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# Education and Integration: Partnering the Community with Adults with Developmental Disabilities for St. Madeline Sophia's Center

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**Education and Integration:  
Partnering the Community with Adults with Developmental Disabilities**

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**University of San Diego**

**Research, Design, & Evaluation of Non-Profit Programs (EDLD 500)**

**December 17, 2005**

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### Needs Assessment for Education and Integration

Research indicates that adults with developmental disabilities (ADD) are stigmatized and alienated by societal attitudes due to lack of integration with, and education of, the non-developmentally disabled (Corrigan, et al. 2000). In consideration of this problem, will a program that integrates adults with developmental disabilities with non-developmentally disabled decreased stigmatizing attitudes and stereotype? The hypothesis suggests that a positive association between education, socialization, and modified attitudes exists, and can be quantitatively measured by establishing an intervention that integrates the two populations. Focus groups (FG), key informant interviews (KII), and a literature review (LR) will clarify whether an intervention is needed, and provide a basis of data for its implementation.

#### *Target Population*

Research on existing attitudes, integration, and education of the general population will be gathered. For the purposes of the study students from Grossmont Community College (GCC) in East San Diego County have been identified as a subset of the target population. Selection was based on their demographic representation indicated by a cross section of age, gender, culture, and ethnicity.

Grossmont Community College Demographics 2005							
Gender	Age		Race		Educational Status		
		under 20	27%	Asian	11%	No High School	8%
Male	42%	20-24	34%	Black	7%	High School Degree	80%
Female	58%	25-29	12%	Hispanic	17%	Associate Degree	3%
		30-49	21%	White	54%	Bachelor Degree+	9%
		50+	7%	Other	11%		

www.grossmont.edu

This selection mirrors a similar population study conducted by the University of Chicago Center for Psychiatric Rehabilitation, which found that this population viewed being afflicted by mental retardation as the most negative condition possible, but had a propensity to be open to new experiences that could change existing attitudes (Corrigan, et al. 2000). Most importantly

GCC has a program, Disabilities Service Management (DSM) that trains future caregivers and service providers of ADD, making the students unique for the purpose of the proposed study.

### ***Target Community***

GCC is part of the study's target community of East San Diego County. The demographics parallel GCC (San Diego Sourcebook, 2004), however, the community is unique due to the high concentration of service providers for the developmentally disabled in the area.

The importance of addressing this social problem lies in assuring a future that advances the human and civil rights of individuals with developmental disabilities (DD). The etiology of societal attitudes towards ADD is evidenced through their collective history, and a trail of disturbing human rights, social justice, and criminal justice violations (Smith & Mitchell, 2001), (Petersillia, 2001), (Keyes, Edwards & Perske, 2002). Individuals with DD were used for medical research in the development of both polio and hepatitis vaccines without informed consent (Smith, D.J., 2001). They face physical abuse, violence, and economic abuse at rates significantly higher than for people without DD (Petersillia, 2001). Despite a Supreme Court ruling that ADD defendants in aggregate face a special risk of wrongful execution, only 18 states have passed laws limiting the death penalty based on mental retardation (Atkins v. Virginia, 2002). Current debates in the field of mental retardation question the value of individuals with DD (Stainton, 2001), which is clearly reflective of issues surrounding consent and capacity, prenatal testing, the abortion of disabled fetuses, genetic modification, access to treatment, euthanasia, citizenship, and self-determination (Stainton, 2001).

### ***Findings***

In order to identify the perceived needs and the casual factors that are the impetus for stigma and alienation of ADD, a FG comprised of five experts in the field of ADD and nine KII, which included a representational sample of stakeholders, were conducted. The FG was resolute

upon the need of using a preferred language that describes without implying a negative judgment (APA, 2004). The image created by the word *retarded* becomes a barrier to understanding the abilities of ADD (E. Lewis, personal communication, October 21, 2005). Cognitive assessments of mental retardation imply caps on learning that become a self-fulfilling prophecy (C. Thornton, personal communication, October 21, 2005). Family, caregivers, teachers, and service providers often limit expectations in the misguided attempt to “protect” ADD resulting in denial of their chances to take risks, make mistakes, and learn from experiences (M. E. Stives, personal communication, October 21, 2005). Even the definition of service provider, in and of itself, limits integration by creating separate special services, homes, and programs. When asked for models of successful integration, the FG was unanimous, saying there should be a natural presence in the community such as riding the bus, shopping at the grocery store, and living in neighborhoods. In conclusion, the FG provided feedback on a proposed intervention of an integration program, using community college students as the target population. Although none of the experts disapproved of pursuing the college students as a subset, a spirited discussion did ensue before consensus was reached that the philosophy and implementation of the integration program would be the primary determinant of success. It was suggested to not disclose integration information in the social marketing materials to the target population. To do so would perpetuate the stigma of differences.

In addition to the FG, nine one-on-one KII were conducted using a carefully designed questionnaire that addressed opinions, experience, and best practices with people who are personally and professionally involved with ADD. Participants in the KII included a business owner, county regulator, parent, a researcher in the field, a service provider, a current DSM student, a DSM graduate, a consumer, and educators who regularly interact with ADD. Questions included their relationships to ADD, their opinions of discrimination of ADD, their

knowledge of integrated programs (IP) and how IP changed attitudes and behaviors towards ADD, and their reactions to our proposed program.

A KII business owner who employed three ADD supported the literature review that, when integrated, people with mental retardation have the capacity to enrich the lives of the non-disabled community. “My brother is shy and having the adults with developmental disabilities working there made him open up. It also toned down the antics and softened the demeanor of some of the other employees.” (B. Alderman, personal communication, October 18, 2005). This testimony paralleled the KII of the regulator. Through conducting life-quality assessments, the regulator observed countless volunteers who drastically changed their attitudes toward ADD and collaborated the findings that ADD often possess an honest, natural, positive spontaneity, generosity, and warmth that can have a humanizing effect on others (Smith & Mitchell, 2001). The researcher and service provider echoed the sentiments of the FG. Program design details and the underlying philosophy of the program would be very important in determining success. The target population should be involved in a *partnership* and program designers should be wary of any language, setup or materials that would imply a position of *care taking*.

The KII educator named art, music and physical education as successful integration models where the abilities of ADD are of equal status with the non-DD. Using art as a basis for integration was supported by the literature review. When persons without disabilities engage in the creative process, they are exploring, learning, taking risks, developing trust, building relationships, and opening themselves up to the world at large. Art has the power to affect personal, interpersonal, and societal change (Gislason, Krogh, Nygaard, Phillips, & Proctor, 2005). The current Program Coordinator of the DSM Program further identified that societal attitudes are based on lack of integration, saying, “If we don’t see them, they don’t exist.” (M. Guillermo, personal communication, November 30, 2005). Her statement underscores the KII

with an ADD, who revealed that despite participation in many community activities such as bowling, movies, dances, and shopping there were limited opportunities to actually interact with people in the community. Rather what he described was a parallel world in which ADD remained isolated even while they were out in the community. When asked his opinion of an integrated art program his answer stressed a two-way learning experience in that he thought it could fun for both ADD and non-DD and a learning experience at the same time. “It would be an advantage and a challenge for both parties.” (J. Agostini, personal communication, November 29, 2005).

### ***Conclusion***

Commonalities shared by the FG and KII support the question of whether a program that partners ADD with the non-DD will help to reduce the societal problem of stigma and stereotyping towards ADD. The abuses of ADD shared in the interviews corroborate the findings of the Corrigan Study, supporting the need for an intervention. Inclusion of ADD and focusing on the target population of community college students was positively viewed. Education should be implemented that modifies the barriers of *us versus them* through symbolic language that is sensitive to labeling, and through one-on-one interaction. Further investigation is required in forging a best practice model; however there is a general consensus of a greater emphasis established on abilities rather than disabilities. The program design should establish an equal status to the target population and ADD. Social contact should occur in the least restrictive and most naturally occurring way. A successful program design hinges on the implementation. As one service provider aptly quipped, “Getting in doesn’t mean fitting in.” (M. E. Stives, personal communication, October 21, 2005).



### **Program Design and Methodology**

In reviewing the literature, the research team has confirmed that stigmatizing attitudes toward ADD interfere with the cognitive growth and functioning ability of this population. Through a Psychiatric Disability Attribution questionnaire, community college students from metropolitan Chicago rated mental retardation as the most negative health attribute one could have (Corrigan, et al 2002). Although the study addressed only two questions, controllability and severity of attributions, the findings suggest that education and integration reduce stigma, and the researchers recommend implementing an anti-stigma program that incorporates contact to lessen negative stereotypes.

#### ***Literature Review***

A study that focused on the attitudes of the non-disabled community utilized an Integrated Sports Inventory to measure the attitudes of parents, coaches and players of a girls regular softball league when a child with disabilities was included (Block & Malloy, 1998). Results suggest that the players and parents had a favorable attitude towards inclusion and toward modifying the game rules to enable the child with disabilities to have a safe, successful experience. However, coaches were undecided about inclusion and rule modifications and were a major barrier to the success of the intervention. The study recommended that further examination should be conducted using different disabilities.

Another study focusing on non-disabled attitudes of inclusiveness was conducted with high school students in a Southern California school district. Researchers used an education program intervention with specific emphasis on non-disabled students' reaction to integration (Fisher, 1999). Twelve group interviews were conducted with students randomly selected in groups ranging in size from 11– 35. As a result of inclusive education, students with developmental disabilities functioned as valued members of the school, with “two-way social

learning” occurring, an increase in tolerance, and reporting of “life-changing” experiences. The weakness of this study was that the data from the large group interviews had the potential to be skewed by the respondents desire to be socially correct. Also, since the high school selected had a history with inclusive education, it may not be representative of the average high school.

A study that focused on workers with cognitive disabilities used two intervention strategies to build social relationships in the workplace (Chadsey & Beyer, 2001). One strategy focused on changing the social behaviors of workers with DD, and the second intervention involved changing the work context and social behavior of the non-disabled workers. Through the review of tapes, the researchers measured the number of social interactions between ADD and the non-disabled. The results showed that one strategy was not enough to have a significant impact, and the results were mixed. To strengthen the conclusions in future studies, researchers suggested combining strategies to help determine the best intervention. Further research should be conducted to understand the types of relationships in work settings that ADD desire. The study was limited due to the lack of measurement of social relationships as a dependent variable.

Study limitations due to inadequate measurement tools was a reoccurring theme among the literature review. A study of attitudes toward adults with epilepsy tried to develop an instrument to measure the public’s attitude toward this population (Dilorio, Kobau, et al. 2004). Targeting adults in the U.S. over 18, a 46-item attitudinal instrument was randomly sent to households across the country. Four underlying constructs were revealed in the findings: negative stereotypes, risk and safety concerns; work and role expectations; and personal fear and social avoidance. Nevertheless, the researchers remain wary that the results may be skewed by the respondents desire to be socially correct. They recommend further exploration in the reliability, validity, and factor structure of the scales needed to refine the instrument.

A stronger model of measurement was found in a study that evaluated a classroom program of creative expression workshops, such as art and music, for refugee and immigrant children (Rousseau & Drapeau et al., 2005). The 12-week program involved 138 children, aged 7 to 13, integrating immigrant children in regular classes at two elementary schools. The evaluative study assessed the effect of a creative expression program designed to prevent emotional and behavioral problems, and to enhance self-esteem in immigrant and refugee children attending the multi-ethnic schools. Pretest and posttest data were collected from the children and the teachers. Emotional and behavior symptoms were quantified by Achenbachs Teacher's Reports Forms. Children self-reported their symptoms using the Dominic Questionnaire. Self-esteem was measured with the Piers-Harris Self-Concept Scale. Children in the experimental groups reported lower mean levels of internalizing and externalizing symptoms and higher mean levels of feelings of popularity and satisfaction than the children in the control groups, when controlling for baseline data. These quantitative results support reconstruction of a meaningful personal world while simultaneously strengthening integration. They also transformed the teacher's perceptions of newcomers by placing an emphasis on their strength and resilience, while negating their differences. Although the interventions effect on internalizing and externalizing symptoms was not modified by gender, age or fluency in the mainstream language, the study recommended that the use of creative expression program on other target populations.

Further support of the significance of creative expression programs as a medium to overcome stigmas is supported in the literature review. Terminally ill patients at St. Christopher's Hospice day center in London, UK provided the target population for a phenomenological study that explored the view of ten patients and eleven facilitators using professional artists to work with patients to foster their creative process (Kennett, 2000). In-

depth, semi-structured audiotape interviews were analyzed by a third party to measure their reactions. Content analyses identified the main themes such as enjoyment, achievement, mutual support, and permanence that suggest positive expressions of self-esteem, autonomy, social integration and hope. Although both the study was limited in scope and other evaluated study that assesses the therapeutic value of arts activities were not found, the study recommends that further exploration of the approach using art therapy might have a significant impact and have a therapeutic relationship.

Similar study targeting hospitalized cancer patients and their family caregivers at a comprehensive regional cancer center provide similar results (Walsh & Weiss, 2003). An “art infusion” intervention designed to provide stress relief and promote positive feelings was measured in a longitudinal study of 450 people participating in the program. The study found that family caregivers and patients are interested and responsive to art therapy and report transforming and illuminating experiences. Although the quantifiable research is limited, the researchers reported that the timing, delivery and choice of art activities were key factors in success. They recommended expanding the study to other populations, especially concentrating on an art therapy intervention for caregivers.

The effect of visual arts instruction on the mental health of young adults with a dual diagnosis of mental retardation and mental illness (Malley, Dattilo & Gast 2002) was also studied. Art, music, and aquatic activities were used as a medium to help people learn to initiate activities beyond their perceived intellectual and verbal imitations. Using the measurement of a single subject multiple probe design, the control and experimental groups did not show significant differences in initiating activities. The study was limited because of the small size represented and research design was cross-sectional. The researchers recommend that changes that are mental or emotional may have occurred but were not measured. Impact of creative

therapies is largely dependent on the level and type of support given by others in the immediate setting and community.

A study that provided a strong model for qualitative results measured pre-service teachers attitudes towards DD as a predictor of the success of inclusion (Alghazo, Dodeen, Algaryouti, 2003). Originating in the country of Jordan, 597 Arab pre-service educators enrolled in a Behavior Degree Program were targeted from four universities. Two measurement instruments were employed to assess baseline attitudes: A demographic questionnaire that examined gender, the number of contacts with DD, educational background, and culture; and a second survey, the Attitudes Toward Disabled Person (ATDP), scale to assess the attitudes toward the DD. The high reliability and validity of the ATDP scale was deemed to be the strength of the study that concluded that pre-service teachers in general have negative attitudes towards persons with disabilities. It is worthy of further exploration to determine if the results would be different in the culture of the United States versus Jordan.

### ***Purpose of Study***

The problem analysis and needs assessment has produced findings that reinforce the hypothesis of etiology that ADD are stigmatized and alienated by societal attitudes due to the lack of integration with, and education of, the non-developmentally disabled. The literature review reinforces that service providers such as the coaches, caregivers, and teachers, are often implicated as having stereotypical attitudes toward ADD, thus limiting the experiences of the developmentally disabled. Changing the mindset of future care providers is an important step in breaking down barriers created by negative societal attitudes and is important for ADD to achieve a better quality of life. The literature review also supports the expressive arts as a credible intervention tool to modify negative attitudes. Therefore, the research team has proposed a study that addresses the root causes through the development of a college curriculum

course that incorporates an art program integrating the non-DD with ADD. It is proposed that this intervention will have a positive affect in modifying negative attitudes of the non-DD that stigmatize and alienate ADD by emphasizing ADD abilities and capacities in a field where they can excel.

### ***Logic Model***

Outlined in the Logic Model (see Appendix B 1 and B 2) are education and integration components that include specific goals, objectives, and activities. The Logic Model is an integral tool in establishing the direction of the proposed intervention. Based on the problem statement and needs assessment, goals were ascertained, behaviors that are barriers to the goals were outlined along with the determinants of said behaviors. Intervention activities of education and integration were outlined in the Logic Model to achieve outcomes of increasing awareness of the abilities, capacities, and value of ADD among GCC students through an integrated arts program and, among residents of East San Diego County through promotion.

### ***Program Design Narrative***

The focus of the intervention program is designed to change the mindset of non-DD by addressing the invisible, but potent attitudinal barriers that are the greatest obstacle facing ADD (Snow, 2005). By virtue of their selected educational emphasis, students enrolled in the DSM have been identified as a subset of the target population of GCC students. The DSM curriculum does not offer an integration component with ADD, although 75% of the 80 students who matriculate each fall will work directly with ADD. (M. Guillermo, personal communication, November 30, 2005). Accordingly, an intervention has been designed as a required three-credit core class to be implemented Fall Semester 2007 for all newly matriculating DSM students. Creative Expressions (CE) will be taught as a pilot program in both the Fall and Spring Semesters of the 2007-08 school year in order to test the hypothesis of whether a program that

partners ADD with non-DD will reduce societal stigma and increase the awareness of abilities of ADD. The intervention component of integration will occur in the natural setting of an art gallery. The LR clearly supports art as a viable medium to assist ADD in initiating activities beyond their perceived intellectual and verbal limitations (Malley, Dattilo and Gast, 2002.) By partnering a non-DD DSM student with an ADD participant in the experimental group, the opportunity for two-way social learning will be increased.

The first goal outlined in the Work Plan (see Appendix C1) identifies education through integration as the basis for the proposed intervention. A series of process and outcome objectives have been identified in order to decrease stigmatizing attitudes and stereotypes of students enrolled in the DSM Program at GCC toward ADD. The first objective focuses on the development of the curriculum for CE, and submission to and approval by the GCC Curriculum Review Committee by May 30, 2007, as this process requires a one-year time frame. DSM Instructor Tom Carr has been identified to develop the 16-week curriculum with input from the SG Art Administrator. Best practices research and collaboration with other DSM instructors will be incorporated into the curriculum design with both the control and experimental groups taking the education and art components. The education component will be taught at GCC and will look at the lack of historical perspective of self-determination of ADD and attitudes of pity toward this group through class discussions and real life stories of self-determination and historical significance. The art component will be discussed in the implementation phase.

The next process objective concerns the hiring of two instructors by August 2007 to teach the CE art and education components for the Fall Semester 2007, in accordance with GCC hiring guidelines and DSM Program directives. Priority will be given to current DSM staff members and SG Art Administrator will have input in the hiring of the art instructor. Instructor hired will

receive a four-hour required Culturally and Linguistically Appropriate Service (CLAS) Standard training prior to class start date as well as ongoing quarterly faculty training.

The outcome objective relating to goal one describes the implementation of the proposed intervention and incorporates the measurement tool identified for pre and post assessment. By September 2007, the experiment will be implemented with 30 DSM students in order to measure if stigmatizing attitudes and stereotypes toward ADD can be decreased by 15% among the experimental group. The art class will be conducted at SG and 15 ADD identified by SMSC will be invited to join the DSM students in class. Art projects created by the ADD and non-DD partners working together for the eight-week component will promote two-way social learning and emphasize the abilities of ADD through first-hand knowledge and appreciation. A person other than the CE instructor will administer the pre and post assessments, and an independent researcher will be hired to tabulate the results and submit reports to the DSM Program Coordinator within four weeks of the end of the semester.

The second goal identified focuses on community awareness: ADD are accepted as valued members of the community of East San Diego County. Through a series of promotions, three process objectives have been identified in the Work Plan (see Appendix C 2) in order to increase awareness of ADD and accessibility to integrated art courses at SG. The first objective centers around the production of posters and flyers created from art produced by ADD and non-DD in the CE class. By May 1, 2008, DSM students will distribute these promotional materials to specific civic and community locations in order to increase awareness of the *ART SEEN* art gallery openings at GCC and SG in June 2008 with a minimum of 250 East County residents attending *ART SEEN*. Four library locations poster displays will be augmented with materials to reinforce the self-determination of ADD.



The next objective for goal two involves a series of presentations to be made by the SMSC Director during Spring Semester 2008 to five community organizations representing 100 community leaders and distributing pamphlets to develop alliances for SMSC and SG, increase awareness of abilities of ADD, and result in a minimum of 15 community leaders attending *ART SEEN* in June 2008. *ART SEEN* will take place over a one-week time period and will be coordinated by the SG Art Administrator in conjunction with DSM Instructors and Program Coordinator. The guest log will track guest names, title or business, e-mail address and mailing address, and will be used to verify attendance.

The final process objective relating to the community focuses on the art classes at SG. Within 30 days following *ART SEEN* gallery openings featuring the work of ADD and non-DD, a minimum of 10 East County community members will enroll in art classes at SG, signifying an increase in awareness of integrated art programs and value of ADD. Class registration will serve as the evaluation measure. The community awareness goal will be further described in the Social Marketing Plan.

### ***Methods***

The research design method that emerged for this study is experimental and will quantitatively identify the cause and effect relationship between the change in societal attitudes of non-DD adults when integrated with, and educated about ADD by manipulating the CE course, the independent variable. In order to test the hypothesis, the research team selected a subset of the target population of students at the GCC study site. A cluster sample of thirty participants enrolled in the DSM program will be recruited as part of their first semester requirements in the Fall 2006. The cohort will be randomly enrolled in one of two CE classes, 15 students each in an experimental group and a control group. Currently the DSM program divides the 16-week semester into two eight-week components. For the first eight-weeks, the

experimental group will receive the education component as outlined in our work plan. During the second eight-weeks, the experimental group will attend creative art courses integrated with ADD at the SMSC study site. The control group will begin the first eight weeks at the SMSC study site without an ADD integrated program. The control group then returns to the GCC study site to complete 8-weeks of the education component. A professor currently teaching in the DSM program is the preferred choice for the educational component, due to prior knowledge of the DSM goals and objectives, while the administrator of SG who works with ADD regularly, will instruct the art component to both the experimental and control groups. At this time, no staff training is necessary since the curriculum developers are also the implementers of the program. An independent researcher will be recruited to tabulate study results and submit findings to the staff and directors to determine the impact on attitudes as well as suggest necessary curriculum changes for future cohorts.

During the 16-week semester class, the students in the two classes will be randomly assigned to either the experimental group or control group. In an attempt to measure the relative effectiveness of the intervention efforts to change societal attitudes, a pre and post assessments will be employed. All subjects will be pre-assessed on the first class meeting date with a demographic survey and an attitudes assessment (Elliott, 1987) to determine a baseline response. A repeat of the attitude assessment will be administered on the final day of classes. The internal consistency reliability will be determined by the cohorts' pre-assessment scores. An independent researcher will evaluate the scores to determine the intervention effectiveness.

### **Social Marketing Plan**

The Social Marketing Plan is necessary to reinforce the intent of the intervention. This plan will raise community awareness of ADD as valued members of the East San Diego community, and decrease stigmatizing attitudes and stereotypes.

#### ***Target Segmentation***

A comprehensive social marketing plan should include the following five segments of internal and external populations. The internals include ADD participating in programs at SG, DSM students, and those related to the implementation of the CE course, while externals include the general student population at GCC and the community of East San Diego County.

For the purposes of the study, students enrolled in the DSM program, CE course, comprise the sample. Although critics might question that the sample population already has a proclivity for ADD and awareness of the issues, research supports that caregivers are often implicated in limiting the abilities of ADD (Tervo, 2004). Social marketing to this segment of the target population will focus on the interpersonal level which is the most fundamental echelon of modifying individual behavior.

The community settings to which people belong have a significant impact on sustaining or deterring attitudes. Therefore, the community of East San Diego County comprises our secondary target audience in which opinion leaders and policymakers can be enlisted as effective allies in promoting desirable behaviors that may influence social norms, such as recognition and positive social acceptance (Siegel & Doner, 1998). Since it is anticipated that 75% of the DSM students will go on to work directly with ADD, the social marketing components of this study will concentrate on sustained and meaningful change for this sample segment.

***Product***

The research team refers back to the FG's suggestion to not disclose integration information in social marketing materials. The stakeholders felt strongly that to advertise in such a way would perpetuate the stigma of differences. This presents a challenge in developing front-end marketing materials and even defining the product in terms of behavior change. Nevertheless, the awareness of the abilities of ADD is defined as the product, and the social marketing components will be applied to the back-end of the program through steady messaging on campus, behavior reinforcement, and validation by the secondary target audience.

***Price & Place***

There are barriers to enrolling in the class that every college student encounters. Time, financial responsibility, self doubts about the subject, lack of interest, and scheduling problems are the most common. Participating in this particular class, has the additional elements that part of the class is off-campus which factors in transportation issues, safety concerns, additional time commitment, and, in the case of the intervention group, the discomfort of being integrated with strangers in the art component of the class.

To students seeking proficiency about ADD through the DSM program, the intervention is an effective vehicle to maximizing their learning experience with first hand knowledge of the abilities of ADD through integration. Other benefits include college credit toward their degree and the creative art experience. Additionally, the education and art components of the class will be divided between GCC campus and SG. Both are located in East San Diego County and are eleven miles apart. To make participation in the course convenient and reduce transportation barriers, a shuttle bus will be employed to pick up students from GCC and bring them to SG.

**Promotion**

For the first year, social marketing will be in full force on the back end of the program and the resulting work will reinforce the behavior modification gained in the CE course and have ramifications in influencing a wider audience (<http://www/cancer.gov>). The plan involves the placement of posters (see Appendix E) highlighting colorful artwork from the CE class which are not classified ADD or non-DD. A gallery art opening entitled *ART SEEN* will be held in June at the completion of the course at GCC and SG. Posters promoting *ART SEEN* will be placed at multiple sites at GCC campus and throughout the East San Diego County community such as coffee shops, restaurants, bus shelters, trolley stations, civic facilities, libraries, and schools. Where appropriate, art poster displays will be augmented with books and other materials that reinforce self-determination and help break down stereotypes. Pamphlets will be created and distributed to all five segments of the target population. A powerpoint presentation will be created to reinforce product, and desired outcomes. This presentation will be given at schools, colleges, churches, civic groups, and will further advertise the opening of *ART SEEN*.

**Publics, Partnerships & Policy**

Internally, the social marketing plan must focus on students, teachers, accrediting institution staff, and evaluators, but externally, there is wider public of GCC, opinion leaders and policy makers, friends, community, neighborhood, and caregivers already in the field. Credibility and resources of the campaign will be harnessed through partnerships with other venues to display artwork, and by developing alliances through presentations to civic organizations. This social marketing campaign will result in attendance at *ART SEEN*, participation in integrated art classes at SG, and increased awareness of ADD. Although the campaign will not specifically address social policy, the campaign message will value an integrated society, and reinforce the abilities of ADD. Each element will be considered will be revised according to the research.

## **Cultural Competency Plan**

Policies and procedures need to be in place to ensure equitable access, and to meet the diverse learning styles of all participants. Furthermore, the need to address a Cultural Competency Plan is reinforced with the need to comply with federal legislation.

### ***Involvement with the Target Population***

St. Madeleine Sophie's Center (SMSC), the umbrella organization which houses SG, and GCC are the sponsoring organizations and study sites for the proposed intervention program that integrates ADD with non-DD. Both entities are located in East San Diego County in Southern California and have similar overall cultural diversity (see Appendix F). Both anticipate increased ethnic diversity in future growth projections (San Diego Sourcebook). SMSC has policies and procedures in place to assure equitable access to, and participation in, their programs and responds to the special needs of the ADD population on every level. Many board members and volunteers are key-stakeholders having family members who are ADD. As such, SMSC is highly qualified to provide appropriate services to the intended recipients of the proposed program. Likewise GCC's strategic plan embraces the diversity of the changing population of East San Diego County. The college has specific plans to enhance teaching and learning strategies, and to put corresponding policies in place designed to meet students' diverse learning styles, while insuring faculty and staff will reflect the community they serve ([www.grossmont.edu](http://www.grossmont.edu)).

### ***Training and Staffing***

SMSC provides two-hour trainings in harassment and sensitivity in the workplace taught by Program Managers for all new employees. Further staff training is indicated as

outlined in Title VI and the federal Culturally and Linguistically Appropriate Services (CLAS) Standards to ensure equal access and treatment for eligible project participants who are members of groups that have been traditionally under represented based on race, color, national origin, gender, age, or disability. Prior to program implementation in Fall semester 2006, a four-hour training developed by an outside consultant specializing in CLAS Standards, will be conducted for staff involved in the collaborative effort. Consisting of 2 two-hour interactive modules, topics such as the positive impact of cultural competency awareness, and culturally and linguistically appropriate services for ADD and minorities, will be covered. Mandatory CLAS training of employees will continue on a quarterly basis through management staff at SMSC and GCC. Effective cultural and linguistic competency requires systematic change, continued review of organizational policies and procedures, as well as staff commitment. Information and audit checklists are available online at ([www.omhrc.gov/clas/index.htm](http://www.omhrc.gov/clas/index.htm)) to provide further help and assessment.

### ***Community Representation***

Prior to commencement of the eight-week integrated art component, an orientation will be held for the ADD community and families to cover topics including consumer rights, available services for ADD, and access to translator services. Feedback from ADD and family members will be incorporated into future planning. DSM students who are in the experimental group are invited to attend orientation after completing the intervention program and ongoing involvement at SMSC will be encouraged. A placement for an ADD to co-facilitate the art component and to lecture in the educational component should be explored and implemented in

an attempt to more fully represent the ADD community and their rights for full participation. The combination of staff training and community involvement and awareness regarding culturally and linguistically appropriate services will benefit everyone involved in the program.

### ***Language***

Language preference and appropriate literacy levels must be considered in all written materials and translation materials (Betancourt, 2002) including a component to assess the reading levels of all students. Written materials and all translation materials must be formatted when necessary using visual or pictorial aids for ADD who are non-verbal or have limited communication abilities. Translation services must be available on site if a significant number of students have a limited English proficiency and other types of interpreter services should be available if students or family members may require such services.

### ***Materials***

All training guides, printed materials, signage, and audio-visual materials should be available in language preference and be culturally appropriate. Literacy levels must also be considered (Betancourt, 2002). SMSC and GCC indicated that their second highest population group is Hispanic. Therefore, all materials should be translated and made available in Spanish. Growth projections must be identified in the community to prioritize specific future translations of source materials. Sign language, Braille, large print, or any accommodations for the visually impaired and hearing impaired will be provided if needed. Pamphlets listing CLAS website references and local offices where additional assistance is offered will be readily available to all participants in the proposed program.



## **Evaluation Plan**

The CE class was conceived within the context of the need to minimize stigmatizing attitudes toward ADD among those entering the field as caregivers. Inherent in the program's focus is the recognition that an intervention program using expressive arts is a vehicle that will create a lasting impact on future caregivers by focusing on the abilities rather than the disabilities of ADD. It is through the evaluation component of the study that this hypothesis can be measured and become the basis for program modifications in the future.

### ***Evaluation Design***

In creating the evaluation component of the study, the elements of the program design guide the construction of the system, and create the implications for data collection (Kettner, 1999). The Evaluation Plan is described through the proposed process and outcome measures in correlation with the goals and objectives as determined in the BDI Logic Model and Work Plan (see Appendix B & C). The matrix identifies the variables that need to be measured and the tools to accomplish the data analysis. The preliminary findings will be reported in terms of what seems to work well, and what barriers may impede effectiveness.

### ***Evaluation Measures***

The analysis uses both quantitative and qualitative data. A demographic survey, and the administration of the Attitude Toward Disabled Persons (ATDP) scale by participants in the program are the quantitative measurement instruments of the study. A self-report exit narrative of the study participants will provide qualitative data. The demographic survey currently in place at GCC's DSM program was developed by Howard Twomey at the University of San Diego for San Diego State University's Interwork Institute, which established DSM's core curriculum. It was put through a rigorous four-part process to ensure its reliability and validity, including a peer-view, pilot study, factor analysis, and subsequent revisions (Twomey, 2004). For the past

four years it has been the standard in-take survey for registering students in the DSM program. The demographic survey will reveal the mean age, gender, ethnicity, education level, educational degree pursued, native language, and whether the participant is a veteran or disabled. Such information can help determine how participants' perceptions are correlated to specific categories of demographics (H. Twomey, personal communication, December 10, 2005). A multiple regression analysis was conducted on the survey to determine if any demographic category influenced how questions were answered and will further serve in evaluating how different groups might understand or answer specific questions, and how different groups view and respond to ADD. The demographic information will prove helpful in describing the target population and strengthen the understanding of the participants. It will also help to identify the characteristics that appear to be related to the success or failure of the program. Samples of both demographic survey and ATDP are included in Appendices G and H, and are copyrighted materials that will require the approval of the authors prior to administering assessments.

The initial literature review indicated that attitude assessment was difficult to measure and results were often skewed by the respondents desire to be socially correct. Nevertheless, further review supports that the ATDP is the best known and most widely used of the scales purporting to measure attitudes toward people with disabilities in general (Antonak, 1988). Originally published in the early 1960 (Form 0) and augmented in 1962 (Form A and B), the self-report six-point scale ranging from -3 ("I disagree very much") to +3 ("I agree very much"), represents statements that suggest differences between the disabled and the non-disabled, and depict characteristics and treatment modalities. A full analysis of ATDP is described in the book, *The Measurement of Attitudes Toward People with Disabilities: Methods, Psychometrics, and Scales*, by Richard F. Antonak. The ATDP has been extensively tested for reliability and validity. The stability, equivalence reliability estimates range from +.41 to +.83, with time

intervals ranging from two weeks to five months (Block, 1986). Validity has been scrutinized with gender respondents and educational levels appear to affect validity with females and higher education having a positive relationship to acceptance of the disabled person (Block, 1986). Also studies that assessed susceptibility of the ATDP for social desirability yielded mixed conclusions (Vargo and Semple, 1984) and the basic non-dimensionality of the Form B suggest that it may not be factually pure. Over the years, efforts have been made to develop other attitude studies, most notably the Attitude Toward Disability (ATD) Scale, the Mental Retardation Questionnaire (MRQ) (Gan, Tymchuck, and Nishihara, 1977), and the Multidimensional Attitude Scale on Mental Retardation (MASMR) (Harth, 1971). However, none of these studies have proven more conclusively valid.

Additionally, the ATDP scale has one other serious flaw. The questions as written on the scale do not comply with the People First language as reflected in CLAS Standards and should be modified. It is incumbent upon the research team to initialize a pilot test study before changing any language in the ATDP to establish a baseline. By comparing data from the pilot test study to future pre and post assessments the data can be measured. Phrasing and testing must continue to be manipulated until the reliability index falls within the acceptable range of +.41 to +.83.

The quantitative assessments should be augmented with a self-report exit narrative which will help to identify the personal experiences of the study participants. This evaluation instrument will be developed by the course instructors and modified periodically to meet the changing needs of the program. It should consist of a few open-ended questions with limited space for responses. For assemblance of statistical analysis, the responses could be tabulated within certain ranges of positive, negative, or neutral responses (R. Dewey, personal conversation, October 18, 2005). The narratives should be reproduced in their entirety by the

Independent Researcher. This observational research will contribute to understanding the program (Pottie & Sumarah, 2004).

### ***Evaluation Methods***

The demographic survey and the ATDP will be administered to all students enrolled in the CE program on the first day of the 16-week course by someone other than the course instructor. This will comprise the pre-assessment and will act as the baseline of the evaluation component. The post assessment ADTP will be conducted on the last day of class, again administered by someone other than the instructor. The DSM Program Coordinator is responsible for hiring an independent researcher to score the assessments and report back the results within a four-week period.

### ***Database Usage***

The tabulation of the demographic survey and ATDP data will be analyzed and scored by an independent researcher using Statistical Package for the Social Services software (SPSS). For the ATDP, the independent researcher's task is to sum all the responses, reverse the sign of the sum, and add a constant to eliminate any possible negative value. The set of operations provides scores, which range from 0- 120 (Form 0) or from 0-180 (Forms A and B), with a higher score indicating a positive attitude in each case. The final analysis will be presented to the DSM curriculum advisors at University of San Diego for San Diego State University's Interwork Institute who will assess if an integrated program was successful in reducing negative stereotypes by 15%.

### ***Study Strengths, Limitations and Suggestions***

As supported by the FG discussion, KII, and the literature review, ADD have been found to suffer from negative stereotypes and stigmatizing attitudes from those that are often in the position to care-take for this population. The strength of the proposed study is that the CE class

offers a multilevel intervention centered on a constructivist learning model that allows ADD the opportunity to function in an environment that gives them a level playing field, thus facilitating “two-way social learning” (Chadsey & Beyer, 2001) that focuses on abilities of all participants. It is hoped that the “life-changing” and “illuminating” experiences reported in the literature review with hospice patients and refugee children using creative expression workshops such as art and music as a medium, will be replicated in this study (Kennett, 2000), (Rousseau & Drapeau et al., 2005) and that an increased positive attitude and awareness will translate to the community at large. The self-assessment narrative reviewed by the DSM instructor will help in assessing the first-hand stories of the participants experiences.

Study limitations rest on the uncertainty of the ATDP scale and if it can be appropriately manipulated to retain its validity when the wording of the assessment is manipulated. Adhering to the CLAS Standards is a primary objective of the study, and is consistent with the program design that focuses on abilities rather than disabilities. The study is also limited to the fact that over 75% of the DSM students are estimated to eventually work with the disabled population. That fact combined with their enrollment in higher education, makes the population less representative of the average citizen in East San Diego County.

Future studies might consider measuring the intervention from the ADD point of view, and reviewing factors such as improvement in self-determination and life-satisfaction skills. It would also be interesting to consider if the integration component using the creative arts had the result of fostering relationships between ADD and non-DD outside of the classroom.

**Budget and Justification**

## Program Budget

	<b>2007-08 Academic Year</b>
<b>Personnel Expenses</b>	
DSM Curriculum Development/Program Coordination Stipend	
.20 FTE	10,000
Creative Expressions Instructor (Education)	12,500
.25 FTE	
Creative Expressions Instructor (Art)	12,500
.25 FTE	
<b>Personnel Expenses</b>	<b>35,000</b>
<b>Fringe Expense @ 32%</b>	<b>11,200</b>
<b>TOTAL PERSONNEL EXPENSES</b>	<b>\$46,200</b>
<b>Operating Expenses</b>	
Rental Costs at SG	2,880
Postage	200
Shuttle Bus GCC to SG	1,600
Printing and Copying	100
Staff Training, CLAS	300
Mileage	220
<b>TOTAL OPERATING EXPENSES</b>	<b>\$5,300</b>
<b>Other Expenses</b>	
Independent Researcher	6,000
ATDP Scale Fee	300
SPSS Software Fee	400
Translation Services	240
Art Supplies for Class	6,750
Promotional Materials (posters and flyers)	900
Produce Pamphlets	1,200
<i>ART SEEN</i> Gallery Openings	1,000
<b>TOTAL OTHER EXPENSES</b>	<b>\$16,790</b>
<b>TOTAL DIRECT EXPENSES</b>	<b>\$68,290</b>
<b>Indirect Expenses @ 25%</b>	<b>\$11,550</b>
<b>TOTAL EXPENSES</b>	<b>\$79,840</b>

## Budget Justification

<b>Personnel Expenses</b>	<b>2007-08 Academic Year</b>
<p><b>DSM Curriculum Development/Program Coordination Stipend</b>  <i>Fee paid to DSM staff member for curriculum development and Creative Arts course initial coordination, \$50,000 X .20 FTE.</i></p>	\$ 10,000
<p><b>Two Creative Expressions Instructors (Art and Education)</b>  <i>\$50,000 X 2 Instructors at .25 FTE for Two Master's Level Instructors, each teaching four classes at GCC.</i></p>	25,000
<p><b>Fringe Expense @ 32% of Total Salaries</b>  <i>Includes Social Security, FICA, Medicare, State Unemployment Insurance, Health and Dental Insurance, and Workmen's Compensation Insurance.</i></p>	11,200
<b>Operating Expenses</b>	
<p><b>Rental Costs at Sophie's Gallery (\$60/hr X 3 hr X 16 classes)</b>  <i>Art studio room will be rented for 16 3-hour classes for art (intervention) component. SG has waived the security deposit requirement due to ongoing relationship with GCC.</i></p>	2,880
<p><b>Postage</b>  <i>Bulk mail for ART SEEN Opening (1000 pieces@ .20 each) Coordinated with SG for ART SEEN opening.</i></p>	200
<p><b>Shuttle Bus GCC to SG (16 classes X \$100/day)</b>  <i>GCC campus shuttle bus contract will be utilized to transport students 11 miles from GCC to SG and back to GCC for each eight-week art program @ \$100 day.</i></p>	1,600
<p><b>Printing &amp; Copying</b>  <i>Costs to copy evaluation tools and class handouts.</i></p>	100
<p><b>Staff Training, CLAS (4 hr X \$75)</b>  <i>For four-hour CLAS Standard training, outside consultant specialist will be hired prior to the start of the CE class. Other required staff training provided by GCC, costs already incorporated into site budget.</i></p>	300
<p><b>Mileage</b>  <i>Staff will be reimbursed for mileage to and from GCC and SG, 22 miles*\$.375 x approximately 25 trip.</i></p>	220

**Other Expenses**

<b>Independent Researcher (\$75/hr X 40 hours X 2 semesters)</b> <i>It is estimated that the independent researcher hired will require 40 hours per semester to process evaluation tools, provide required reports, and transcribe and compile self-report exit narrative.</i>	6,000
<b>ATDP Scale Fee</b> <i>Cost to purchase assessment tool.</i>	300
<b>SPSS Software Fee</b> <i>Statistical Package for the Social Services to be used for Demographic Survey tabulation combined with ATDP results.</i>	400
<b>Translation Services (\$30/hr X 8 hours)</b> <i>Translator services to translate promotional materials and pamphlets from English to Spanish; estimate 8 hours @ \$30.</i>	240
<b>Art Supplies for Class (45 students x \$75 X 2)</b> <i>Art supplies will be needed for a variety of projects; supplies will be paid for 15 ADD participants as well as 30 DSM students.</i>	6,750
<b>Promotional Materials (posters and flyers)</b> <i>Cost to produce 100 posters estimated at \$500 and for 500 flyers cost estimated at \$125; will be used to promote ART SEEN.</i>	900
<b>Pamphlets</b> <i>1000 Four-color pamphlets will be produced for distribution at civic organization presentations.</i>	1,200
<b>ART SEEN Gallery Openings (\$500 X 2)</b> <i>Estimate costs for each location at GCC and SG.</i>	1,000
<b>Indirect Expenses @ 25% of total personnel costs</b> <i>GCC established indirect costs include administration, accounting, human resources, information technology, insurance, and building costs.</i>	\$11,550

**Budget Notes:**

- 1) Program administrator costs for both GCC and SG are incorporated into site budgets.
- 2) GCC room rental costs are included in campus budget and are not allocated per class.
- 3) Classes on GCC master schedule will be held with a minimum of 15 students.



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## Appendix A

## Literature Review Matrix

Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<i>Oncology Nursing Forum</i> . An Intervention with Family Caregivers and Patients with Cancer. Walsh, S.M. & Weiss, S. Nov/Dec 2003	Hospitalized cancer patients and their family caregivers at a comprehensive regional cancer center	An "Art Infusion" intervention designed to provide stress relief and promote positive feelings.	Since 2001, 450 people have participated in the program and continue to express appreciation.	Family caregivers and patients are interested/ responsive to art intervention. Report transforming/ illuminating experiences.	Additional research is needed to quantify the effect. Timing, delivery and art activity choices key factors in success.	Quantify study. Expand to other populations. Focus on art therapy just for caregivers.
<i>Mental Retardation</i> . According to Their Peers: Inclusion as High School Students See It. Fisher, D. December 1999	High school students in So. CA school district, selected for its ethnic diversity and history of success & experience with inclusive education.	Inclusive education program for students with DD; specific emphasis on non disabled students reaction to intervention.	12 group interviews were conducted with groups ranging from 11 to 35 students, randomly selected; qualitative study.	Outcomes measured through qualitative self-report interviews showed inclusive education students with DD functioned as valued members, non-DD said they had learned something from their peers with disabilities. One non-DD described it as "two-way social learning". Others talked about increased tolerance and "life-	Because HS selected has a history w/inclusive education, it may not be representative of the average HS. Data from large group interviews has the potential to be skewed.	Interview the non DD students 5 years after graduation & compare their lives with people without DD who did not experience this intervention in HS. Thus, are there long-term payoffs in terms of disability awareness and advocacy efforts?

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Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<i>Mental Retardation</i> , Effects of visual arts instruction on the mental health of adults with mental retardation and mental illness. Malley, S.M., Dattilo, J., & Gast, D., 2001.	Young adults who had a dual diagnosis of mental retardation and mental illness.	Art, music and aquatic activities were used as a medium to help people learn to initiate activities beyond their perceived intellectual and verbal limitations.	5-second time delay procedures between presentation of task and presenting controlling prompt. Monitore d through recordings for each step, videotapes and	Control and experimental groups did not show significant differences in initiate activities.	Samples studied were quite small and not representative. Research design was cross- sectional.	Changes that are mental or emotional may have occurred but were not measured. Impact of creative therapies is largely dependent on the level and type of support given by others in the immediate setting and community.
<i>Mental Retardation</i> , Attitudes on inclusion of a player with disabilities in a regular softball league, Block, M.E., & Malloy, M., 1998.	Girls without disabilities, parents, and coaches.	Attitudes of sports participants relate significantly to the successful inclusion of individuals with disabilities. Study examined attitudes of girls without disabilities, their parents and their coaches toward inclusion of a child with disabilities in a regular girls' fast- pitch softball league.	Attitudes Towards Integrated Sports Inventory included 8 questions on general attitudes toward integrated sports leagues and 5 on attitudes toward specific modifications to softball.	Results suggest that players and parents had a favorable attitude towards inclusion and toward modifying the game rules to enable child with disabilities to have a safe, successful experience. Coaches were undecided about inclusion and rule modifications.	Further research with a qualitative methodology is needed.	Further research on attitudes of players, parents and coaches towards integration into community sport programs is warranted. Different disabilities, different sport teams, and gender differences should be examined.

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Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<i>Journal of Community Psychology</i> , Stigmatizing attributions about mental illness. Corrigan, P.W., River, L.P., Lundin, R.K., Wasowski, K.U., Campion, J. & Mathisen, J. (et al), 2002.	Community college students from metropolitan Chicago.	Attitudes about psychiatric disorders that are frequently victims of stigma: psychotic disorders, depression, substance abuse, and mental retardation were studied.	Participants completed the Psychiatric Disability Attribution Questionnaire in cohorts of twenty to forty.	Participants rated mental retardation as the most negative in terms of being incurable. Study suggests education and integration reduce stigma.	Study addressed two questions only: controllability and severity of attributions.	Anti-stigma programs incorporating contact should include representatives from a diverse set of disabilities to strengthen the breadth of impact.
<i>Epilepsy &amp; Behavior</i> , Developing a measure to assess attitudes toward epilepsy in the US population. Dilorio, C.A., Kobau, R., Holden, E.W., Berkowitz, J.M., Kamin, S.L., & Antonak, R.F. (et al), 2004.	US adults age 18 and over.	To develop an instrument to measure the US public's attitude toward people with epilepsy.	A 46-item attitudinal instrument using random-digit household survey.	Four underlying constructs were revealed in the findings: negative stereotypes; 1.risk and safety concerns; 2.work and role expectations, and 3. personal fear and social avoidance.	Respondents may have responded in a socially desirable fashion, which may have skewed the results.	Reliability, validity, and factor structure of the scales needed to refine the instrument. Screening for respondent's history (knowledge of epilepsy), sample limited to English speaking population and the short time span of the collection.

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## Literature Review Matrix

Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<p><i>Manual of Retardation &amp; Developmental Disabilities Research Review. Social Relationships in the Workplace.</i> Chadsey, J,&amp; Beyer, S. 2001</p>	<p>Workers with cognitive disabilities.</p>	<p>Two intervention strategies tested: a) strategies that change the social behaviors of workers with disabilities, and b) natural support strategies that involve changing the work context and social behavior of co-workers.</p>	<p>Through review of tapes, researchers measured number of social interactions between ADD and non-disabled.</p>	<p>One strategy not enough. Offered mixed results. Possibly combination of strategies would work.</p>	<p>Lack of measurement of social relationships as a dependent variable. Few decision rules to help decide best intervention strategy.</p>	<p>Further research to understand the types of relationships in work setting that ADD desire.</p>
<p><i>Journal of Personality and Social Psychology</i> Sensitivity to status-based rejection: Implications for African American students' college experience. Mendoza-Denton, R &amp; Downey, G. et al., 2002</p>	<p>Undergraduate college students of African American descent.</p>	<p>57 African American &amp; 57 white college students participated for pay. Given one of 3 envelopes required 21 day diary of either Rejection Expectations, Rejection Attributes or Perceived Racism Scale.</p>	<p>For each situation, dichotomous (1 or 0) scores were obtained for each of the different types of rejection. Independent coder and interrater agreement were conducted.</p>	<p>Rejection expectations influence the quality of people's relationships and well-being. People with higher rejection expectations, react more intensely to perceived rejections.</p>	<p>Study lacks the breadth and generality of context-free approaches. The rate of perceived race-based rejection was low, reducing the power to detect the expected effects.</p>	<p>Broader application of model to examine whether status-based rejection concerns can explain outcomes of other low-status groups. Need to gain the trust of traditionally excluded groups.</p>



## Appendix A

## Literature Review Matrix

Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<p><i>Palliative Medicine</i> Participation in a creative arts project can foster hope in a hospice day centre. Kennett, C.E., Sept 2000.</p>	<p>Terminally ill patients at St. Christopher's Hospice day centre in London, UK</p>	<p>A phenomenological study explored the views of 10 patients and eleven facilitators using professional artists to work with patients to foster their creative process.</p>	<p>In-depth, semi- structured, audiotape interviews analyzed by colleague from a different department.</p>	<p>Content analysis identified the main themes such as enjoyment, achievement, mutual support and permanence that suggest positive expressions of self-esteem, autonomy, social integration, and hope.</p>	<p>While art therapy is rapidly gaining in recognition in palliative care, the author was unable to find any other evaluated study that assesses the therapeutic value of arts activities such as describing the paper.</p>	<p>Explore the approach with two other distinct areas of art therapy: Projects that enhance the environment (art displays) versus projects on the development of a therapeutic relationships between the therapist, the patient, and the art object.</p>

## Appendix A

## Literature Review Matrix

Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<p><i>Journal of Child Psychology &amp; Psychiatry &amp; Allied Disciplines</i> Evaluation of a classroom program of creative expression workshops for refugee and immigrant children Rousseau, C. &amp; Drapeau, R. et al. Feb. 2005</p>	<p>The 12-week program involved 138 children, aged 7 to 13, registered in both integration classes designed for immigrant children and regular classes at two elementary schools.</p>	<p>This evaluative study assessed the effect of a creative expression program designed to prevent emotional and behavioral problems and to enhance self-esteem in immigrant and refugee children attending multiethnic schools.</p>	<p>Pretest and posttest data were collected from the children and teacher. Teachers used Achenbach's Teacher's Report Form to assess emotional &amp; behavioral symptoms. Children self-reported their symptoms with the Dominic. Self-esteem was measured with the Piers-Harris Self-Concept Scale.</p>	<p>Children in the experimental groups reported lower mean levels of internalizing and externalizing symptoms and higher mean levels of feelings of popularity and satisfaction than the children in the control groups, when controlling for baseline data. These quantitative results support reconstruction of a meaningful personal world while simultaneously strengthening integration. They also transform the teachers' perceptions of newcomers by placing an emphasis on their strength and their resilience, while not negating their vulnerabilities.</p>	<p>The intervention's effect on internalizing and externalizing symptoms was not modified by gender, age or fluency in the mainstream language.</p>	<p>The use of creative expression programs on other target populations.</p>

Appendix A		Literature Review Matrix				
Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<i>Journal of Personality and Social Psychology</i> Sensitivity to status-based rejection: Implications for African American students' college experience. Mendoza-Denton, R & Downey, G. et al., 2002	Undergraduate college students of African American descent.	57 African American & 57 white college students participated for pay. Given one of 3 envelopes required 21 day diary of either Rejection Expectations, Rejection Attributes or Perceived Racism Scale.	For each situation, dichotomous (1 or 0) scores were obtained for each of the different types of rejection. Independent coder and interrater agreement were conducted.	Rejection expectations influence the quality of people's relationships and well-being. People with higher rejection expectations, react more intensely to perceived rejections.	Study lacks the breadth and generality of context-free approaches. The rate of perceived race-based rejection was low, reducing the power to detect the expected effects.	Broader application of model to examine whether status-based rejection concerns can explain outcomes of other low-status groups. Need to gain the trust of traditionally excluded groups.

Appendix A		Literature Review Matrix				
Name of Journal, Name of article, authors, date published	Target Population	Intervention/ Program	Measures	Results/ Findings	Study Limitations	Recommendations for further exploration
<i>College Student Journal</i> . Attitudes of pre-service teachers towards persons with disabilities: predictions for the success of inclusion. Alghazo, E., Dodeen, H. Algnoryouti, I 2003.	597 Arab pre-service educators form 4 Universities in Jordan enrolled in a bachelor degree program.	Demographic survey and the ATDP scale was used to assess the attitudes of Arab pre-service educators towards persons with disabilities.	Two survey questionnaires: demographic instrument examined gender, # of contact with DD, educational background & culture. Second instrument was the ATDP scale translated into Arabic.	Results reveal that the teachers in general have negative attitudes towards DD. The amount of contact with DD or gender didn't significantly affect attitudes.	Culture differences may effect ability of study.	Consider the relationship of attitudes and the success of integrating students.

Appendix B 1

**Goal 1: Education through Integration**

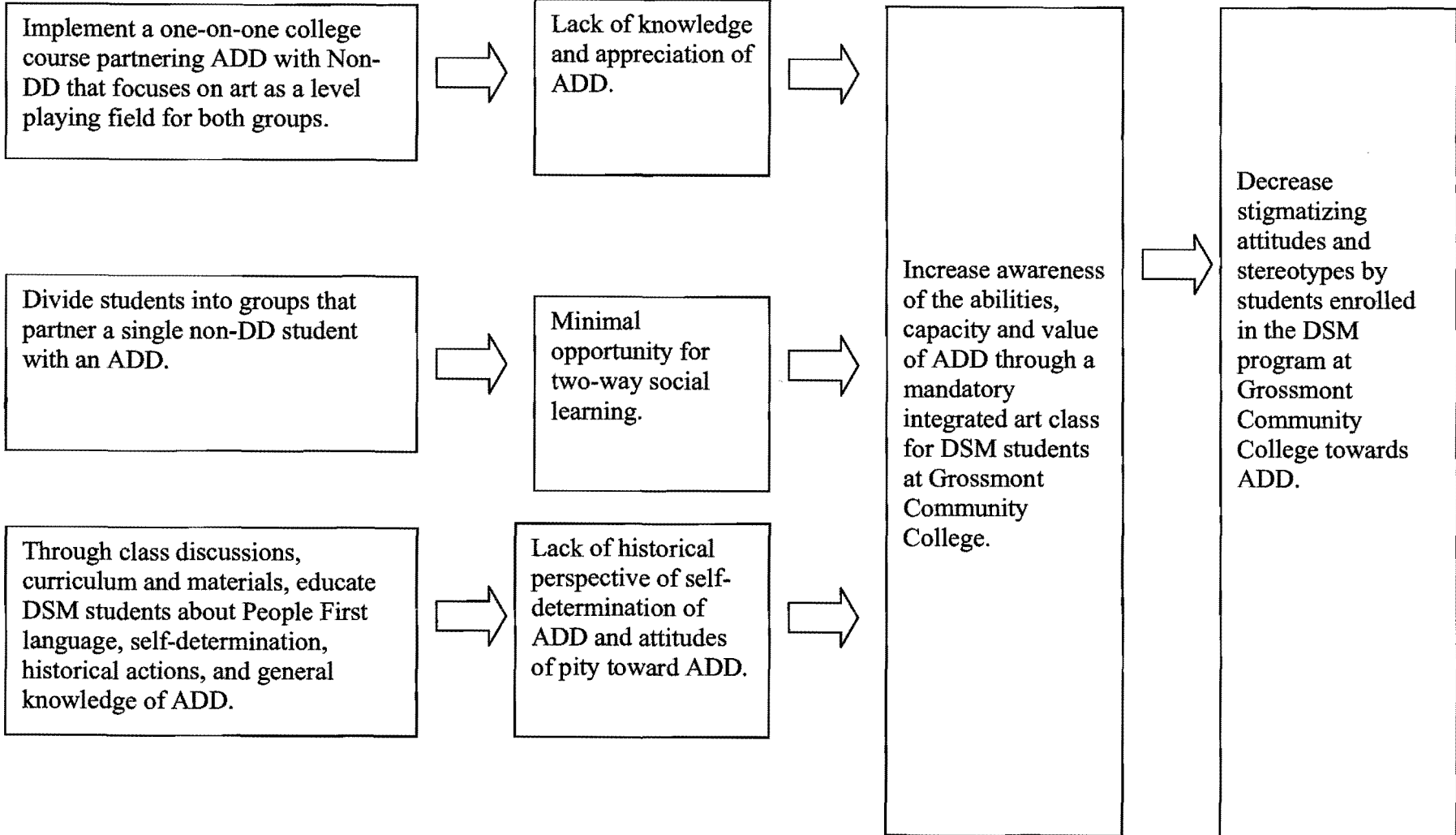
**Intervention: Curriculum Activities**

**Logic Model**

**Determinants**

**Behavior**

**Goal**



Appendix B 2

Logic Model

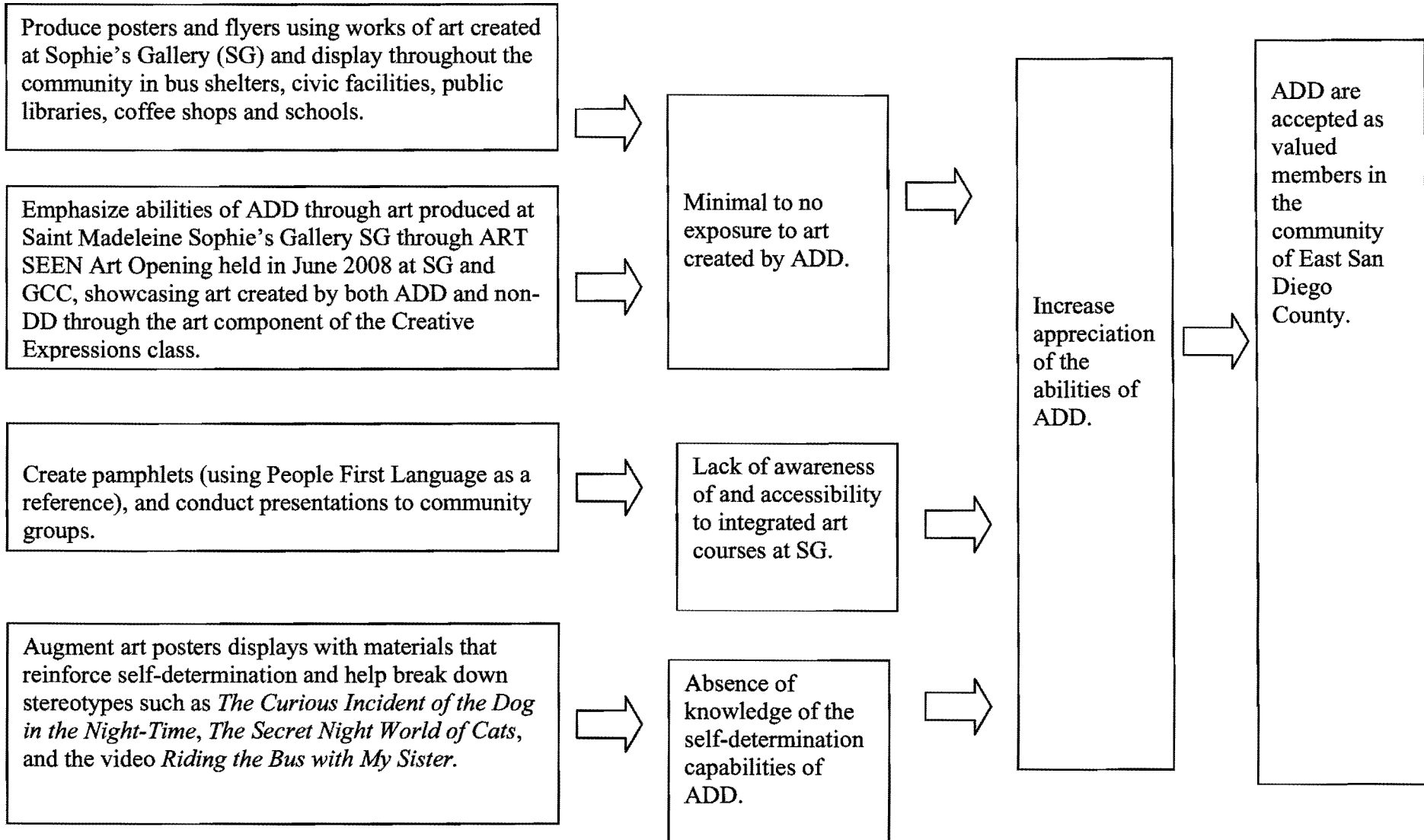
**Goal 2: Community Awareness**

**Intervention: Art and Abilities Promotion**

**Determinants**

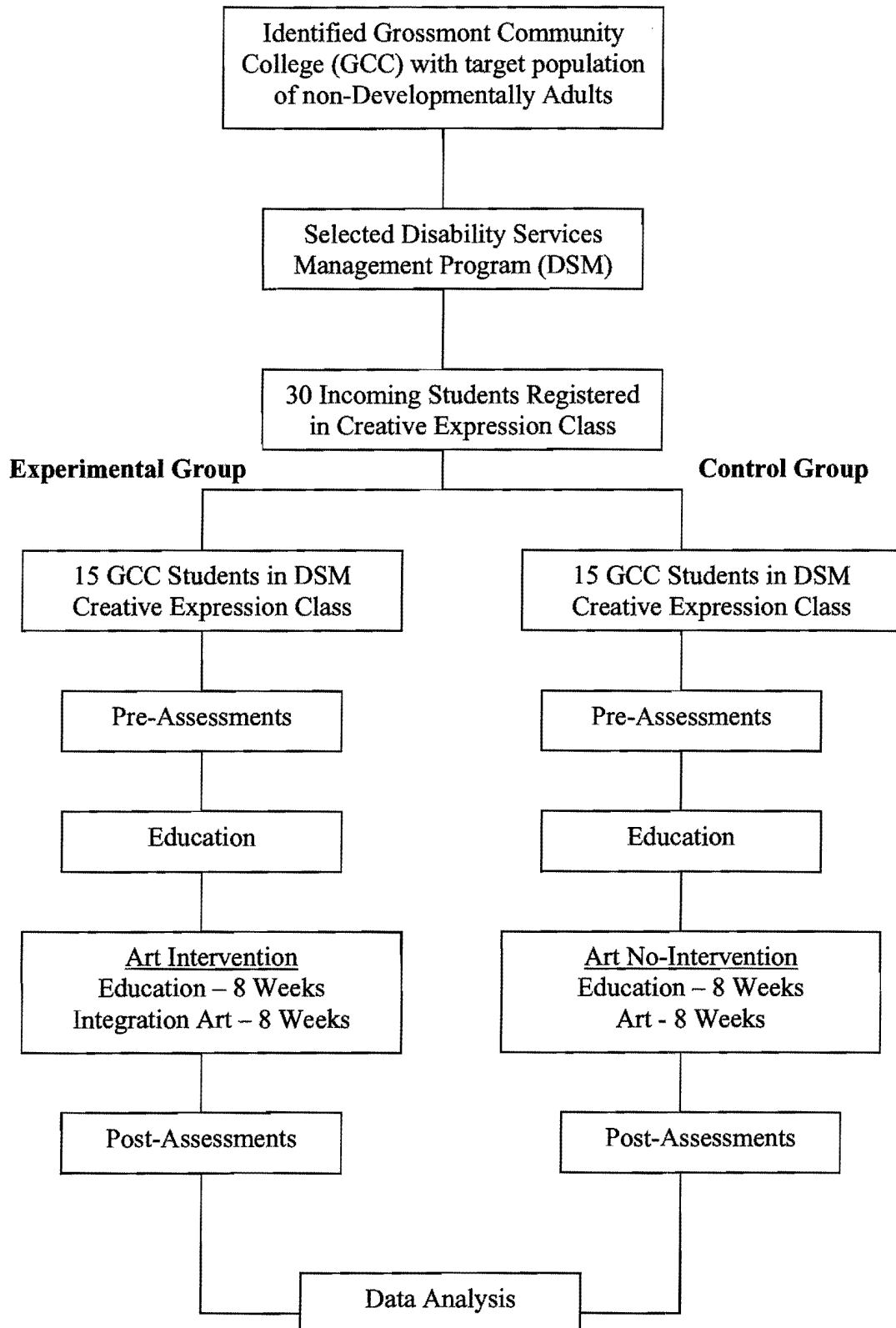
**Behavior**

**Goal**



Appendix D

**Partnering the Community with Adults with Developmental Disabilities  
Proposed Experimental Procedure**



art seen  
the art of discovery!



1st annual art partnership between  
Sophie's Gallery and Grossmont Community College



June 1-30th  
at



Reception for the artists  
June 9th, 2008  
5:30 pm - 8 pm  
109 Rea Ave

El Cajon, CA 92020

For Information call 619.593.2205



# art seen

the art of discovery!



SWAN © LYNN MURRAY 2005

1st annual art partnership between  
Sophie's Gallery and Grossmont Community College



## art seen

June 1-30th

at

### Hyde Gallery

Reception for the artists

June 10th, 2008

5:30 pm - 8 pm

200 main Quad 8800 Grossmont College Drive

El Cajon, CA 92020

For Information call 619.644.7295



## Appendix C 1

## WORK PLAN

**Goal 1: Education through Integration:** Decrease stigmatizing attitudes and stereotypes of students toward Adults with Developmental Disabilities (ADD).

Objective	Implementation Activities	Timeline	Person Responsible	Process & Outcome Measures
<p><b>1.1:</b> By May 30, 2007, development and implantation of a curriculum for a three-credit Creative Expressions (CE) class will be submitted to and approved by the Grossmont Community College (GCC) Curriculum Review Committee</p>	<p>1) Key DSM staff member will be identified to write curriculum. 2) Best practices research will be conducted from literature review and collaboration with other DSM instructors. 3) Curriculum will be designed with two components of education and art for both control and experimental groups. 4) Education component taught at GCC with art (intervention) component taught at Sophie's Gallery (SG) at Saint Madeleine Sophie's Center (SMSC). 5) Experimental group will engage in one-on-one course partnering for art projects. 6) Monthly curriculum review meeting dates will be held. 7) Curriculum will be submitted for one-year review process to GCC Curriculum Committee. 8) Syllabus approval to add course as a core DSM Program requirement to be granted. 8) Once CE curriculum is approved, class will be added to GCC master schedule as a required class for newly matriculating DSM students.</p>	<p>During Spring Semester 2006, new curriculum for core DSM course will be written for final submission to GCC Curriculum Committee by May 30, 2006 in order to receive approval curriculum approval by May 30, 2007. Course to be added to GCC master schedule for Fall Semester 2007.</p>	<p>DSM Instructor Tom Carr who teaches at both GCC and SG at SMSC will write curriculum with monthly interim review meetings with DSM Program Coordinator Mari Guillermo.</p>	<p><u>Process:</u> Curriculum written and reviewed and approved from GCC Curriculum Committee.</p> <p><u>Outcome:</u></p> <p><u>Evaluation Measure:</u> None</p>

## Appendix C1 Page 2

## WORK PLAN

## Goal One

Objective	Implementation Activities	Timeline	Person Responsible	Process & Outcome Measures
<p><b>1.2</b> By August 2007, two instructors will be hired to teach two classes of Creative Expressions (CE) class for Fall Semester 2007 for the education and art components of the required class in accordance with GCC hiring guidelines and DSM Program directives.</p>	<p>CE instructor positions will be posted, and interviews conducted with DSM faculty members given priority for the two instructor positions for CE class, art and education components.</p>	<p>June 2007 job will be posted; hiring process July 2007, with two instructors hired by August 2007 to teach Fall Semester 2007.</p>	<p>DSM Program Coordinator will post job and with GCC Human Resources Department identifying qualified candidates. DSM faculty review panel will interview and select instructors to be hired with input from SG Art Administrator for art instructor.</p>	<p><u>Process:</u> Two DSM instructors will be hired to teach CE classes.</p> <p><u>Outcome:</u> Instructors will receive four-hour CLAS training taught DSM Program Coordinator and DSM instructors prior to class start.</p> <p><u>Evaluation Measure:</u> None</p>

## Appendix C1 Page 3

## WORK PLAN

## Goal One

Objective	Implementation Activities	Timeline	Person Responsible	Process & Outcome Measures
<p><b>1:3</b> By September 2007, implement experiment with 30 DSM students in order to measure if stigmatizing attitudes toward ADD can be decreased by 15% among the experimental group.</p>	<p>1) Class will be taught to two classes of 15 each with each group receiving education and art components. 2) During the art component at SG, a shuttle bus will be provided to transport students from GCC to SG. 3) Each class will create art projects. 4) The experimental group will receive the intervention component by taking class with 15 ADD participants identified by SG at SMSC to join class. 5) Control group will receive an art class only. 6) The intervention component will include one-on-one partnering of ADD with non-DD DSM student in the level playing field setting of the art gallery. 7) Art projects will be created by the ADD and non-DD partners to promote two-way social learning and will emphasize the abilities of ADD through knowledge and appreciation. 8) Education component will be identical for both groups. 9) Pre and post assessment comprised of ATDP and Demographic Survey will be administered to both control and experimental groups first and last class day of the 16-week semester by a DSM instructor. 10) An exit self-report narrative will be administered. 11) An independent researcher will be identified and hired to tabulate the Demographic Survey and ATDP pre and post assessments, and tabulate self-report exit narrative. 12) Results will be returned to DSM Program Coordinator.</p>	<p>Experimental group takes integrated art component second half (weeks 9-16) of Fall Semester 2007 and education component weeks 1-8. Control Group will take art class first half (weeks 1-8) of semester and education component weeks 9-16. Assessments given first and last day of class; results tabulated within four weeks of end of semester.</p>	<p>Classes taught by instructors hired with oversight by DSM Program Coordinator. Pre and Post assessment will be administered by faculty other than lead instructor. Independent researcher will be hired to tabulate results within four weeks of end of each semester.</p>	<p><u>Process:</u> None</p> <p><u>Outcome:</u> Decrease stigmatizing attitudes and stereotypes by students toward ADD by 15%.</p> <p><u>Evaluation Measure:</u> Attitudes Toward Disabled Persons Scale (ATDP) Pre and Post assessment administered with Demographic Survey augmented with self-report exit narrative.</p>

## Appendix C 2

## WORK PLAN

**Goal 2: Community Awareness:** Adults with Developmental Disabilities (ADD) are accepted as valued members in the community of East San Diego County.

Objective	Implementation Activities	Timeline	Person Responsible	Process & Outcome Measures
<p><b>2.1:</b> By May 1, 2008, posters and flyers created from artwork produced by non-DD and ADD in the Creative Expressions (CE) class will be distributed at ten bus shelters, four civic facilities, four public libraries, six coffee shops, 10 schools, and throughout GCC campus with four library displays augmented with materials to increase exposure to abilities of ADD through promotion of ART SEEN art gallery openings at GCC and SG in June 2008 and secure attendance to event with a minimum of 250 attending.</p>	<p>1) Art work created during art component of CE class by both non-DD and ADD students. 2) 100 Posters and 500 handouts flyers will be produced in both Spanish and English using art created in class from both control and experimental groups. 3) Flyers and posters promoting ART SEEN and integrated classes at SG will be distributed throughout the community by DSM students at specified locations. 4) Library displays will be augmented with materials that reinforce self-determination and help break down stereotypes such the books <i>The Curious Incident of the Dog in the Night-Time</i> and <i>The Secret Night World of Cats</i>, and the video <i>Riding the Bus with My Sister</i>.</p>	<p>Art created each Fall Semester during art component of the CE class at SG; start date Fall Semester 2007. Posters and flyers will be produced from art during February and March 2008 for distribution and display by May 1, 2008 and in subsequent spring semesters. ART SEEN held June 2008.</p>	<p>SG Art Administrator Wendy Morris will work with instructor and students to coordinate production of posters and flyers from art and distributed by students at designated locations with oversight from DSM Instructors.</p>	<p><u>Process:</u> Production and distribution of flyers and handouts; <i>ART SEEN</i> promotion.</p> <p><u>Outcome:</u> Attendance of 250 residents.</p> <p><u>Evaluation Measure:</u> Minimum of 250 East County residents will attend <i>ART SEEN</i>.</p>
<p><b>2.2:</b> By December 2007, SMSC Director will arrange presentations of artwork to be made Spring Semester 2008 to five community organizations representing 100 community leaders and distribute pamphlets to develop alliances for SMSC and SG.</p>	<p>1) Dates will be coordinated for at least five civic organization presentations. 2) Pamphlets using People First language will be created using artwork from SG classes. 3) 1000 pamphlets will be printed in Spanish and English with a campaign message that values an integrated society, reinforces abilities of ADD, promotes integrated art classes at SG, and <i>ART SEEN</i>. 4) Presentations will be made on an ongoing basis to civic groups. 5) Guest register log at ART SEEN will track guest names, title or business, e-mail addresses, and mailing addresses.</p>	<p>By December 2007, presentations will be coordinated with service groups to be conducted Spring Semester 2008. Pamphlets will be designed and printed by January 2008.</p>	<p>SMSC Director will arrange civic group presentation dates and coordinate presentation. SMSC Program Manager will design pamphlets.</p>	<p><u>Process:</u> Coordinate civic group presentations, create and distribute pamphlets, track attendance, raise awareness.</p> <p><u>Outcome:</u> Increase awareness of abilities of ADD, and result in 15 community leaders attending ART SEEN.</p> <p><u>Evaluation Measure:</u> Guest registration log.</p>

## Appendix C 2 Page 2

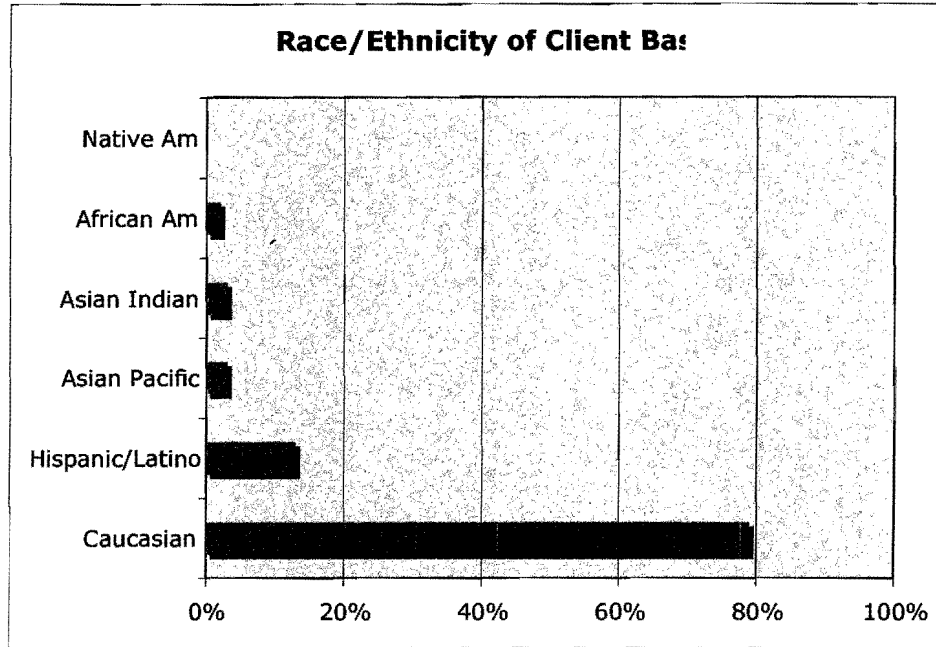
## WORK PLAN

## Goal 2

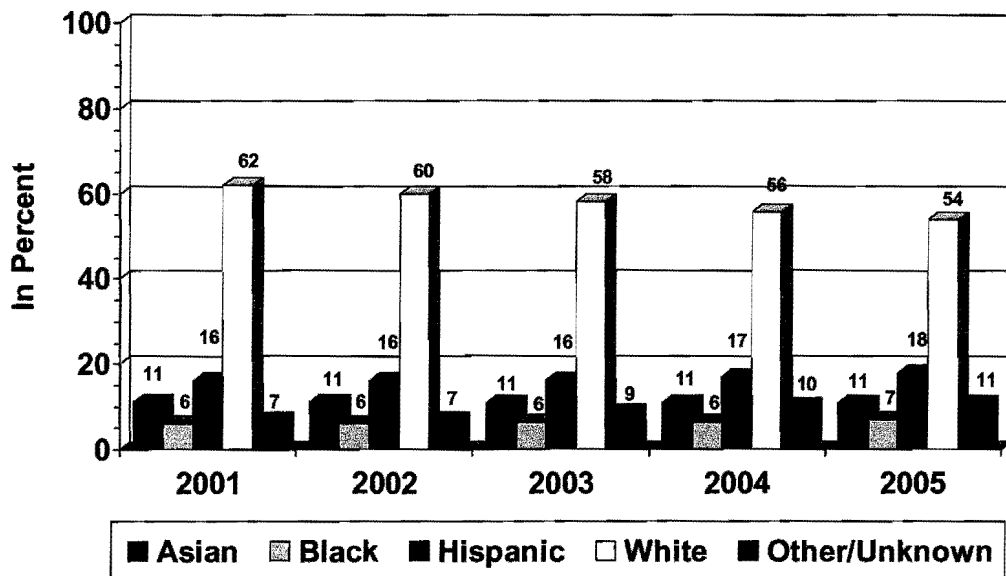
Objective	Implementation Activities	Timeline	Person Responsible	Process & Outcome Measures
<p>2.3 June 2008, a minimum of 10 East County community members will enroll in art classes at SG, signifying an increase in awareness of integrated art programs and value of ADD.</p>	<p>1) Art galleries at SG and GCC will be booked for <i>ART SEEN</i> art gallery openings. 2) Art work created by all SG classes, including intervention classes of ADD and non-DD, will be prepared for display. 3) ART SEEN will be promoted through activities outlined in Objectives 2.2 and 2.3 above. 4) Event will be advertised in GCC campus newspaper and county and library newsletters. 5) <i>ART SEEN</i> will take place over a one-week time period during the last week of the Spring Semester and all students whose art is displayed will be asked to volunteer at the two openings. 6) Guest registration information will be used for subsequent mailings to promote integrated art classes at SG.</p>	<p>Request and confirm gallery opening locations by June 2007 for June 2008 gallery openings. Art created each Fall and Spring Semester (starting with Fall 2007 and Spring 2008 Semester) will be displayed at both <i>ART SEEN</i> locations in June 2008.</p>	<p>SG Art Administrator will work in conjunction with DSM Instructors and DMS Program Coordinator to coordinate <i>ART SEEN</i> dual locations at GCC and SG at SMSC. DSM Instructor Carr will coordinate publicity efforts with SG Art Administrator and DSM Program Coordinator.</p>	<p><u>Process:</u> Successful ART SEEN gallery openings with a minimum of 10 East County community members signing up for integrated art courses at SG within 30 days of <i>ART SEEN</i> events.</p> <p><u>Outcome:</u> None</p> <p><u>Evaluation Measure:</u> SG Class enrollment</p>

Appendix F

**Cultural Competency**  
**Consumer Client Base SMSC**



**Cultural Diversity of GCC**



**Appendix G**

**Demographic Survey**

Please Specify your degree:

35. LANGUAGE: Is English your first or native language?

a. Yes

b. No

If no, what is your first language?

36. Present title or occupation?

37. Years of service in your present organization?

38. Years working with people who have disabilities?

39. Number of Disability Services certificate or degree classes that you have attended?

40. I am in a degree program but not a certificate program. The degree program is called?

41. I am not in either a degree or certificate program. I am taking this class to?



**Appendix G****Demographic Survey**

29. What is your BIRTH DATE?

30. What is your GENDER?

- a. Male
- b. Female

31. What is your ETHNICITY?

- a. African American
- b. Asian American
- c. Pacific Islander
- d. Native American
- b. Hispanic American
- c. Caucasian
- d. Other

32. Do you have a DISABILITY?

- a. Yes
- b. No

33. Are you a VETERAN?

- a. Yes
- b. No

34. EDUCATION: (highest grade completed and specify degree)

- a. High School Diploma or GED
- b. AA or AS
- c. BA or BS
- d. MA or MS
- b. Doctorate Degree
- c. Other

## Exhibit 9-4

## Attitude Toward Disabled Persons Scale

## Form-0

## Directions

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, +2, +3; or -1, -2, -3; depending on how you feel in each case.

## Key

+3: I agree very much	-1: I disagree a little
+2: I agree pretty much	-2: I disagree pretty much
+1: I agree a little	-3: I disagree very much

- 
- \_\_\_ 1 Parents of disabled children should be less strict than other parents.
  - \_\_\_ 2 Physically disabled persons are just as intelligent as non-disabled ones.
  - \_\_\_ 3 Disabled people are usually easier to get along with than other people.
  - \_\_\_ 4 Most disabled people feel sorry for themselves.
  - \_\_\_ 5 Disabled people are the same as anyone else.
  - \_\_\_ 6 There shouldn't be special schools for disabled children.
  - \_\_\_ 7 It would be best for disabled persons to live and work in special communities.
  - \_\_\_ 8 It is up to the government to take care of disabled persons.
  - \_\_\_ 9 Most disabled people worry a great deal.
  - \_\_\_ 10 Disabled people should not be expected to meet the same standards as non-disabled people.
  - \_\_\_ 11 Disabled people are as happy as non-disabled ones.
  - \_\_\_ 12 Severely disabled people are no harder to get along with than those with minor disabilities.
  - \_\_\_ 13 It is almost impossible for a disabled person to lead a normal life.
  - \_\_\_ 14 You should not expect too much from disabled people.

*General Attitudes Toward People With Disabilities*

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## Exhibit 9-4 (Continued)

- 
- \_\_\_ 15 Disabled people tend to keep to themselves much of the time.
  - \_\_\_ 16 Disabled people are more easily upset than non-disabled people.
  - \_\_\_ 17 Disabled persons cannot have a normal social life.
  - \_\_\_ 18 Most disabled people feel that they are not as good as other people.
  - \_\_\_ 19 You have to be careful what you say when you are with disabled people.
  - \_\_\_ 20 Disabled people are often grouchy.
- 

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## Exhibit 9-5

## Attitude Toward Disabled Persons Scale

## Form-A

## Directions

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, +2, +3; or -1, -2, -3; depending on how you feel in each case.

## Key

+3: I agree very much	-1: I disagree a little
+2: I agree pretty much	-2: I disagree pretty much
+1: I agree a little	-3: I disagree very much

- 
- \_\_\_ 1 Disabled people are often unfriendly.
  - \_\_\_ 2 Disabled people should not have to compete for jobs with physically normal persons.
  - \_\_\_ 3 Disabled people are more emotional than other people.
  - \_\_\_ 4 Most disabled persons are more self-conscious than other people.
  - \_\_\_ 5 We should expect just as much from disabled as from non-disabled persons.
  - \_\_\_ 6 Disabled workers cannot be as successful as other workers.
  - \_\_\_ 7 Disabled people usually do not make much of a contribution to society.
  - \_\_\_ 8 Most non-disabled people would not want to marry anyone who is physically disabled.
  - \_\_\_ 9 Disabled people show as much enthusiasm, as other people.
  - \_\_\_ 10 Disabled persons are usually more sensitive than other people.
  - \_\_\_ 11 Severely disabled people are usually untidy.
  - \_\_\_ 12 Most disabled people feel that they are as good as other people.
  - \_\_\_ 13 The driving test given to a disabled person should be more severe than the one given to the non-disabled.
  - \_\_\_ 14 Disabled people are usually sociable.

## Appendix H

## General Attitudes Toward People With Disabilities

141

## Exhibit 9-5 (Continued)

- 
- \_\_\_ 15 Disabled persons usually are not as conscientious as physically normal persons.
  - \_\_\_ 16 Severely disabled persons probably worry more about their health than those who have minor disabilities.
  - \_\_\_ 17 Most disabled persons are not dissatisfied with themselves.
  - \_\_\_ 18 There are more misfits among disabled persons than among non-disabled persons.
  - \_\_\_ 19 Most disabled persons do not get discouraged easily.
  - \_\_\_ 20 Most disabled persons resent physically normal people.
  - \_\_\_ 21 Disabled children should compete with physically normal children.
  - \_\_\_ 22 Most disabled persons can take care of themselves.
  - \_\_\_ 23 It would be best if disabled persons would live and work with non-disabled persons.
  - \_\_\_ 24 Most severely disabled people are just as ambitious as physically normal persons.
  - \_\_\_ 25 Disabled people are just as self-confident as other people.
  - \_\_\_ 26 Most disabled persons want more affection and praise than other people.
  - \_\_\_ 27 Physically disabled persons are often less intelligent than non-disabled ones.
  - \_\_\_ 28 Most disabled people are different from non-disabled people.
  - \_\_\_ 29 Disabled persons don't want any more sympathy than other people.
  - \_\_\_ 30 The way disabled people act is irritating.
- 

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Appendix H  
142*The Measurement of Attitudes Toward People With Disabilities*

## Exhibit 9-6

## Attitude Toward Disabled Persons Scale

## Form-B

## Directions

Mark each statement in the left margin according to how much you agree or disagree with it. Please mark every one. Write +1, +2, +3; or -1, -2, -3; depending on how you feel in each case.

## Key

+3: I agree very much	-1: I disagree a little
+2: I agree pretty much	-2: I disagree pretty much
+1: I agree a little	-3: I disagree very much

- 
- \_\_\_ 1 Disabled people are usually friendly.
  - \_\_\_ 2 People who are disabled should not have to pay income tax.
  - \_\_\_ 3 Disabled people are no more emotional than other people.
  - \_\_\_ 4 Disabled people can have a normal social life.
  - \_\_\_ 5 Most physically disabled persons have a chip on their shoulder.
  - \_\_\_ 6 Disabled workers can be as successful as other workers.
  - \_\_\_ 7 Very few disabled persons are ashamed of their disabilities.
  - \_\_\_ 8 Most people feel uncomfortable when they associate with disabled people.
  - \_\_\_ 9 Disabled people show less enthusiasm than non-disabled people.
  - \_\_\_ 10 Disabled persons do not become upset any more easily than non-disabled people.
  - \_\_\_ 11 Disabled people are often less aggressive than normal people.
  - \_\_\_ 12 Most disabled persons get married and have children.
  - \_\_\_ 13 Most disabled persons do not worry anymore than anyone else.
  - \_\_\_ 14 Employers should not be allowed to fire disabled employees.
  - \_\_\_ 15 Disabled people are not as happy as non-disabled ones.

## Appendix H.

*General Attitudes Toward People With Disabilities*


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## Exhibit 9-6 (Continued)

- 
- 16 Severely disabled people are harder to get along with than are those with minor disabilities.
  - 17 Most disabled people expect special treatment.
  - 18 Disabled persons should not expect to lead normal lives.
  - 19 Most disabled persons tend to get discouraged easily.
  - 20 The worst thing that could happen to a person would be for him to be very severely injured.
  - 21 Disabled children should not have to compete with non-disabled children.
  - 22 Most disabled people do not feel sorry for themselves.
  - 23 Most disabled people prefer to work with other disabled people.
  - 24 Most severely disabled people are not as ambitious as physically normal persons.
  - 25 Disabled people are not as self-confident as physically normal persons.
  - 26 Most disabled persons don't want more affection and praise than other people.
  - 27 It would be best if a physically disabled person would marry another disabled person.
  - 28 Most disabled people do not need special attention.
  - 29 Disabled persons want sympathy more than other people.
  - 30 Most physically disabled persons have different personalities than normal persons.
- 

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### EDUCATION & INTEGRATION: Partnering the Community with Adults with Developmental Disabilities



Patty Cowan  
Kelly Mitchell  
Wendy Morris  
Ileana Ovalle


### Needs Assessment

**Problem Statement:** Research indicates that adults with ADD are stigmatized and alienated by negative attitudes due to the lack of information, and education of, the non-developmentally disabled.

**Research Question:** Will a program that educates adults with developmental disabilities with non-developmentally disabled decrease stigmatizing attitudes and stereotypes?

### Target Population

- Grossmont Community College
- Disabilities Services Management
- Students
- Faculty/Current Service Providers
- Adults 18 and over



### Target Community

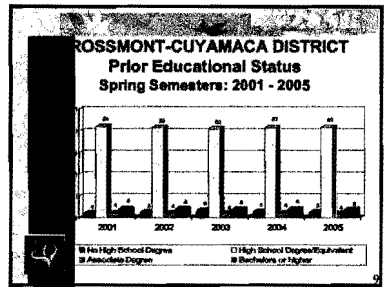
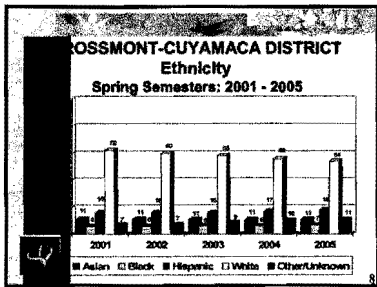
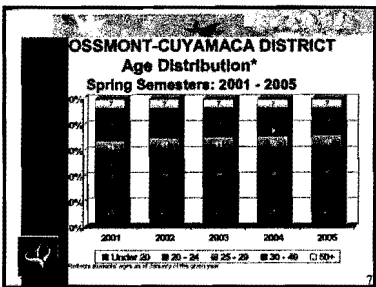
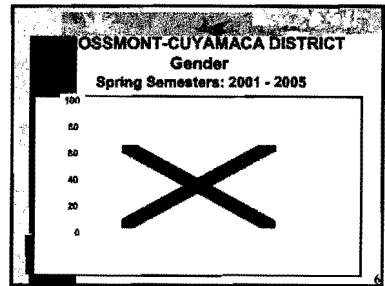
San Diego County  
Developmentally Disabled  
Adults



### Target Population Summary


Grossmont Community College Demographics 2005

Gender	Age	Race	Educational Status
	under 20	27% Asian	11% No High School
Male	20-24	34% Black	7% High School Degree
Female	25-29	12% Hispanic	17% Associate Degree
	30-49	21% White	54% Bachelor Degree+
	50+	7% Other	11%






**Unique Characteristics – Population**  
**Corrigan College Study**




Schizophrenia  
 Cancer  
**MENTAL RETARDATION**  
 Cocaine Addiction

**Unique Characteristics – Population**




Disability Services Management  
 Health Care Providers

**Unique Characteristics – Community**




Our target population is not aware the issue is a problem  
 Lack of awareness breeds stigma, stereotypes and alienation  
 High concentration of service providers in the area

**Why Our Issue is a Unique Issue to our Target Population - GCC**




Our target population is not aware the issue is a problem  
 Lack of awareness breeds stigma, stereotypes and alienation  
 Corrigan Study  
 Perpetuating the problem

**Why Our Issue is a Unique Issue to our Target Community – East San Diego**




Our target population is not aware the issue is a problem  
 Lack of awareness breeds stigma, stereotypes and alienation  
 High concentration of service providers in the area

**Why Our Issue is a Problem**




Human and Civil Rights  
 Social and Criminal Justice  
 Medical Research  
 Physical Abuse and Violence  
 Economic Abuse

**Problem not Addressed will...**




<ul style="list-style-type: none"> <li>Continued Ignorance</li> <li>Suppression</li> <li>Extirmination</li> <li>Segregation</li> <li>Isolation</li> <li>Situation of the Problem</li> </ul>	<ul style="list-style-type: none"> <li>Exploitation</li> <li>Abuse</li> <li>Violence</li> <li>Neglect</li> </ul>
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**Methods Assessment Collection Methods**



Focus Groups  
 Key Informant Interviews

**Focus Group**



Important to assess Service Providers  
 Attitudes  
 Five experts recruited from field of ADD  
 TMI, St. Madeleine Sophie's Center, Home of Guiding Hands, Developmental Services Continuum, P.R.I.D.E.  
 Qualitative information best practices, past successes, and failures

### Focus Group Questions Asked

- Assess needs of consumers
- Ascertain current attitudes in the community
- Best practices of integration models
- Need for integrated program

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### Focus Group Primary & Observations

- Program design should provide equal ground
- Social contact should occur in the least restrictive and most naturally occurring way-social marketing
- Natural presence in the community such as riding the bus, shopping at the grocery store, and living in neighborhoods

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### Informant Interviews

One-on-one Interviews

- Stakeholders personally and professionally involved with ADD
- Business owner, County Regulator, Parent, Researcher in the Field, Service Provider, Current DSM Student, DSM Graduate, Consumer & Educators
- Share their opinions, experience, and best practices

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### Informant Interviews Questions

- Relationship to ADD
- Opinion whether ADD experience discrimination, examples
- Knowledge of integration programs
- Perceived changes in the community
- Reaction to proposed integrated program
- ADD in Community College Class

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### Informant Interviews Primary & Observations

- Capacity to Enrich Lives
- Change Attitudes and Stereotypes
- One-a-time, Most Effective Impact
- Interaction Does Not Mean Inclusion
- Partnering vs. Care-taking
- Creative Process Provides Equal Ground

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### Results

- Corroborated Findings of Corrigan Study
- Supported the Need for Intervention
- Emphasize Abilities Rather than Disabilities
- Program Design Critical for Success
- “Getting in doesn't mean fitting in.” *Maryellen Stives, P.R.I.D.E.*

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## II. Program Design Narrative

### Literature Review Summary

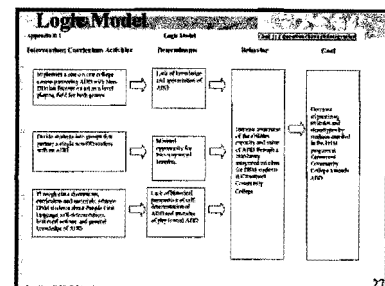
- Psychiatric Disability Questionnaire-Corrigan
- Recreative Sports Inventory
- Two-way Social Learning
- Social Interaction/Relationships
- Equipe Measurement Tools
- Depression & Attitudinal Measurement-PC?
- Artistic Expressions & Art Therapy
- Immigrant Youth, Terminally Ill, Cancer Patients, Mental Illness,
- Behavior Degree Program Teachers & Attitudes

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### Purpose of Study

- Service providers - part of the problem, limiting the experiences of ADD.
- Change mindset - for ADD to achieve a better quality of life.
- Expressive Arts - credible intervention tool to modify negative attitudes.
- Proposed Study - college curriculum art course integrating the non-DD with ADD.
- Modify negative attitudes by emphasizing ADD abilities and capacities.

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**Goal 2- Community Awareness**

Objective 2 - By December 2007, SMSC Director arrange Spring 2008 presentations to 5 community organizations, distribute pamphlets develop alliances for SMSC and SG, increase awareness of abilities of ADD, & result in a minimum of 15 community leaders attending Art SEEN

- Coordinate dates and make presentations
- Create & Print 1000 Pamphlets using People's Art, artwork from SG classes, campaign message
- Collect register log at Art SEEN

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**Goal 2- Community Awareness**

Objective 3 - Enroll 10 East San Diego County community members in art classes at SG within 2 weeks of June 08 Art SEEN gallery opening

- Book art galleries for Art SEEN
- Display art work created by CE classes
- Promote Art SEEN
- Advertise event in GCC campus newspaper and county and library newsletters
- Art SEEN occurs for 1-week last week of Spring Semester
- Collect registration info gathered to promote integrated art classes at SG

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**Methods**

- Research Design - Experimental Design
- Study Site - GCCC, SMSC
- Participant Recruitment - 30 DSM students
- Selection of Study - Randomly enrolled-15 ea
- Staff Training - Curriculum Developers
- Pre-Assessment - ADTP Scale, Demographic Survey - baseline
- Intervention - Integrated/Non-integrated required Creative Expression Course
- 6 Weeks-8 week Education/8 week Art
- Experimental Grp - Integrated Art course
- Post-Assessment

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**III. Social Marketing Plan**

Reinforce the intent of the intervention

GLAS

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**Target Audience Segmentation**

- Internal
  - ADD - SG
  - DSM students
  - Staff
- External
  - GCC
  - East San Diego County

Sample = Students enrolled in the DSM Creative Expressions course

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**Product**

- Awareness of the Abilities of ADD
- Non-disclosure of integration
- Avoid perpetuation of stigma & differences
- Marketing Challenge
- Social marketing applied to the background
- Steady messaging on campus, behavior reinforcement, and validation by the secondary target audience.

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**Price**

- Costs - Detriments
  - Transportation
  - Safety
  - Time commitment
  - Integration with strangers
- Benefits
  - College Credit
  - Increased knowledge

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**Place**

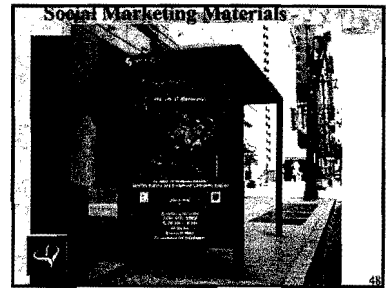
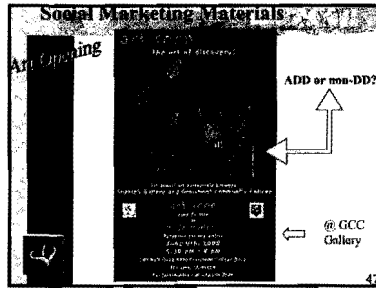
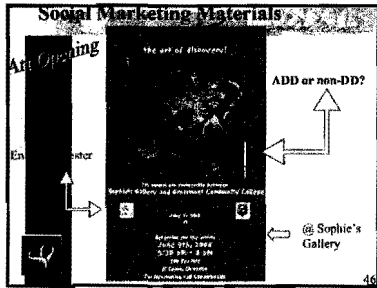
- Westmont Community College
- Photie's Gallery
- 1.5 Miles distance
- Shuttle Provided

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**Promotion**

- Weekend - Reinforce behaviors
- Posters
- Art SEEN - Gallery Opening
- Art Displays - Bus shelters, coffee shops, schools, libraries
- Pamphlets
- Presentations

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**Publics, Partnerships & Policy**

**Publics**

- Internal:** students, teachers, accrediting institution staff, & evaluators
- External:** wider public of GCC, opinion leaders, policy makers, friends, community, neighborhood, & care-givers

**Partnerships** - art galleries & other venues to display work, Civic & social groups

**Policy Change**

**IV. Cultural Competency Plan**

- Ensure equitable access
- Meet diverse learning styles
- Complying with federal legislation.

**Involvement w/ Partner**

**Madeline Sophie's Center, Sophie's Gallery, GCC in East San Diego County**

- Partner with local cultural diversity organizations
- Ensure policies address special needs of the population on every level.
- Partner's strategic plan embraces diversity, learning and learning strategies to meet students' diverse learning styles, ensuring faculty & staff represent the community they serve

**Training and Staff**

- Employee 2 hr harassment & workplace diversity training
- Mandatory quarterly Title VI & the federal Civil Rights Act & Linguistically Appropriate Practices (CLAS) Standards training
- Offer customized training - Cultural competency awareness, culturally and linguistically appropriate services for ADD populations
- Regular review of policies & procedures
- Annual compliance & audit checklists

**Community Representation**

- Representation ADD & families - consumer services, services for ADD, access to translator services
- Ensure attendance by experimental group completing intervention
- Ensure ADD to co-facilitate art component & ensure representation in educational component

### Language

- Translated Materials
- Reading level assessment
- Visual & Pictorial Aids
- Interpreter Services on site

### Materials

Translated materials, signage, and audio-visual materials should be available in:

- Language preference
- Culturally appropriate
- Literacy levels
- Sign language, Braille, large print
- Visually & hearing impaired versions
- CLAS info

### Consumer Client Test (SMSC)

### Cultural Diversity at GCC

### V. Evaluation Plan

Evaluating CE class to determine if the intervention minimized stigmatizing attitudes toward ADD among those entering the field as caregivers by focusing on the abilities rather than the disabilities of ADD through an integrated expressive arts

### Evaluation Measures

Data Analysis

- Quantitative: Demographic survey & Attitude Toward Disabled Persons (ATDP) scale
- Qualitative: A self-report exit narrative of study participants

### Quantitative: Demographic Survey

Developed at USD for SDSU's Interwork Institute

- Currently used at GCC's for intake to DSM
- Mean age, gender, ethnicity, education level, degree, native language, veteran or disabled
- Reliability & Validity
- Part process: peer-view, pilot study, factor analysis, and subsequent revisions, multiple regression analysis
- Characteristics of success or failure

### Quantitative: ATDP

- Measures attitudes toward people with disabilities, published 1960/1962
- Self-report 6-pt scale range -3 ("I disagree very much") to +3 ("I agree very much")
- Differences, characteristics & treatments between disabled and non-disabled
- Reliability, equivalence reliability estimates range from +.41 to +.83, with time intervals ranging from 2 weeks to 5 months.

### Quantitative: ATDP (cont.)

- Reliability questioned
- Gender, educational level
- Susceptibility social desirability
- One-dimensionality - Form B, factually pure?
- Compliant People First language/CLAS standards
- Modification: pilot test study, establish baseline, compare data to future pre & post assessments. Phrasing and testing must continue to be manipulated until the reliability index falls within the acceptable range of +.41 to +.83.

**Quantitative - ATDP (cont.)**

- Attempts to develop other attitude studies inconclusive
- Attitude Toward Disability (ATD) Scale,
- Mental Retardation Questionnaire (MRQ)
- Multidimensional Attitude Scale on Mental Retardation (MASMR)

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**Qualitative - Self-report Exit Narrative**

- Identify the personal experiences of the study participant
- Open-ended questions with limited space for responses
- Statistical analysis +, - or neutral responses
- Narratives reproduced by Independent Researcher

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**Evaluation Methods**

- Demographic Survey & ATDP
- Independent individual and researcher by DSM Instructor
- Pre-assessment - 1st day of the 16-week course, baseline Post-assessment
- ATDP - last day of class
- More assessments in 4-week period.

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**Evaluation Methods - Objective 1.1**

**Education through Integration - Decrease stigmatizing attitudes & stereotypes of students toward ADD**

- Process: Curriculum written and reviewed and approved from GCC Curriculum Committee
- Outcome: None
- Evaluation Measure: None

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**Evaluation Methods - Objective 1.2**

**Education through Integration - Decrease stigmatizing attitudes & stereotypes of students toward ADD**

- Process: Two DSM instructors will be used to teach Creative Expressions classes
- Outcome: None
- Evaluation Measure: None

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**Evaluation Methods - Objective 1.3**

**Education through Integration - Decrease stigmatizing attitudes & stereotypes of students toward ADD**

- Process: None
- Outcome: Decrease stigmatizing attitudes and stereotypes by students toward ADD by 15%
- Evaluation Measure: Attitudes Toward Disabled Persons Scale (ATDP) Pre & Post assessment administered with Demographic Survey augmented with self-report exit narrative

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**Evaluation Methods - Objective 2.1**

**Community Awareness - Adults with Developmental Disabilities (ADD) are treated as valued members in the community of East San Diego County**

- Process: Production and distribution of flyers and handouts; ART SEEN promotion
- Outcome: None
- Evaluation Measure: Minimum of 250 East County residents will attend ART SEEN

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**Evaluation Methods - Objective 2.2**

**Community Awareness - Adults with Developmental Disabilities (ADD) are treated as valued members in the community of East San Diego County**

- Process: Coordinate civic group presentations, create & distribute pamphlets, track attendance through registration log at ART SEEN to determine if at least 15 community leaders attended.
- Outcome: None
- Evaluation Measure: Guest registration log

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**Database Usage**

- Data analyzed & scored by an independent researcher- Statistical Package for Social Services software (SPSS).
- ATDP: sum all the responses, reverse the sign of items, and add a constant to eliminate any possible negative value
- SPSS operations provides scores - range from 0-Form 0) or from 0-180 (Forms A and B), with a higher score indicating a positive attitude in each case
- Analysis presented to DSM curriculum instructors at USD for SDSU's Interwork Institute for final assessment of program success by 15%.

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### Study Strengths

- Level intervention on a constructivist learning that allows ADD the opportunity to function in an environment that gives them a level playing field to facilitate "two-way social learning"
- Focuses on abilities
- Engaging & "illuminating" experiences
- Engages patients & refugee children using creative design workshops such as art and music
- Developed positive attitude and awareness translated to the community at large
- Self-assessment narrative first-hand experiences

### Study Limitations

- Small scale change to CLAS language may limit test validity
- Small number of DSM students estimated to work with the target population - less representative of the general citizen in East San Diego County
- Future studies should measure ADD attitude & relationships fostered between ADD & non-DD
- Intervention

### Budget

Category	Amount	Total
Personnel	100,000	100,000
Materials	50,000	150,000
Travel	20,000	170,000
Other	10,000	180,000
<b>TOTAL BUDGET</b>	<b>180,000</b>	<b>180,000</b>

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Adkins, J. (2010). The impact of social media on the lives of young people. *Journal of Youth Studies*, 13(1), 1-10.

Adkins, J. (2011). The impact of social media on the lives of young people. *Journal of Youth Studies*, 14(1), 1-10.

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### Appendices

- Appendix A Literature Review Matrix
- Appendix B Logic Model
- Appendix C Workplan Matrix
- Appendix D Experimental Design
- Appendix E Social Marketing Materials
- Appendix F Cultural Competency Materials
- Appendix G Demographic Survey Example
- Appendix H ATDP Example

### DISCUSSION

Thank you Research, Design & Evaluation, you've done wonders for us!



St. Madeleine  
Sophie's Center

Serving Adults With  
Developmental  
Disabilities

April 18, 2006

University of San Diego  
Master's Program in Nonprofit Leadership & Management  
School of Leadership & Education Sciences  
5998 Alcalá Park  
San Diego, CA 92110

Dear: Patty Cowan, Kelly Mitchell, Wendy Morris and Ileana Ovalle

In the fall of 2005, St. Madeleine Sophie's Center was honored to have been the impetus of your Research; Design & Evaluation course study; *Education and Integration: Partnering the Community with Adults with Developmental Disabilities*. As an organization whose mission is to empower adults with developmental disabilities to discover, experience and realize their full potential as members of the greater community, your scientific and applied research has supplied us with invaluable information.

It is obvious that your study was carefully prepared to benefit our organization. Your research and references have given us tools to use for concrete justification to secure funds to further the interaction of people with and without developmental disabilities into our regular programming. In 2007 we hope to use your findings in our efforts to obtain a grant from the State Council on Developmental Disabilities, and other relevant funding sources. We also have hopes to realize a curriculum partnership with the Grossmont Community College District's Disabled Services Management program and Sophie's Gallery.

In the meantime, I am pleased to tell you that on February 3, 2006, St. Madeleine Sophie's Center launched our first integrated art classes at Sophie's Gallery. *First Friday* and *First Saturday* are art courses offered and promoted to people with and without disabilities on the first Friday and Saturday of every month. The program is proving to be a success in educating people on the ability and contributions that the developmentally disabled bring to our community. I know that some of you plan to participate in one or more of these sessions. We encourage you to come and witness the beginning stages of your tireless efforts in action!

On behalf of St. Madeline Sophie's Center thank you for taking an interest in our organization and the people we serve. Your efforts were first rate, applicable and commendable.

Sincerely,



Debra Turner Emerson, MBA  
Executive Director

2119 East Madison Ave., El Cajon, CA 92019-1111 • 619.442-5129 • FAX 619.442.2590  
www.stmsc.org • e-mail: stmsc01@stmsc.org