

The TinkerToy Conundrum: Building Links to a New Partner

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Abstract

As service providers, we search for ways to obtain services for individuals who are deaf and hard of hearing. Although we do our best to provide services within our programs, this initiative is not always possible due to resource limitations of time, staff and funding. Faced with these shortages, we often must seek other resources. The discovery of an underused or untapped resource that can assist us to provide services and complete our mission is important. Community Rehabilitation Programs are resources available to help provide services for students who are deaf and hard of hearing. Community Rehabilitation Programs offer a variety of programming from assessments to job readiness training to many community contacts, especially with employers. After a review of the history, available services and benefits, the participants in this workshop used TinkerToys to construct a visual model representing links and strategies to partner with this valuable resource.

Introduction

Many Community Rehabilitation Programs (CRPs) were established in the early 1970s as the result of an identified need to serve individuals with disabilities including those who were deaf or hard of hearing. Part of this impetus came from within the deaf community as they saw a need for employment related services. In the beginning an assumption was made that individuals who are deaf would benefit from and be able to participate in traditional rehabilitation facilities, the term used at the time. Services were mostly available through general rehabilitation facilities serving all disabilities and this was done out of necessity not choice. The traditional rehabilitation setting did not have skilled deafness professionals. Service providers lacked understanding of deaf culture, the varying degrees of hearing loss and the specific needs of this group (COED, 1988).

Communication issues were vast because service providers relied on English as the preferred mode of communication. For persons who were deaf this often meant the use of paper and pencil, not sign language. To determine the types of services to render, providers used English-based tests to evaluate individuals with a hearing loss. These were not appropriate and often resulted in misdiagnosis and the resultant focus on the delivery of inappropriate services. However, these tests were appropriate for persons who use English, such as individuals who were late deafened or some hard of hearing. With the exception of some demonstration programs and a few state-operated facilities, the population was served in this manner throughout the 1970s and into the 1980s. The bulk of the deafness-related funding was directed toward traditional postsecondary programs (Petersen, 1981).

In the early 1980s professionals in the field of deafness advocated for specific services for persons who are deaf, hard of hearing, deafblind and late deafened. Traditional programs to serve these populations decreased; instead, there was growth in both the number of rehabilitation facilities serving these populations and in the number of qualified service delivery specialists. The recognition of different modes of communication and the various methods to communicate reduced the need for the old paper and pencil method. The need to redirect rehabilitation plans to a client center-based one came about as a result of changes to the rehabilitation act (Sligar, 1994).

To define and broaden the parameters of community rehabilitation programs, the 1992 Amendments to the 1973 Rehabilitation Act changed the definition from one that links services to a building (place bound) to one that is linked to the provision of services (non-place bound). The CRP was defined as a program that facilitates or provides direct vocational rehabilitation services to individuals with disabilities. The 1990s ushered in more demonstration projects for persons who were low functioning and deaf and saw an increase in general programs serving the populations. The current situation finds a variety of services from highly specialized programs as outlined in the next section to general programs offering some services to general programs with only access services, e.g., interpreting.

Community Rehabilitation Programs

There are many types of community rehabilitation programs throughout the country with various mission statements, goals and objectives, purposes, services and support, funding streams and clientele but what they all have in common is serving individuals with disabilities including those who are deaf or hard of hearing. To illustrate this point two CRPs are described. These two programs are approximately 75 miles from each other with one in Illinois and the other in Wisconsin. The uniqueness is that both facilities serve individuals with sensory losses but the size, resources and services differ.

The Center for Deaf-Blind Persons, Inc. is located in Milwaukee, WI, with a population of over a million. Milwaukee is a heavy industry and service-based community. The Center's existence came about as the result of one woman's quest to find a facility in the community to assist with her dual loss of vision and hearing. After her extensive search yielded not one service, the program began in 1985. The Center's mission is to provide services to minimize effects of deaf-blindness on the individual and family, and to increase community awareness and acceptance. A variety of rehabilitation programs and services are available such as activities of daily living, communication, leisure, technology, case management, pre-employment and employment assistance, as well as social and support groups. High quality staff with rehabilitation degrees in different professional disciplines provides the services to individuals. The Center works with youth and adults and is funded from various sources including foundations, individual contributions and federal and community contracts or grants.

The Center for Sight & Hearing is located in Rockford, IL, with a population of 300,000. Rockford is also a heavy industry and service-based community. The Center for Sight and Hearing was established in 1960 for persons who were blind and, as service needs increased for persons who experienced a hearing loss, the Center became a program serving persons who were blind, deaf and deafblind. The Center's mission is to help people with a hearing or vision loss to live independently. A variety of rehabilitation programs and services are available such as activities of daily living, communication, assistive technology training and sales, case management, pre-employment and job placement assistance, social and adjustment counseling. Qualified staff with varying rehabilitation backgrounds provides the services to individuals. The Center works primarily with adults and obtains funds through Lions Club, foundations, state and federal contracts, individual and business contributions. The center serves as an outreach site for the Midwest Center for Postsecondary Outreach at the Technical College in St. Paul, MN.

Both agencies are very similar in the areas of programs and services, mission statements, types of industry within the community, qualified staff, various funding streams, persons served and community connections. The agencies differ in the areas of age and type of disability, years in business, staff and local population size, and some rehabilitation services (not all programs were listed).

The purpose was to illustrate two community rehabilitation programs and what they have to offer in their communities. Service providers, professionals and others are often not aware of the community rehabilitation programs in their communities. These programs are overlooked as a resource to supplement the depleting funding and other resources of one's own program.

Demystification and Benefits of a CRP

Community Rehabilitation Programs continue to be a mystery. When introducing facilities by name, people often smile politely and this belies that they do not understand what it is or what services are offered in a CRP. It is easy to overlook the benefits that are available through a CRP. A common definition of postsecondary education is that it includes two and four year colleges and programs not community rehabilitation programs, vocational training programs or proprietary schools. This narrow view can limit access to a valuable resource.

What do CRPs offer? What is their value to students and consumers who are Deaf, Hard of Hearing, Late Deafened, and Deaf-Blind; to private or public programs; professionals and service providers; postsecondary programs and researchers? The benefits of CRPs are many. Some examples include:

- Assistance with daily living skills instruction;
- Contacts with employers;
- Information on employment opportunities;
- Provision of professional development opportunities within their area of expertise;
- Program consultants;
- Potential advisory council members;
- Provision of a variety of employment related services including job readiness, on the job evaluations, etc.; or
- In some cases residential services are available.

Community Rehabilitation Programs are a great asset to other community-based programs, including two- and four-year colleges and universities. CRPs provide resources and information that other institutions do not have or the purpose and mission of the institution is not conducive to provide such services. Demystifying and understanding these resources takes time and commitment. CRPs provide additional supports to programs with limited or restricted funds;

staff availability or facilities purpose does not cover certain programs. Linkages or partnerships need to be constructed that serve both institutions (Johnson & Sligar, 1993, 1992).

TinkerToys Unite!

In order to develop a working model of how to link two- and four-year colleges and universities with CRPs the workshop participants were divided into two groups and given a box of TinkerToys. The instructions were to use the various items to represent needs and links between the two organizations. Group model construction took two different approaches. One group developed a model based on student needs with outreach to various resources in the community. These included mental health and one-stop employment centers. Time limited the development of implementation strategies but there was significant emphasis placed on the diverse opportunities available if the college or university program were to examine the possibilities in their own backyards. The second group viewed the possibilities that existed for implementation, including the use of technology. Also included were the formation of personal relationships and recognition of the importance of mutual benefits. Both groups agreed on the importance of developing these links and the wealth of resources available.

Summary

Community Rehabilitation Programs (CRPs) are a valuable resource for postsecondary institutions and for students who are deaf, hard of hearing, late deafened or deaf-blind. The development of partnership opportunities between CRPs and other postsecondary institutions can provide solutions to a variety of issues or needs for students who are attending, planning to attend or completed postsecondary programs. The linkage of CRPs and postsecondary institutions helps with such varying needs as solutions for student diversity, assistance with student daily living skills (e.g., budgets, transportation, and time and personal management), provision of employer contacts to assist students with local job opportunities and other student needs. Community rehabilitation programs can also assist postsecondary institution faculty and staff with professional development opportunities, access to professional peers to deliver services to students who are deaf, hard of hearing, late deafened or deaf-blind, or serve as advisors.

The TinkerToy Conundrum

What is the difference between TinkerToys, CRPs and a Postsecondary Program? The answer is YOU!

References

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