SUMMARY OF PANEL PRESENTATIONS

Improving rehabilitation service delivery for severely handicapped deaf persons through research utilization refers to the implementation of research results in rehabilitation practice with deaf persons. Synthesizing broad categories of research findings related to client, service, resource, and survey information, the panel presentations have outlined a more systematic process of research utilization within the field of deafness rehabilitation.

Collecting data specifically to support organized research and planning, this model of research utilization provides a systematic planning function. Planning information obtained through this process of data collection can be used to assist rehabilitation planners more accurately to predict and plan expansion or modification of the delivery system for severely handicapped deaf persons.

The proposed model of data collection, analysis, and subsequent utilization is a relatively uncomplicated approach to research, especially as the required four categories of planning data are readily available to the practitioner or researcher. The typical client intake form used by most state rehabilitation agencies, for example, provides immediate access to the necessary data. Information about client characteristics such as age, sex, race, education, income, disabilities, work history, presenting problem(s), and rehabilitation status(es) can be readily obtained from the intake record. The practicing counselor with a deaf client caseload could readily derive a profile of his client population, their characteristics and service needs by the organization of this information into frequency tables. Data thus organized could then be utilized in planning delivery of rehabilitation services which are derived from the specific client population for which the counselor is concerned.

Planning data collected through this approach to research is equally applicable to construction of relatively simple frequency tables or highly sophisticated multivariate analyses. To perform this planning function, however, requires a model of data collection and utilization. Counselor intuition and experience, although definite assets in planning services, will usually not provide the power of analysis that systematic data collection, organization, and analysis can make available in planning and evaluation of services.

The research model proposed by this panel is one which utilizes information available to the practicing counselor and provides the framework within which to collect, organize, and analyze pertinent information for planning purposes. This model of planning research, supplemented by extensive reviews of the literature provided by the panel presentations is, we propose, a viable model for improving the delivery of rehabilitation services for severely handicapped deaf persons through research utilization.