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SERVING MULTIPLY HANDICAPPED DEAF ADULTS IN A COMPREHENSIVE REHABILITATION CENTER

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The need for comprehensive rehabilitation services for the multiply handicapped deaf is well known to professional workers in the field. The benefits that can be derived from such services have been documented by Lawrence and Vescovi (1967), Blake (1970) and Hurwitz (1971). Facility services for the adult deaf require special provisions and the assistance of trained staff. If these special provisions and staff are provided, at least one-half of low achieving deaf adults can be rehabilitated (more properly, habilitated) with a core program of vocational and social services (Bolton, 1971). The present Deaf Project at the Hot Springs Rehabilitation Center (HSRC) is an effort to provide the needed intensive services in order to increase the number of rehabilitated deaf adults.

The Research and Demonstration Project, "A Comprehensive Facility Program for Multiply Handicapped Deaf Adults" being conducted at HSRC is now in its fifth and final year of operation. Specific objectives of the project were to provide a setting to develop and evaluate a meaningful service program for deaf clients and to provide internships, practicums, and short-term training conferences for personnel working with deaf adults.

The current project is based on the results of a prior three-year project conducted at HSRC to investigate the ability of the Center to serve the deaf. The initial study revealed that deaf individuals with considerable potential could be rehabilitated at the facility. At the same time, however, numerous multiply handicapped deaf people were being denied needed rehabilitation services as a direct result of limited facilities. Thus, the present Project

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represents an attempt to bridge the wide gap between these individuals and society by means of comprehensive facility services.

Setting

Services and activities of the Project are conducted within HSRC, the major facility of the Arkansas Rehabilitation Service. The Center consists of some 47 buildings on 21 acres of land adjoining Hot Springs National Park. A comprehensive range of medical, social, psychological, and vocational training services are provided to an approximate daily enrollment of 475 handicapped clients including some 40 deaf individuals. Vocational training is provided in 34 different areas and programs are individualized according to the client's assets as well as physical and mental limitations. In addition, specialized services are provided to the deaf by project staff in the areas of vocational tutoring, independent living, personal and social adjustment, and driver education.

Project Clientele

The target population of the project is young adults who are considered handicapped as a result of communication deficits, poor work skills, and interpersonal relations which have contributed to unemployment or underemployment. In order to be admitted to the Project for services, the following criteria must be met: age 16 or older; non-functional hearing; fourth grade reading achievement or below; history of unemployment or serious underemployment; borderline intelligence or above; and freedom from severe emotional problems, behavioral patterns, and/or serious physical limitations.

A total of 185 multiply handicapped deaf adults ranging in age from 16 to 55 years of age have received Center and Project services. The majority of those served, 66%, were in the 16 to 20 age bracket. All project students have been single and 95% had lived only with their parents. Of the total served 73% were white and 72% were males.

In the educational area 78% had nine or more years of schooling and 22% had attended private or public schools for 13 or more years. On the Wechsler Adult Intelligence Scale (WAIS) 21% were below 80, 43% in the 80-90 range, and 31% above 100. The median grade-level achievement (reading, language, and arithmetic) was third grade with only 10% achieving above the fifth grade level.

A large percentage of the students had experienced difficulty prior to their enrollment at the Center. For example, 31% of the clients had been administratively discharged from other institutions and 53% had not completed their former programs.

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Staff and Staff Functions

Within the current project, provisions were made for special staff who have the understanding and skill required to work with the deaf population. The staff is composed of a director, principal investigator, supervisor, coordinator, media specialist, recreation specialist, counselors, personal adjustment instructors, interpreters, vocational evaluator, adjustment counselor, and clerical staff.

The coordinator's function is the coordination of the staff in reference to client services, within the framework of HSRC. The counselors, skilled in manual communication, provide counseling, guidance, and case management to project clients. Frequent contact is made with the referring counselor to inform him of client progress.

All clients go through a two week orientation and diagnostic evaluation that includes orientation, personal adjustment, evaluation, and vocational evaluation including work sample tests, and psychological assessment. The diagnostic period identifies job family areas that appear vocationally feasible for the client. The client then moves into either training, work adjustment, or "long-term" evaluation. If he enters long-term evaluation, he is placed in one of 34 vocational training areas for situational testing.

With few exceptions, the deaf clients are in need of personal, social, and/or work adjustment services. Although the client has vocational potential, his lack of work skills or inappropriate behavior must be dealt with before initiating training. In the Work Adjustment Center (WAC), the client's specific problems can be treated by the work adjustment specialist. Treatment in work adjustment is directed toward client deficiencies and needs.

The personal adjustment instructors provide classroom instruction and actual experience in academics, personal adjustment, vocational tutoring, and independent living. Independent living training is a vital facet of the client's program. The clients are taught to open checking accounts, use public transportation, rent apartments, plan and prepare meals, and budgeting. After a period of didactic training they move into an apartment in the community.

The interpreters serve as instructor aides, moving from one area to another, translating class lectures, assisting in demonstrations such as director education and helping the client in his actual activities.

The media specialist works with the project staff, developing materials to increase their effectiveness with the deaf clients. Film strips, flash cards, training manuals, and brochures have been assembled for staff utilization.

The work adjustment specialist provides the client with the opportunity to minimize his frustrations in a nonthreatening environment. As work is therapy, it can be utilized to bring about personal and social change in the client. In addition to work activities, the work adjustment specialist provides counseling, guidance, support, and encouragement to the deaf individual. It

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can be used as a "learning" experience for the client as he is free to develop work habits, personal skills, and social skills under the supervision of the work adjustment specialist.

Discussion

Although multiply handicapped deaf adults present a definite challenge to professional rehabilitation workers, the results of the HSRC project reveal that they can definitely benefit from the comprehensive HSRC services. An underlying assumption is that HSRC's therapeutic milieu may be the most important service the clients obtain. They are drawn into social and recreational activities and perhaps for the first time in their lives find acceptance by their peers.

A major objective of the project during the initial phases was to train the vocational instructors at HSRC in manual communication. This objective has not been realized as a result of several factors and thus, the need for adequate interpreting services remains crucial. The three interpreters are used extensively and provide a valuable service to both clients and staff.

The multiply handicapped deaf client, especially the young adult, must be trained by means of didactic methods in the basic skills necessary for them to function with minimal competence in the social, personal, vocational, and academic areas. Therefore, a vital ingredient to rehabilitation services is personal adjustment training with the objective of providing this target population with the skills to make a satisfactory life adjustment.

Any rehabilitation facility providing services to multiply handicapped deaf adults must assume the obligation of working with their deviant behavior. Staff must realize that these individuals experience the same frustrations and anxiety as hearing persons. Some release their hostility through fighting, intoxication, failure to adhere to rules or regulations, and other rebellious behavior. For this reason, personnel must be aware of these factors and provide more acceptable outlets for relieving frustration.

Appropriate media for the severely handicapped deaf is practically nonexistent. In the future, if media is to be useful it must, in reality, be developed. Admittedly, enormous amounts of materials are available but most is inappropriate for our project's population. HSRC has developed vocational training manuals, transparencies, flash cards, slides, brochures, pamphlets, and directories. Nevertheless, inadequate funds for equipment, materials, and staff have made this task practically insurmountable.

A major difficulty of the HSRC project has been in recruiting and employing qualified staff. In speculation, special projects that are given time to select and train their staff may be more stable and less likely to experience staff turnover, and therefore, more capable in the long run of providing more meaningful rehabilitation services. It must be understood that staff training is time consuming and expensive but long-term benefits may offset the initial cost and effort.

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Significant Conclusions

The Project has collected a considerable amount of information useful for research purposes and in administering rehabilitation services to multiply handicapped deaf adults. Some of the major findings that follow should be of significance to facility administrators and staff contemplating providing services to the deaf.

1. Multiply handicapped deaf adults can be effectively served in a comprehensive rehabilitation center with the addition of special staff.

2. Deaf individuals can be successfully integrated into a program with hearing individuals thus preparing them for a world in which they will live and work.

3. All special staff directly involved with delivery of client services must be able to communicate adequately with the multiply handicapped deaf if meaningful services are to be provided.

4. Deaf clients, in most cases, require a period of personal, social, and work adjustment prior to vocational evaluation, vocational training, or direct placement.

5. Multiply handicapped deaf people do have unique problems, compounded by their communication deficits, in adjusting to rehabilitation facilities. If these problems are to be met, they must be identified and service programs designed to effectively serve the client.

6. Appropriate media must be developed for use with deaf clients. The media currently available, although commendable, has little application to the multiply handicapped deaf adult.

7. Rehabilitation services to deaf individuals must be a cooperative and team effort on the part of project and facility staff. All staff directly involved in client services must work within the concept of a team effort rather than in isolation.

8. Special projects for the deaf must have leeway to train and orient staff for providing services to severely limited deaf adults.

Summary

Many rehabilitation facilities, including HSRC, have been criticized, justly and unjustly, for their failure to rehabilitate many deaf clients. However, a review of the deaf clients served at the Center reveals that many of them had been discharged from other facilities. It is for this reason that the project at Hot Springs is considered the last opportunity, in many cases, for the client. It is evident, therefore, that HSRC is committed to providing services and has accepted the multitude of concomitant problems of serving the multiply handicapped deaf.

Current results indicate that special staff must be available if the deaf are to receive the needed services for rehabilitation. Additional services

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beyond those normally provided by the facility such as personal adjustment, vocational tutoring, media development and utilization, interpreting services, and special recreational and dormitory services enhance success with the deaf. Any facility accepting a special project accepts the obligation that accompanies it. A definite commitment is necessary if any project for multiply handicapped deaf adults is to reach established goals.

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