sources. Procedures for classifying and filing information are discussed. Analyzing a job for requirements is emphasized, along with industrial surveys. Personal experience will be provided in development of skills in evaluating and developing job modifications and rehabilitation engineering devices. Knowledge of federal regulations regarding employment of the handicapped is included. Placement strategies are compared and practiced, consistent with career development theory. Systems and theories of independent daily living are compared and practiced.

CPSE 6/77582 Career Development and Guidance (3 hours): Survey of principles and practices of career development and guidance. Three substantive themes are included: world of work and vocational resources, theories of career choice and adjustment, and practical models and methods for providing career guidance to individuals and groups.

Individualization

The handicapped person is an individual with a unique constellation of strengths, abilities, weaknesses, and disabilities who brings to the rehabilitation process interests, hopes, goals and fears, as well as his or her past successes and failures. The process of defining and implementing a program of services and counseling to enable a person to deal with functional handicaps must be as individual as each person needing rehabilitation.

Integration

Rehabilitation is a goal-oriented program with a specific outcome objective: the disabled individual's achievement of maximum functional potential in all phases of life. Rehabilitation aims to provide each handicapped individual with an equal opportunity to participate in all the activities that are available to citizens of the United States, and to enable handicapped persons to be integrated into the society's mainstream.

Integration is a value that is achieved from two directions. Society must attend to it by eliminating barriers, by working against detrimental attitudes, and by making access one of the major considerations when developing a new program or a new facility. Integration is also the responsibility of the professionals associated with the client's rehabilitation process. It is imperative that the handicapped individual be as strong and as competent as he or she can be in order to be able to take advantage of what is provided and accessible.

Independence

The rehabilitation process should provide for or enable each client to achieve his or her maximum independence. The value of independence is widely demonstrated not only as a desired client outcome, but as a necessity for effective program implementation. This is demonstrated by the autonomy afforded the rehabilitation counselor and supervisor in comparison with other social welfare systems.

Industry

Industry is a word purposefully chosen because of its many connotations. The philosophy of rehabilitation to which we subscribe places emphasis on the right and associated responsibility of the individual to employ his or her time gainfully. For the handicapped individual, this means that there must be access to at least "traditional" avenues of vocational and recreational actualization. Industry is used in the sense of a busy hand, a challenged mind, a relaxed body, and the right to choose when and how the goals are met. For vocational rehabilitation processes, our philosophy focuses on the value of work, both to the handicapped individual (psychologically and financially) and to society. Focusing on the place of industry in the life of a person, be it industry related to leisure time, industry related to work time, or industry related to personal time, is a value subscribed to in this program.

Goals of the Program

The goal of the rehabilitation counseling master's program at Kent State University is the development of persons who are living effectively and can intervene constructively in the lives of handicapped individuals. All coursework is directly related to the attitudes, knowledge, and skills necessary to provide quality services to the rehabilitation client.

The nature of the program at Kent State University is prescribed by the belief that early and continual exposure to the population to be served and development of professional skills predict success as a rehabilitation counselor. Course content is tied to observable skills which transfer to job performance and delivery to clients. Students begin counseling practicum during their second semester, after demonstrating mastery of basic helping skills. Throughout the four terms of academic work, increasing responsibility for rehabilitation clients is assigned as students become more competent. The master's degree in rehabilitation counseling requires 61 semester hours of coursework including internship.

In the past few years, students interested in working with adults in private facilities for the aged, employment agencies, corrections, or churches have found the rehabilitation counselor education program suited to their needs. Individualized programs of instruction can be arranged for students who wish to study beyond the basic coursework related to rehabilitation counseling. Such courses are considered further specialization. They are added to the core rehabilitation courses and lead to an Educational Specialist degree.

Advanced study is offered through three Ph.D. degrees within the department. The M.Ed. in rehabilitation counseling is a basis for a doctoral program in either Counselor Education or Counseling Psychology.

Traineeships

The rehabilitation counseling program at Kent State University is one of many programs established during the past two decades to help meet the staffing needs of public and private rehabilitation agencies. In an effort to attract capable students to further their study in the knowledge and skills necessary to help encourage independence among disabled and disadvantaged persons, the Rehabilitation Services Administration of the United States Education Department has offered varying numbers of traineeships. The purpose of the traineeship is financial support for students in rehabilitation counselor education, so that full attention and effort can be given to study. Traineeships include payment of tuition and a monthly stipend and assume a commitment to work in a vocational rehabilitation setting:

Trainees are not required to work for the Office of Human Development at the conclusion of their training. Conversely, the Office of Human Development assumes no responsibility for employing or placing such persons. However, trainees are expected, upon completion of their Office of Human Development supported training, to enter areas of employment (whether public or private) directly related to the field of training undertaken.

DHEW Publication No. (SRS) 72-04001, page 16

The number of traineeships awarded to Kent State University has varied each year, and notification of the number and amount of traineeships is not received until August. Decisions regarding allocation of the traineeships are then made by the faculty.

FACULTY IN PROGRAM

Gregory A. Lofaro received his doctorate in counselor education from the State University of New York at Buffalo. His areas of interest in teaching and research are supervision, counseling theory and practice, group counseling and psychological aspects of disability. In addition to these areas, Dr. Lofaro has worked as a counselor and as a consultant primarily in psychiatric and mental health settings.

Rita W. Myers received her doctorate in counselor education at Kent State University in 1981. She has experience as a counselor and consultant with parent couples and individuals in an early intervention program and a teacher corps community council program. She also has worked with physically and emotionally disabled persons.

Roy J. Phillips earned his doctorate in rehabilitation counseling psychology from the University of Wisconsin-Madison. His areas of interest in teaching and research are vocational evaluation, job placement and counselor performance. He has worked as a rehabilitation counselor, vocational evaluator, and placement specialist in facilities which provide services to psychiatric, disadvantaged, and developmentally disabled populations.

Steven E. Simon received his doctorate in counselor education at Kent State University in 1981 with an emphasis in human services management. He has had experience in counseling and human service administration, primarily with disabled persons. Since 1974, he has administered the Veterans Administration Regional Office in Cleveland, Ohio.

Martha Lentz Walker earned her master's degree in rehabilitation counseling and her doctoral degree in curriculum and instruction at the University of Tennessee at Knoxville. Her areas of interest are the educational impact of disability, needs assessment in rehabilitation programming, and counseling as problem solving. She has worked with deaf and speech impaired persons as clients and with a variety of physically impaired clients and counselors as a consultant. She is coordinator of the rehabilitation counselor education program.

ADMISSION, SELECTION AND ADVISEMENT

The student must meet the admission standards of the Graduate School of Education. Admission to the rehabilitation counseling program are considered once a year, in early Spring.

Catalogs, application materials, and information regarding admission are available at the Graduate School of Education office, 409 White Hall, Kent State University, Kent, Ohio 44242. Telephone (216) 672-2536. In addition to the Graduate School application, a program application is also required. This may be obtained from the rehabilitation counseling program coordinator at the address at the end of this booklet. All application materials are to be returned to the Graduate School of Education office.

Deadline for completed application is March 31 of each year.

No prerequisite major is required for the rehabilitation counseling program, though a background in behavioral science is preferred, as the curriculum is skill-oriented and assumes a theoretical exposure to human behavior. Academic performance is regarded as an important factor in selection, though other indicators are considered for students with less than a 2.70 undergraduate grade-point average, such as the Miller Analogies Test, and junior-senior year averages.

Probationary requirements have been established by the Graduate School of Education for students who do not meet these criteria. Acceptable qualification may be determined by consultation with the Coordinator of the Graduate School of Education or his appointed representative.

Following receipt of the program application and completion of application to the Graduate School of Education, an interview with the student applicant is arranged by the Program Coordinator. The ability of the student to utilize the program's learning sequence and his/her potential for success in the field of rehabilitation counseling is assessed during the interview and, if accepted into the program, notification is sent to the applicant immediately.

Students are encouraged to apply to the program during fall semester, schedule an interview during spring semester, and begin coursework in the following fall semester. As courses are arranged sequentially, it is advantageous to start the program in the fall and complete the degree the following fall. Students may participate as part-time students, extending the program over a longer period of time. Course arrangement for part-time students and students who are unable to begin work in the fall semester is planned with close faculty advisement. Most classes are offered in the evening to accommodate part-time students in the program.

A special orientation meeting is held each fall for incoming students. A Student Handbook containing information about the program and directions for different phases of study is distributed to new students. Students are strongly encouraged to join the National Rehabilitation Counseling Association, as a student chapter operates continually at Kent State.

Advisers are assigned for each student. Meetings are held throughout the year individually and as groups for advisement.

February 9, 1984

Martha Lentz Walker
1485 South Boulevard
Kent, Ohio 44240

Dear Lx,

Please excuse the handwritten response to your survey. I am on Research Leave this year and am enjoying the change of working from my home. One of the less-than-pleasant outcomes, however, is being my own secretary.

I wanted to return this survey quickly to you. It really stimulated my thinking, and I look forward to your article in the NCRC Newsletter.

Last March, when we met briefly at the gamut of hearings, I wished for time to talk with you. I feel very fortunate in my association with Doris Brenner and attendance at an excellent IL Regional Conference last June. I believe educators and consumer groups should have much in common and be sources of strength in a real partnership.

I am hopeful of new ideas for extending the university and IL. Thank you for setting this in motion.

Sincerely,
Martha Walker

Respondent's Name Dr. Glen Hendren

Independent Living Training Program Survey

Please return to:
Lex Frieden
ILRU/TIRR
P.O. Box 20095
Houston, TX 77225Organization: Murray State University, Murray, KY

Date: _____

Course Title (Please List)	Course Level (eg, continuing education, BA, MA, PhD)	Course Focus (eg, history and philosophy, research and evaluation, administration and manage- ment, counseling, resource utilization)	Course Cost	Approximate # of Trainees per Year	Approximate % of Trainees Who are Disabled	Predominant Occupation of Trainee (eg, VR counselor, education graduate student, ILP manager, ILP board member)
Survey of Rehabilitation REH-200	B.S.	An introductory overview of the general field of Rehabili- tation. (A sixteen-week college course)	\$105.00	25-30	10%	Enrollees in these courses are undergraduate students. Most are majoring or minoring in Rehabi- litation Services. Other cognate areas represented by students enrolled in these courses include Therapeutic Recreation, Social Work, Psychology, and Communica- tion Disorders. The majority will ultimately seek employment as Rehabilitation Counselors or Vocational Evalua- tors. Many will pursue graduate degrees in Rehabilitation related fields.
Medical and Adjustive Aspects of Disability REH-310	B.S.	Explores a wide range of disabling medical conditions and their implications for rehabilitation programs.	\$105.00	25-30	10%	
Rehabilitation of Intel- lectually, Emotionally and Socially Handicapped Individuals - REH 405	B.S.	Presents information related to the rehabilitation of people who are mentally retarded and/or emotionally disturbed. Examines alter- natives in living arrange- ments. (course also examines issues related to the rehabilitation of socially handicapped people, eg., felons, alcoholics, drug addicts, etc., but does not consider independent living programs for these groups.)	\$105.00			
(See enclosed course descriptions)						

1/84

© ILRU Project
Houston, Texas

1. To what extent are disabled people involved as instructors, consultants, presentors, or panel members for courses or training programs which you now conduct in the area of independent living?

Handicapped people are frequently used as guest speakers and or panelists when their particular disability category is being studied.

2. To what extent were disabled people involved in initiating and/or planning curricula or course material which you now use in the area of independent living?

Very little.

3. What are your feelings about the concerns expressed by some consumer leaders that the area of independent living may soon be compromised and institutionalized by over-professionalization?

I believe that living with a disability gives one a much better understanding of the condition than does simply studying it. I think there should be a balance of academics and experience in determining who should provide leadership in Independent Living Programs.

4. What are your feelings regarding the belief by some rehabilitation educators that courses on the history and philosophy of independent living should be requisite in the curricula of any rehabilitation related degree program?

I do not agree. I believe that IL movement should be included in a historical review of the field of Rehabilitation. We don't have enough room for another course in our curriculum.

5. If your organization or institution offers a degree, specialty, or other certification in the area of independent living, please provide pertinent details.

We offer no such specialty emphasis.

6. Please provide information about any plans which you may have to offer new courses, degrees, specialties, or other certification in the area of independent living.

We currently have no such plans.

Glen Hendren

Respondent's Name

REHABILITATION SERVICES EDUCATION

A Program of Undergraduate Study
at

Murray State University
Murray, Kentucky

Murray State University has a four year training program in Rehabilitation Services. The program is designed to train people to enter a wide range of careers involving work with people who are handicapped.

A handicap is anything that keeps a person from doing what he or she wants to do. Handicaps might include relatively minor things like a lack of money or necessary training to more serious things like a major physical disability or a complicated mental disorder. Clearly, people may be handicapped by their attitudes, their physical and mental limitations, and their life circumstances.

People who work in the field of Rehabilitation are trained to help others overcome all kinds of handicaps. The techniques they use include counseling, vocational evaluation, medical services, job placement, individualized training, and a variety of other approaches. There are many careers which relate directly to the field of Rehabilitation. The related careers include (but are not limited to) occupational therapy, interpreting for deaf people, mobility training for blind people, and rehabilitation education.

The jobs for rehabilitation professionals are found in government agencies, hospitals, rehabilitation facilities, law enforcement facilities, mental health centers, sheltered workshops, and private companies, to name a few. Career opportunities in the field of Rehabilitation are quite good.

The following pages provide a description of courses offered by the Rehabilitation Services Education program. The last page of this packet describes the requirements for major and minor programs of study in Rehabilitation. Your interest in this program is genuinely appreciated.

For more information regarding this program, you may contact:

Dr. Glen Hendren
Director of Rehabilitation Education
Department of Professional Studies
Murray State University
Murray, Kentucky 42071

Telephone: (502) 762-3782

Rehabilitation Education & Training Program - An Overview

COURSE DESCRIPTIONS

REH-099 - Freshman Orientation (1)

REH-101 - Introduction to Human Services (3)

A course designed to provide the student a comprehensive introduction to the various human service professions and how these professions assist individuals in meeting various human needs. The course is also designed to facilitate student career decision making. (Same as GUI-101 and SWK-101.)

* REH-200 - Survey of Rehabilitation Services (3)

An introductory overview of the field of Rehabilitation. Examines historical, philosophical, legislative, and economic basis for rehabilitation programs. Examines the social, psychological, and physical implications of various disabling or handicapping conditions. Introduces problem solving techniques, surveys traditional and non-traditional community resources. Prerequisites: none

REH-220 - Fundamentals of Counseling (3)

A beginning counseling course. A didactic intellectual/experiential laboratory course for assessing and improving interpersonal communications and human relations skills. Designed to develop basic skills needed to function as a practicing counselor. Examines several theories of counseling techniques. Prerequisites: Instructor's consent.

REH-300 - Introduction to Research Methods (3)

This course will focus on the contemporary style of research used in the human service fields. The central core of study will revolve around the applied nature of social research activities. Emphasis will be on the use of survey and field research techniques. Content material in the course should give the student the capability of recognizing the difference between inadequately designed research versus research of a more sophisticated nature. Prerequisites: MAT-107 or 109. (Same as ADM-300 and SWK-300.)

* REH-310 - Medical and Adjustive Aspects of Disability (3)

A systematic review of the human body and disabling conditions which affect it. Identifies interrelationship of body systems. Stresses implications for medical and vocational rehabilitation. Examines psychological aspects of adjustment to disability. Prerequisites: REH 200 or instructor's consent.

REH-404 - Senior Seminar (1)

A small group discussion seminar on current trends, innovative programs, research findings, etc. in rehabilitation. Senior status required.

* REH-405 - Rehabilitation of Intellectually, Emotionally and Socially Handicapped Individuals (3)

A review of problems and considerations related to the rehabilitation of people who are mentally retarded, emotionally disturbed, and/or socially handicapped (e.g., substance abusers, public offenders, etc.). Prerequisites: REH-200, 220, PSY-180 or instructor's consent.

REH-410 - Individuals and Work (3)

Reviews theories of worker motivation. Examines methods of vocational evaluation. Presents skills needed to perform vocational surveys, job analyses, and job modifications. Identifies methods used to organize and disseminate occupational information. Reviews and considerations related to homebound employment opportunities. Prerequisites: REH 410 and instructor's consent.

* indicates courses which place some emphasis on Independent Living.

REH-501 - Treatment Strategies (3)

Designed to investigate beginning case work principles and practices in initial client contacts including subsequent plan and program development. A substantial part of the course deals with principles of behavior modification affecting client change. Prerequisites: REH-200, 220, and PSY-180.

REH-510 - Orientation to Deafness & Hearing Impairments (3)

An orientation to the various types of deafness and hearing impairments and a study of their respective causes. Reviews the medical, vocational, and psycho-social problems associated with deafness. Students will develop basic manual communications (sign language) vocabulary used by a large portion of the deaf population. Prerequisites: REH-200, 220, and /or instructor's consent.

REH-520 - Internship (12)

Students spend a minimum of sixteen weeks in the field, working full time during normal working hours under direct supervision of a university faculty member and a selected member of a rehabilitation setting. Prerequisites: REH-200, 220; SWK-230; REH-310, 410, 501, and instructor's consent. (Rehabilitation majors only).

REH-530 - Independent Study (3)

Designed to afford the individual student an opportunity to study and investigate a specific, generic, or cognate area of rehabilitation under supervision. Prerequisite: instructor's consent. (May also be offered as a topical seminar).

REH-540 - Orientation to Blindness (3)

Designed to acquaint students with the social, psychological, and practical problems involved in the rehabilitation of people who are blind. Students participate in simulation activities which relate to the problems of blindness as a disability. Basic skills in mobility training are also stressed. Prerequisites: REH-200, 220, or instructor's consent.

REH-570 - Evaluation and Assessment (3)

A survey of evaluation and assessment techniques used in the field of rehabilitation to determine one's prognosis for academic, social, interpersonal, and vocational adjustment. Includes an introduction to statistics, a review of various evaluation instruments, report writing, and evaluation of specific client populations. Prerequisites: REH-200, 220.

REH-580 - Individualized Practicum (3)

Under direct supervision of a member of the university faculty and a selected member(s) of a rehabilitative oriented agency or facility, students have the opportunity to experience specific duties and tasks within an agency or facility. Prerequisites: REH-200, 220, 501, and/or instructor's consent.

REH-590 - Principles of Vocational Rehabilitation Counseling (3)

An investigation of the roles and functions of the vocational rehabilitation counselor and his/her interrelatedness with cognate helping professions. Focuses on the development of the Individualized Written Rehabilitation Program (IWRP). Surveys group counseling techniques used in institutional settings. Prerequisites: REH-200, 220, 310, 410, 501, or instructor's consent.

REQUIREMENTS FOR A MAJOR IN REHABILITATION (40 HOURS)

REH-200 - Survey of Rehabilitation Services	3
REH-220 - Fundamentals of Counseling	3
REH-300 - Introduction to Research Methods	3
REH-310 - Medical and Adjustive Aspects of Disability	3
REH-404 - Senior Seminar	1
REH-405 - Rehabilitation of Intellectually, Emotionally and Socially Handicapped Individuals	3
REH-410 - Individuals and Work	3
REH-501 - Treatment Strategies	3
REH-520 - Internship	12

and any two of the following electives:

REH-101 - Introduction to Human Services	3
REH-510 - Orientation to Deafness & Hearing Impairments	3
REH-530 - Independent Study	3
REH-540 - Orientation to Blindness	3
REH-570 - Evaluation and Assessment	3
REH-580 - Individualized Practicum	3
REH-590 - Principles of Vocational Rehabilitation Counseling	3

and completion of the Human Services Core:

*ECO-100 - Contemporary Economics	3
PSY-180 - General Psychology	3
PSY-581 - Abnormal Psychology	3
*SOC-133 - Introduction to Sociology	3
*SOC-231 - Social Problems	3
SWK-230 - Human Behavior and Social Functioning	3

(*can be used to satisfy general education requirements)

REQUIREMENTS FOR A MINOR IN REHABILITATION (21 HOURS)

REH-200 - Survey of Rehabilitation Services	3
REH-220 - Fundamentals of Counseling	3
REH-310 - Medical and Adjustive Aspects of Disability	3
REH-501 - Treatment Strategies	3

AND ANY THREE OF THE FOLLOWING ELECTIVES

REH-101 - Introduction to Human Services	3
REH-405 - Rehabilitation of Intellectually, Emotionally, and Socially Handicapped Individuals	3
REH-410 - Individuals and Work	3
REH-510 - Orientation to Deafness & Hearing Impairments	3
REH-530 - Independent Study	3
REH-540 - Orientation to Blindness	3
REH-570 - Evaluation and Assessment	3
REH-590 - Principles of Vocational Rehabilitation Counseling	3