

THE NEED FOR A COUNSELOR-TEACHER FOR THE DEAF IN REHABILITATION SETTINGS

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Statement of the Problem

California Rehabilitation Counselors for the Deaf, along with special education teachers, mental health professionals, social workers, members of the deaf community, and administrators of programs for the deaf, have in recent years expressed increased concern over the lack of vocational preparedness among young deaf adults.

Rehabilitation Counselors for the Deaf (RCDs) are experiencing a significant number of hearing impaired applicants for California Department of Rehabilitation services who are unable to successfully negotiate their environment. These individuals, often multi-handicapped and from divergent cultural backgrounds, are unfamiliar with the activities of daily living such as nutrition, apartment rental, and use of public transportation. Their problem-solving and decision-making skills are not well developed and their knowledge of the work world is limited. They often exhibit poor language skills. They have a limited naming vocabulary, no consistent syntactical arrangement, poor sequential language, and, sometimes, no mutually intelligible sign vocabulary.

The prevocational needs of these clients are too extensive to be addressed in traditional rehabilitation programs. Rehabilitation Counselors for the Deaf have tried to partially meet the prevocational needs of clients by rallying existing educational and mental health resources and by the use of tutorial services. Unfortunately, while tutors may have the necessary communication skills, they

most often do not have the qualifications necessary to respond to the wide range of needs of the low functioning deaf client. Existing educational and mental health services also cannot provide the extensive services required.

As a consequence, deaf rehabilitation clients frequently do not receive adequate vocational preparation. This results not only in a diminished ability to successfully engage in vocational training or retain a job, but in high recidivism on deaf caseloads and a continued costly dependency on the RCD to "solve" legal, insurance, job placement, and other problems of adult living.

Research

In 1978 a questionnaire was sent to California State Department of Rehabilitation RCD's, community colleges with "deaf programs", and selected community agencies to survey the needs of their clients in the areas of personal, social, and occupational adjustment. Thirty-three RCD's responded with combined caseloads totaling 1,988 hearing impaired clients. Responding community colleges represented 213 students while community agencies claimed 490 clients.

RCD's indicated that sixty percent (60%) of their clients needed instruction in some area of independent living. Forty-four percent (44%) needed help with budgeting, 24% with travel training, 5% needed assistance with welfare or SSI, 33% with legal problems, and 43% with renting an apartment.

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In addition, RCD's, community colleges, and agencies concurred that approximately 50% of their hearing impaired clients did not have satisfactory work habits, attitudes, or job retention skills. Most workshops did not have staff skilled in manual communication or knowledgeable about deafness to assist in the deaf client's work evaluation and adjustment.

Survey results also showed that 35% of the clients are in need of personal counseling. Forty-eight per cent (48%) needed instruction in reading and writing skills and 52% needed help in filling out an application. Nineteen percent (19%) also needed sign language instruction.

Rehabilitation Counselors reported that in the 1977-1978 fiscal year they had screened out (not accepted for services) 151 applicants who they felt could have benefited from independent living skill instruction through services such as that of a Counselor-Teacher. Additionally, RCD's reported they had unsuccessfully closed 240 clients (14% of the combined caseloads) who would have profited from counselor-teacher services. This totals 391 clients or 23% of the number of people served who could use the services of a counselor-teacher.

Although time limitations prevent the RCD from satisfactorily meeting the extensive needs of low functioning clients in the areas of personal, social, and occupational adjustment, they currently spend approximately 35% (or 14 hours per week per RCD) of their time trying. RCD's spend 20% of their time assisting clients with welfare, unemployment insurance, job applications, etc., and 15% of their time educating other community and government agencies to the needs of deaf clients.

Approach

There is a need for a new professional position to assist in the vocational preparation of deaf adults. This professional needs to use the skills of both counseling and teaching to assist clients in independent living and toward a satisfactory social and occupational adjustment. This professional (referred to in

different terms, e.g., counselor-teacher CT, independent living skills specialist, vocational preparation specialist, vocational specialist) should be 1) proficient in manual communication and able to develop a shared communication system; 2) knowledgeable of the special psychological and sociological problems of adventitiously and congenitally deaf persons; 3) able to assist in the evaluation and adjustment aspects of rehabilitation case-work with deaf persons and to discern the deaf individual's real abilities and potential; 4) skilled in guiding the deaf person to his best achievement using resources available inside and outside the community setting; and 5) skilled in the preparation of deaf clients for independent living.

The Counselor-Teacher or Vocational Preparation Specialist would use teaching skills to facilitate learning and cognitive development, allow for the exchange of information, and help establish cause-and-effect relationships. Counseling skills would assist the client with his personal-emotional development.

Primarily, counseling skills would enable the Counselor-Teacher to facilitate a client's sense of self-worth, self-understanding, and self-expression. The counseling relationship would provide reflection and interpretation of the client's behavior in a way that would allow the client to lower his defenses and begin to see areas where personal changes would be beneficial. The counseling relationship would also assist the client in gaining the confidence and insight necessary to clarify values and make decisions. The counselor would facilitate the development of a sense of responsibility for one's self and a trust that "taking control" could result in establishing and obtaining one's goals.

Teaching skills would enable the Counselor-Teacher to provide prevocational services to congenitally and adventitiously deaf adults. Services could include the following:

Daily Living Skills: The CT can provide information and teach activities of daily living including personal hygiene, budgeting, shopping, apartment rental, problem-solving, decision-making, taxes, work behaviors, and

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insurance. The CT would teach a general approach that would enable the person to perform the above activities with confidence and efficiency.

Home Management: Many young deaf adults need to learn how to live independent of their families. This may involve learning how to get along with a roommate, how to pay utility bills, plan menus, cook, sew, keep records, do laundry and other household duties.

Mobility: Use of buses and public transportation including how to read bus schedules, plan a trip, etc. Also instruction can be given in driver education.

Communication Skills: Clients' communication skills vary widely. Depending on the needs of the client, instruction can be provided in the following areas: 1) use of residual hearing; 2) reading and writing skills; 3) comprehensive language remediation; 4) sign language; and 5) how to communicate with the hearing world.

Counseling: Personal counseling on how to cope with deafness for those who recently lost their hearing and counseling on adjusting to a hearing world for individuals who have been in a residential environment during their secondary education would be provided.

Special Services: Coordination of special services from government or community agencies and referral to the RCD when ready

for vocational training. The CT can also provide assessment of the deaf persons' communication skills before they engage in diagnostic and evaluation services so that an appropriate interpreter can be provided.

Action

This data and program outline was submitted to the Deaf Advisory Committee of the California Department of Rehabilitation which recommended a two-year pilot project to study the benefits of establishing a statewide Counselor-Teacher program. The suggestion was made that not less than twelve Counselor-Teachers be placed in representative districts throughout the state and that their impact be evaluated at the completion of the first and second year of the project. Although the Department of Rehabilitation was not able to implement such a program they did sponsor a Demonstration Project through the auspices of a community based information and referral program. The project which began in February 1979 will operate for three years under Innovation and Expansion funding. The viability of the concept and approach will be evaluated during that time. It is hoped that the demonstration project will further illuminate the need for an in-house Counselor-Teacher Program in the Department of Rehabilitation.

Monograph No. 5

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