

**Stout Vocational Rehabilitation Institute  
University of Wisconsin-Stout  
Menomonie, WI 54751**

**Request for funds  
Targeting Improvements in the Economic Status and Advancement of  
Individuals with Disabilities in America's Heartland**

**Organization:** The Stout Vocational Rehabilitation Institute (SVRI) located within the College of Human Development at the University of Wisconsin-Stout maintains a dual role of serving persons with disabilities by improving the quality of their lives and reaching the practitioners and professionals who deliver services by increasing their skills and knowledge. At the end of 2004, SVRI delivered employment directed programs and services to 107 individuals; successfully engaged 68 individuals in the workforce; provided 23 distance learning workshops, reaching 342 rehabilitation practitioners; and completed a significant applied research project that examined the relationship between career self-efficacy, level of engagement in the workforce, and quality of life for 67 persons with disabilities who were employed through SVRI-Services within the past five years.

This proposal specifically addresses the changing population demographics for the State of Wisconsin regarding the onset of disability after the age of 22, targeting to improve individuals with disabilities employment status and reducing their reliance upon public funding sources. This demonstration project has emerged from a body of research (Surdick, 2004) that found significant relationships exist between the constructs and measures of career self-efficacy and various measures of rehabilitation outcomes. Career self-efficacy measures the degree of belief an individual has about their ability to successfully complete specific tasks such as establishing goals, appraising capabilities, making future plans, gathering occupational information, and solving occupational challenges relating to the career development process (Bandura, 1986; Betz & Hackett, 1986; Lent, 1994; Lent, Hackett, & Brown, 1996). This demonstration project has been created in response to the research findings and explores the provision of techniques to increase an individual with a disabilities career self-efficacy as a means to improve their employment status and reduce their reliance upon public funding sources.

**Description:** This demonstration research project will implement an array of innovative approaches and techniques of delivering rehabilitation services to individuals with disabilities with the onset of a disability after the age of 22, improving their retention and advancement within the workplace. The population targeted in this demonstration project isn't currently being examined or funded by other grants, nor is it being addressed by current service providers, yet represents a large population of individuals that are essential in Wisconsin's workforce. The most prevalent service provider, the public Vocational Rehabilitation program, generally provides services to individuals who have significant disabilities which are severe enough to inhibit them from getting a job, then works to support the individuals as they attain education and employment, closing the case upon 90 days of employment.

This project will be carried out in three sites across the State of Wisconsin, one in a rural rehabilitation program, one in an urban rehabilitation program, and one in a program with a high percentage of services delivered to individuals of varying race, ethnic, and linguistic groups. The sample of community rehabilitation organizations (employment-based) from Wisconsin upon engaging in the demonstration program will attain the goals of (a) increasing the employment status of people with disabilities within their communities and (b) increasing the number of people who reduce their reliance upon public sources to be healthy, participatory, and gainfully active in their communities. This project will involve the implementation and demonstration of innovative empirical best practices that include (a) expansion of an individual's knowledge base regarding their disability, its characteristics, limitations, and accommodations; (b) application of strategic Benefits Counseling to expand employment options; (c) techniques and interventions that advance individuals from secondary to primary labor market segments; and (d) target support systems that promote greater economic standards of fulfillment minimizing reliance on benefit systems. Over a 1½ year period, SVRI will implement a concise demonstration model that incorporates rehabilitation best practices in the area of career self-efficacy to:

- Recruit and involve three sites (rural, urban, and underserved populations) to implement and/or document variations of practices that promise quality employment.
- Implement an experimental control-treatment design for evaluating the differential impacts of these community strategies.
- Implement a web-based system within which to document the immediate outcomes from such practices on consumer employment, earnings, satisfaction, goals, and reliance upon public sources.
- Develop a training curriculum that will be infused in rehabilitation services and utilized by 320 individuals with disabilities from three different community rehabilitation programs based upon the research findings in career self-efficacy, level of employment outcomes, and quality of life.
- Provide training to 100 practitioners, advocates, students, and consumers from community rehabilitation programs in Wisconsin using short-term training and distance learning capability on the training curricula.

- Initiate tracking of participating consumer changes in employment, benefits reliance, and economic participation.
- Provide additional training to advocates, practitioners, and funding agencies on qualities and benefits achieved through demonstrated programs.
- Estimate the aggregate economic changes in the status of employed individuals in comparison to their unemployed and unsuccessful counterparts.
- Prepare and disseminate an annual report and with a 1½ year follow-up that describes and provides policy recommendations of these effective practices and the conditions under which they are more or less likely to achieve an impact on service provision.

We anticipate that this project will help to increase the employment and economic prospects of at least 120 individuals who are employed, but face the challenges of dealing with a disability that threatens their ability to stay and advance in the workforce as they age. The evidence-based findings, cross-validated practices, and case studies this research produces will provide a strong community development model for providers and advocates to duplicate, expand, and modify to further the employment and economic status of people with disabilities in communities across the United States.

**Timetable:** SVRI will follow this time line in implementing the demonstration project from July 2005 through January 2007.

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| July 2005         | Start-up, solidify organization representatives, collectively concur on empirical best practices for the research model, and obtain approval from the Institution Review Board at the University of Wisconsin-Stout for the research project. |
| August-September  | Develop and refine the training curriculum and identify potential population sample of individuals who received rehabilitation services and are currently employed. Invite sample participants to engage in the piloted research.             |
| October-November  | Train 120 practitioners and advocates at selected sites on processes, interventions, and research tracking.   |
| November-December | Implement and begin to monitor practice implementation for 320 individuals with disabilities. Implement tracking of consumer’s employment, economic changes, and quality of life.   |
| January 2007      | Document and disseminate report on demonstration practices. Prepare recommendations to agencies based upon impacts among staff, advocates, and clients in demonstration practice.   |

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**Past Funding:** SVRI has been the recipient of federal grants that have supported the development of the concepts and research on their effectiveness on delivering rehabilitation services and measuring employment outcomes utilized in this demonstration project. The grants included the Research and Training Center (33 years) and Projects with Industry (19 years) from the U.S. Department of Education. This history of government funding has allowed SVRI to develop appropriate methods of accounting and reporting fund utilization and program outcomes.

**Costs: Total Costs for FY 2005-February 2007**

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| Personnel (Job Placement Staff, Benefit Counselors, Economist, Researcher, Graduate Students and Advocates) | \$188,130        |
| Fringe Benefits   | \$96,716         |
| Staff Travel  | \$8,520          |
| Participant Stipends (\$30.00 per individual)   | \$9,600          |
| Supplies and materials with Rehabilitation Services (assessments, reports, mailings)                        | \$8,720          |
| <b>Total Direct Costs</b>   | <b>\$305,086</b> |
| Indirect Costs @ 18%  | \$59,916         |
| <b>Total Project Costs</b>  | <b>\$371,602</b> |

**Significance:** The need for retaining and advancing individuals with disabilities with the onset of a disability include (a) shortages in replacements for the future workforce, (b) demographic changes in our society, (c) cost of healthcare, and (d) the challenges met by individuals who face emerging disabilities after the age of 22 and are employed in secondary sector positions.

Currently, the State of Wisconsin’s labor force rates (Census, 2000) indicate 2,522,025 individuals are employed, with 69% between the age of 21 and 64. Continual growth is noted by the Department of Administration (2004), which indicates the working population between the ages of 18 and 64 will peak in the year 2015, and then decline significantly by 2030. Retaining

our citizens in the workplace is essential as the Bureau of Labor Statistics (2002) states that the replacement rate for the workforce between 2000-2001 was identified at 15% of the total workforce and for the years 2002-2012, will sharply increase as 23.5% of our workforce will need to be replaced due to population changes.

A third mitigating macro factor is the increasing health care costs. The United States spends more per capita than any other nation on health care and rising health care costs has inhibited job growth. Ironically, this was a preponderant factor in the sharp productivity increases of 2003, as firms, confronted with rising health care costs, instead of hiring more labor, worked their existing supply more intensively (Reardon, 2004). Since persons with disabilities have higher health care costs and a greater probability of seeking medical treatment (depending of course on the nature and cause of disability), their likelihood of being hired and/or retained is reduced. Unless, of course, the individual can offset health care costs with greater productivity, which in turn requires additional investment in human capital (i.e., more training and education).

The fourth need represents the challenges reported by individuals who have a late onset of a disability (over the age of 22) and are currently employed in secondary positions, facing potential future limitations. In research completed by Surdick (2004), individuals with disabilities served by Projects with Industry indicated that 66% of the sample reported the onset of their disability after the age of 22. Out of the total 66 individuals interviewed, 45 different disabilities were reported such as: various back injuries, degenerative joint disease, fibromyalgia/arthritis, osteoporosis, diabetes, asthma, and paraplegia. According to the research reported by Surdick, 66% of the individuals supported by rehabilitation services at SVRI were continually engaged in the workforce (which is higher than national research), indicating that 49% of persons with disabilities are employed compared to 84% of the non-disabled population. Rehabilitation research also reports that the wages of individuals with disabilities are 10-25% less than wages of the non-disabled (Schur, 2002). Of the population studied in Wisconsin, the average age of those continuously employed was 41 years old, reported working 35 hours per week, and made an average of \$10.74 per hour (standard deviation indicated a significant range of hourly wages received). Sixteen percent of the individuals were unemployed and an average age of 42. From a career self-efficacy perspective, the average age of unemployed is unique, as the most crucial time frame for career transitioning is between one's education and first employment (Bandura, 1997). Those individuals with a late onset of a disability made that transition successfully and now, once facing a real disability, appear to struggle keeping their existing jobs yet stuck in secondary positions.

In research reported by Hagner (2000), the employment positions that persons with disabilities most frequently hold involve simple, labor-intensive or repetitive tasks such as clerks, janitors, cashiers, fast food workers, security guards, or nursing home aids. These types of jobs are classified as secondary sector positions and are often reported as being filled by individuals with disabilities as these jobs involve person-to-person tasks and are not being relocated overseas. While these positions are readily available, the wages are less, often provide no benefits such as health insurance, work hours vary, and have high turnover. The present challenge is how to support individuals who are in secondary sector positions advancing these individuals into primary positions such as management and leadership positions in education, engineering, hospitality and tourism, business, and manufacturing. The goal should be to foster the development of analytical jobs while implementing conditions necessary for everyone to have opportunities in the workplace (Reardon, 2004). Specifically, the focus is to channel people with disabilities into symbolic-analytical jobs. A growing percentage of jobs (approximately 30% according to the U.S. Department of Labor) are non-traditional, part-time work (most by choice), independent contractors and on-call workers, and fall across skill categories. Can such jobs be filled by individuals with disabilities?

The frequent onset of a disability after the age of 22 indicates the real need for periodic interventions that will increase the potential of individuals to retain and advance in the workplace and maintain their skill contributions while supporting the potential long-term limitations resulting from a disability. This project meets the needs for developing and demonstrating practices that can promote positive, proactive employment that will maximize the likelihood of achieving economic self-sufficiency for persons with disabilities. Wisconsin, with its established reputation as a leader in social-economic programs and research, is poised to substantially affect the economic self-sufficiency of persons with disabilities. We expect that at least 320 people with disabilities will be affected through this project over the 1½ years and the economic status of 120 people will be enhanced as a result. Furthermore, 23 communities across Wisconsin will have implemented the pilot program.

Disseminating the research findings nationally to 800 community rehabilitation programs and state Human Services programs will extend the viability of the practices. Instrumentation and tracking of these 320 clients will document related improvements in their psychosocial and health status as corollaries to expected gains in employment and economic status.

**Congress Contacts:** This updated proposal will be discussed with Congressmen Kind and Obey and Senator Kohl.