

THE DEVELOPMENT OF A FOLLOW-UP QUESTIONNAIRE FOR DEAFNESS REHABILITATION PROGRAM*

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A specially staffed project for deaf persons in a general workshop (San Francisco Community Rehabilitation Workshop - CRW) was evaluated using case review, case flow analysis, performance appraisal, and program impact appraisal. As part of program impact appraisal, twenty-three successful clients were interviewed in a follow-up approximately seven months after they were placed in competitive employment. Six interpreters interviewed clients and recorded data on a follow-up questionnaire.

The development of a follow-up questionnaire that was suitable for use with the substantially language-limited deaf population served at the workshop will be described in this paper. Findings will be reported.

Development of the Follow-up Questionnaire

There has been little evaluation of rehabilitation programs for deaf clients and a search of the literature yielded only one example of a follow-up study as part of a rehabilitation program evaluation.

Glenn and Thornton (1973), in their evaluation of the Arkansas Hot Springs Rehabilitation Project, contacted Department of Vocational Rehabilitation counselors and requested basic information relating to the employment status of project clients.

The value of a rehabilitation workshop is not solely vocational. Progress in other areas is of great importance in clients' lives.

A measure of extra-vocational benefits was wanted in the present study which called for more differentiated data in the following areas: demographic information, general state of well-being, living arrangements, health problems, problem solving ability, social life, work, money, and family. The intention was to compare clients' perceptions of their situations before and after their rehabilitation workshop experience.

In the absence of instrumentation in the field of deafness, existing instruments to measure sense of well-being and rehabilitation gain in the general population were considered. Close study of the Human Service Scale (Human Service Systems, 1973) and the Rehabilitation Gain Scale (Reagles, et. al., 1970) left the evaluators convinced that the language of the item content in both instruments would be far too complicated, even with the use of skilled interpreters. These instruments were sent to the evaluation project's outside consultant (Harry Bornstein of Gallaudet College) who was familiar with the population. He and several colleagues at Gallaudet College confirmed the assessment that these instruments would be inappropriate and could not be used in a meaningful way with this deaf population. While CRW's communication skill data were incomplete, they did show that the CRW clients' weakest skills were in signed English. Clients in all areas generally fell well below

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the deaf adults tested at the University of California using the University of California Center on Deafness (UCCD) Communication Skills Profile. Clearly, an instrument that did not depend heavily upon complicated English concepts, words, and sentence structure was needed.

The evaluators designed an instrument for use by interpreter/interviewers which utilized uncomplicated concepts, words, and sentence structure. A format was used which was easily interpreted into Ameslan and which established a pattern of asking questions in terms of "before CRW" and "now". A visual component was included for many of the items in the form of "smile" faces with mouths either turned up in a smile (labelled "GOOD") turned down in a negative fashion (labelled "BAD") or drawn straight across in a neutral position (labelled "OK"). After obtaining feedback on the instrument from CRW staff, the instrument was field tested. One of the evaluators, who knows sign language, accompanied one of the interpreters and observed administration of the instrument to three clients. Subsequent discussion between the evaluator and the interpreter regarding these interviews resulted in a few modifications of the instrument. It was decided that it was best to have the questionnaire open on the table between the client and the interpreter. The interpreter would sign each question and would point to the "smile" faces for the client to indicate the appropriate response. A few interpreters were concerned that the faces might be considered appropriate for children and therefore might be insulting to adults.

Interpreter/interviewers were not required to point to the faces for each question if they ascertained that responses were clearly forthcoming without their use. There were some clients who showed instant recognition of what was intended by the faces and seemed to like the format used.

Upon completion of the interviews, feedback obtained from the interpreter/interviewers indicated that questions about problems and problem solving proved to be most

burdensome. Some suggested that it was probably difficult for clients to discuss problems with a stranger and that answering might have been facilitated if the questions were broken down into specific problem areas. Moreover, questions about problems seemed to duplicate questions about feelings. Finally, quite a few clients indicated that while they had the same kinds of problems now as before CRW, they had them to a lesser extent now and the interpreter/interviewers found this information difficult to record using the questionnaire's coding system.

Despite great efforts to make the introductory letter arranging the follow-up interview clear and straightforward, there was still some confusion. Two clients went to CRW. A few others seemed somewhat threatened and concerned although the letter referred to "a few easy questions" to be asked in sign language about what the client was doing. The letter follows:

Dear

I would like to meet with you. I am meeting with all the people who finished the deaf program at CRW and were placed on a job by (name of placement counselor). This is a follow-up study. I will ask a few easy questions, in sign language of course, about how you are doing. We can do it on your lunch hour. I hope (day & date) at (time) is o.k. I will ask your supervisor where I can find you just before lunch-time that day. If you don't understand this, please ask your supervisor. I will enjoy meeting you.

Sincerely yours,

RESULTS

The data yielded in the follow-up interviews include a wide range of information and valuable client perceptions of the impact of their experiences in the rehabilitation workshop.

The clients generally felt more positive about their state of well-being at follow-up

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when compared to how they felt before attending CRW. Work and money were most often called as reasons for feeling better. Extra-vocational benefits such as improved self-esteem were also noted.

Clients indicated that they were better able to cope with their problems at follow-up than before CRW. Having money, improved communication skills, and a better understanding of social institutions were frequently cited reasons. Several said they could now take care of themselves because of CRW, but some feared they could not get another job on their own if they lost their current job.

Living arrangements remained essentially unchanged. Before attending CRW, seven clients lived alone, thirteen lived with their families, and three had roommates. Only one client had a different living arrangement at follow-up.

Most clients indicated no change in their health. Three clients indicated that their health had improved and attributed this to having a job. Seventeen of the 23 clients reported at least one day's absence from work since their employment began. In the month prior to follow-up, 12 clients said they were absent one day. Absences were generally due to illness, although the clients were quick to point out when this was not the case (e.g., dental work, meetings, on-the-job training) and indicated that these non illness-related absences were planned for and excused. The clients appeared to be reliable about maintaining their work schedules.

The clients reported that they had developed a more extensive social network because of their contact with CRW and because of their employment status. They appeared more aware of how friendships developed and how they needed to put effort into making friends. Some also saw friends as a new source of emotional support. Twenty clients said they had become friends with hearing people at work. Still, they pointed out the problems in relating to hearing people, indicating discomfort on both sides.

Fifteen clients reported receiving raises in pay. The median salary rose from \$138 to \$150 per week in seven months. All but two worked a forty-hour week.

Nineteen of the 21 employed clients attributed their employment to CRW's placement specialist. Nine liked their jobs, eight said they were "OK", and three did not like their jobs. Eleven said they would like a different job, either to earn more money or to work closer to home.

Clients gave detailed information on the many skills they learned at CRW. Eighteen said that CRW had helped them to be good, responsible workers on the job. Seventeen said they used the specific job skills learned at CRW on their current job.

The final set of items on the questionnaire were for the purpose of learning more about the histories of the successful deaf clients. About half (10) were born with deafness of unknown etiology and with no other deaf family members. Four clients indicated that their deafness was inherited and two attributed it to their mothers' illnesses during pregnancy. Three clients became deaf before the age of two and two became deaf after the age of two. Four clients attributed their deafness to illness and one to head injury.

The follow-up study yielded some additional information that was potentially useful.

The clients felt quite close to the CRW staff and took the opportunity to note the names of staff who had helped them with skill development and with personal concerns, and to thank them. Many of the clients gave relevant, constructive, but sometimes critical, feedback. Four clients said that the skill levels required by actual jobs were more demanding than those acquired or demanded at the workshop. One client suggested that the workshop should help more with academic skills and another thought they should offer help with planning for the future (e.g., marriage counseling), getting a driver's license, teaching how to fix things, encouragement for going to school, and teaching how

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to socialize. While many of the above are not ordinarily considered workshop functions, they do provide indications of clients' perceived problems and needs.

Four clients who had personal concerns expressed some general dissatisfaction with their workshop experience, dissatisfaction with their jobs, or fear that they would lose their jobs. One client who thought she might lose her job wondered if CRW would still help her. Another said CRW took too long to help her. Two others wanted to explore other job possibilities.

The follow-up study located two clients who had left their jobs. Another was contemplating quitting because there were no other deaf people at work and he felt people were talking about him. One of the clients who had left his job said that job pressures caused him to drink and when he stopped work he stopped drinking. He had more time to enjoy his hobbies now that he was not working. For this client competitive employment created more problems than it solved.

CONCLUSION

The CRW follow-up study demonstrates the richness of data which can be obtained as a part of program impact appraisal. Awareness of long range outcomes, issues, and problems for clients can facilitate the development of effective workshop programming. If useful data is to be obtained it is essential that data gathering instruments be designed for use with the population served when that population has special needs which preclude the use of more widely used instruments. While the instrument which was developed for this study was not validated, it is a step toward building a repertoire of program evaluation tools for use with deaf clients. It is hoped that these authors or others will build upon it. For a copy of the questionnaire, you may write to the authors.

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