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ABSTRACT

Designed to estimate the number of vocationally handicapped persons in Israel; to identify their demographic, social, physical and vocational characteristics; to ascertain the amount and nature of services received; and to identify the potential clients for rehabilitation, the research report describes the study undertaken. In order to identify the handicapped, questions were added to the questionnaire of the regular labor force sample survey; social workers (specialists in vocational rehabilitation) interviewed those identified by the questionnaire; and two teams composed of a physician and a vocational rehabilitation expert assessed the vocational rehabilitation prospects of the interviewees. From the sample it was estimated that approximately 2.9% of the total population in Israel are vocationally handicapped and that roughly 39.1% of them have reasonable prospects for rehabilitation. A major portion of the document is devoted to the characteristics of the vocationally handicapped, covering demographic, physical, social, and vocational characteristics. Social and rehabilitation services available and prospects for the future are outlined. (CP)

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of

HANDICAPPED PERSONS
IN ISRAEL
IN NEED OF
VOCATIONAL REHABILITATION

Co-investigators :

ARYE NIZAN

HANNA AVIDOR

Project No. VRA-ISR-27-65, sponsored by the Social and Rehabilitation Service,
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P R E F A C E

The importance of vocational rehabilitation of handicapped persons has been widely recognized for a long time. Some have treated the matter as an aspect of manpower utilization pointing to the economic waste involved in excluding the handicapped from the labor market. Others have been concerned primarily with the psychological problems that are caused or aggravated by inadequate performance of the vocational function. Whatever the vantage point, however, it is clear that no general conclusions can be reached without some basic statistical data, a definition of the population and an assessment of needs.

The study presented here is the first in Israel providing some of the facts needed by those concerned with rehabilitation in this country. It is specifically oriented towards providing information needed by the Israel National Rehabilitation Council in its task of formulating program and policy recommendations to the Government of Israel. Sponsored by the Council, this research was carried out in cooperation with the Social and Rehabilitation Service (formerly known as the Vocational Rehabilitation Administration) of the United States Department of Health, Education and Welfare.

We gratefully acknowledge the guidance and encouragement we received from Dr. Giora Lotan, Chairman of the Israel National Rehabilitation Council and at the time of this study, Director of the National Insurance Institute in this country. Dr. Lotan, who actively supported our work, was always ready to advise and place at our disposal the fruits of his extensive experience in the field.

Thanks are also due the members of the staff of the Division of International Activities of the Social and Rehabilitation Service of the U. S. Department of Health, Education and Welfare, to our Advisory Committee and to the staff of the Israel Central Bureau of Statistics, who generously, beyond the call of duty, gave us their valuable time and expertise.

I. INTRODUCTION

Full integration in the labor force of a modern society requires a relatively high level of education and of technical skills. Furthermore, with labor conditions and requirements constantly changing, the ability to adjust to change has also become of crucial importance for occupational success.

Many people of advanced age, of limited education or traditional upbringing, have difficulties in meeting the new requirements of the labor market. They are therefore fully or partially expelled, or at most, doomed to occupy the lowest positions in the occupational ladder. They become marginal to the occupational as well as to the economic and social fabric of the country.

The combination of even relatively slight health impairment with limiting social factors will in many instances result in a vocational handicap. Moreover, the vocationally handicapped who are members of the socially disadvantaged groups, present a special problem for vocational rehabilitation programs for treatment must be focussed on the social as well as on the physical aspects of the problem.

Young persons present an additional problem. As the entry into the labor market of young persons is, to a large extent, determined by their educational background, every disturbance in regular school attendance limits the possibilities in occupational choice. Therefore, young people aged 14-17 who either do not study at all or study in special educational frameworks for the handicapped, are liable to become the socially problematic people of tomorrow.

AIMS OF THE STUDY

This research was undertaken in order to clarify the needs for vocational rehabilitation in Israel. Its specific objectives were:

- a. to estimate the number of vocationally handicapped persons in Israel: i.e., persons actually not performing in full the principal activity expected for their age, sex and marital status;
- b. to identify their demographic, social, physical and vocational characteristics;
- c. to ascertain the amount and nature of the social, economic and medical services received by the vocationally handicapped and their families;
- d. to identify among the vocationally handicapped those who could be regarded as potential clients for vocational rehabilitation.

CRITERIA FOR INCLUSION IN THE STUDY

The study was specifically oriented to (1) men aged 14-64 and women 14-59 who (2) did not perform or performed only partially the principal activity expected of their age-sex-marital group, and who (3) claimed that they have had a chronic handicap which lasted for a period of at least 26 weeks, which prevents them from doing so. The lower age limit was set at 14 because up to this age education is compulsory, and the upper limits were set at 59 for women and 64 for men because the accepted retirement ages in Israel are 60 and 65, respectively.

The principal activity expected for men aged 18-64 is full-time gainful work or military service. For women aged 18-59 it is either gainful work, military service or housework. For 14-17 year olds, it is either full-time attendance at a general or vocational secondary school or gainful employment.

"Partial" performance with regard to work means less than 35 hours per week or full-time weeks for less than 26 weeks in the year.

In contrast to most studies which have been made of the handicapped, which have sought to determine the total measure of disability in the community, this study is concerned only with those persons who are in fact not functioning vocationally as expected of persons in their age, sex and marital groups and who attribute their impaired functioning to physical or mental handicaps. Persons with physical disabilities who are performing the principal activity expected of them were thus excluded.

II. BRIEF REVIEW OF THE METHCDOLOGY

In order to identify the handicapped in need of vocational rehabilitation and to obtain the information specified in the aims of the study, three phases were designed:

Phase 1: The aims of this phase were:

- a) to estimate the number of vocationally handicapped persons in Israel, as defined in this study;
- b) to compare characteristics of the vocationally handicapped with the general comparable population;
- c) to locate a representative sample of the vocationally handicapped for detailed investigation.

To accomplish these aims, a group of questions were added to the questionnaire of the regular labor force sample survey, throughout the year of 1966.* All families included in the labor force sample were interviewed in their homes. Those who in the 12 months preceding the survey had not worked at all or worked partially only, were asked whether they had a disability which prevented them from doing so.

Young handicapped persons studying in other than a regular educational framework could not (for methodological reasons) be identified through the labor force sample survey and therefore a special additional study was undertaken to locate them.

Phase 2: The aims of this phase were:

- a) to obtain information on the demographic, social, physical and occupational characteristics of the vocationally handicapped;
- b) to obtain information on the vocational rehabilitation and social services rendered to the vocationally handicapped.

* See pp. 135-136 for text of labor force questionnaire with additional questions.

Social workers who are specialists in vocational rehabilitation, interviewed the vocationally handicapped identified in Phase 1 in their homes with a detailed questionnaire.*

The social and medical agencies mentioned by the respondents were subsequently visited by the interviewers. A complete report regarding the assistance extended to the persons in question was obtained from the agencies. Agencies were also contacted with regard to persons who did not mention that they received help, in order to determine whether these persons were known to them and whether they received any services in the past.

Phase 3:

The aim of this phase was to identify among the vocationally handicapped population those who could be regarded as potential vocational rehabilitation clients.

Two separate teams, each of them composed of a physician and a vocational rehabilitation expert, assessed the vocational rehabilitation prospects of the interviewees on the basis of the information included in the questionnaire and the reports from the agencies. Each team discussed the same cases independently of the other and classified each case according to the prognosis for occupational rehabilitation.

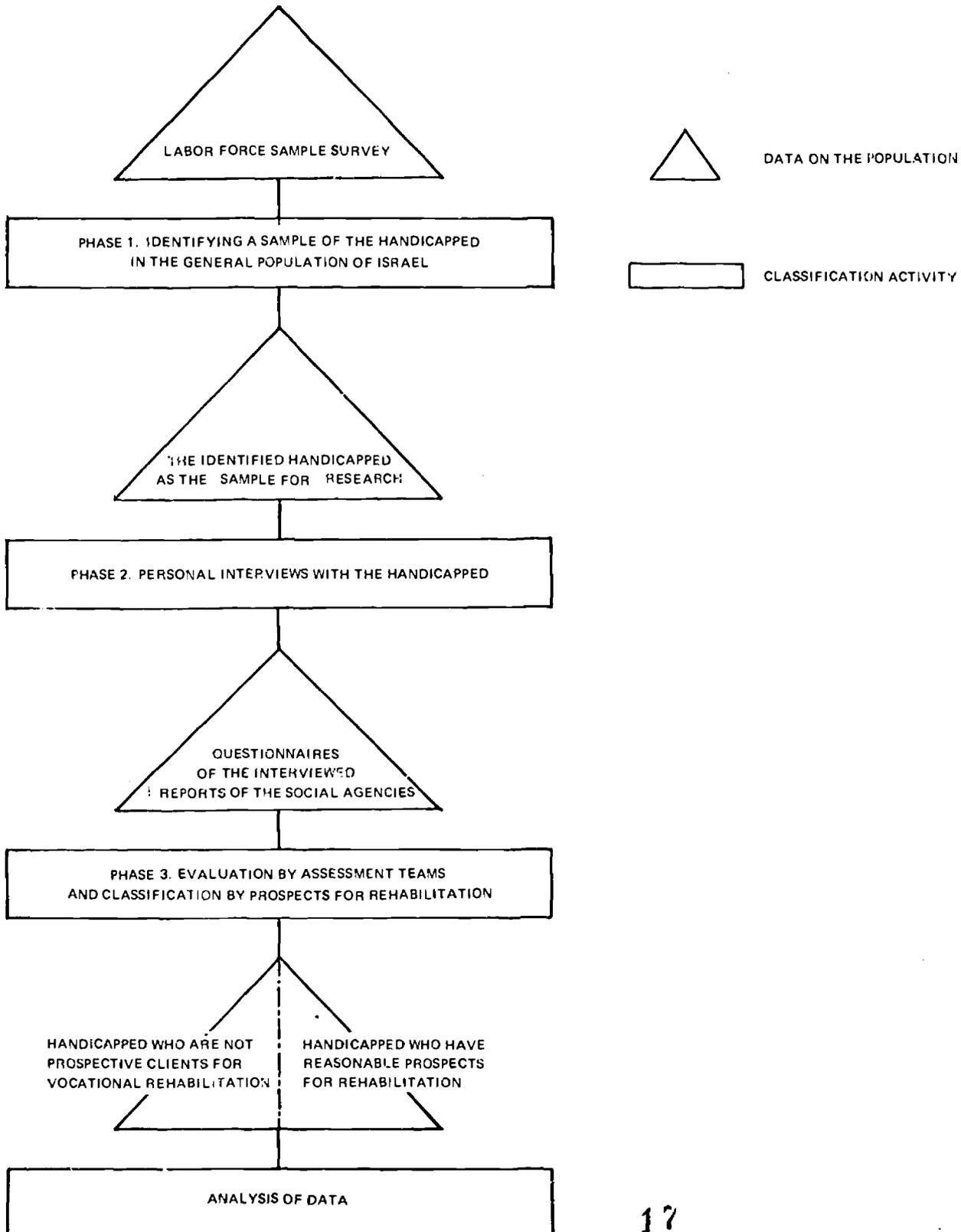
The interviewees were classified into four categories:

1. those having reasonable prospects for vocational rehabilitation under regular working conditions (Vocational Rehabilitation Category 1);
2. those having reasonable prospects under special or protected working conditions (Vocational Rehabilitation Category 2);
3. those having poor prospects for vocational rehabilitation, because their physical and/or mental condition makes vocational rehabilitation unfeasible (Vocational Rehabilitation Category 3);
4. those whose present activity appears the most that could be expected within the limits of their capacities (Vocational Rehabilitation Category 4).

* See pp. 138-145 for text of questionnaire.

FIGURE 1

PROCEDURE FOR CLASSIFICATION OF THE HANDICAPPED POPULATION
IN THE VARIOUS PHASES OF THE STUDY



III. SUMMARY OF THE FINDINGS

A. CHARACTERISTICS OF THE VOCATIONALLY HANDICAPPED

1. Demographic characteristics

Scope

The vocationally handicapped comprise 45,000 persons who constitute 2.9% of the total population in Israel in the respective age and sex groups (men aged 14-64 and women 14-59). This estimate is probably somewhat low because vocationally handicapped women are under-represented in this sample and persons in hospitals and resident institutions for one year or more were excluded altogether.

It was also evident from the findings that the scope of the youth population who are not performing their principal activity, namely, studying or working, is far wider than the number mentioned. However, because they did not claim they had a handicap, they were excluded by definition from the study population. Some facts on the composition of this group are presented in greater detail below.

Age

Contrary to the public image of the vocationally handicapped as a predominantly old population, it was found that 55% of the vocationally handicapped are of the central working age of 18-54 years, and only 29% of the vocationally handicapped are 55 years or older. However, in the general population the 55 and older group constitute only 10% of the total. Sixteen percent, or 7,200 of the vocationally handicapped are young people aged 14-17 of whom 2,700 claim that due to a handicap they neither study nor work. The remaining 4,500 study in special educational frameworks for the handicapped, most of which are on an elementary school level, in the framework of the Compulsory Education Law. Studies are oriented towards general basic and not vocational education.

Sex and marital status

The majority of the vocationally handicapped (72%) are men - most of them married. The majority of the vocationally handicapped women are unmarried (64%). The women in the sample are considerably more handicapped than the men.

Level of education

The level of education of the vocationally handicapped is extremely low: 57% had no education at all or had completed less than the third grade; only 10% had achieved any level beyond the eighth grade. In terms of the number of years of schooling, we found that about a third of the vocationally handicapped compared to 11% of the general comparable population, had no formal education whatsoever and only 16% of the vocationally handicapped compared to 46% of the general comparable population had attended school for nine years or more. No significant difference was found between the level of education of men and women.

Year of immigration and continent of origin

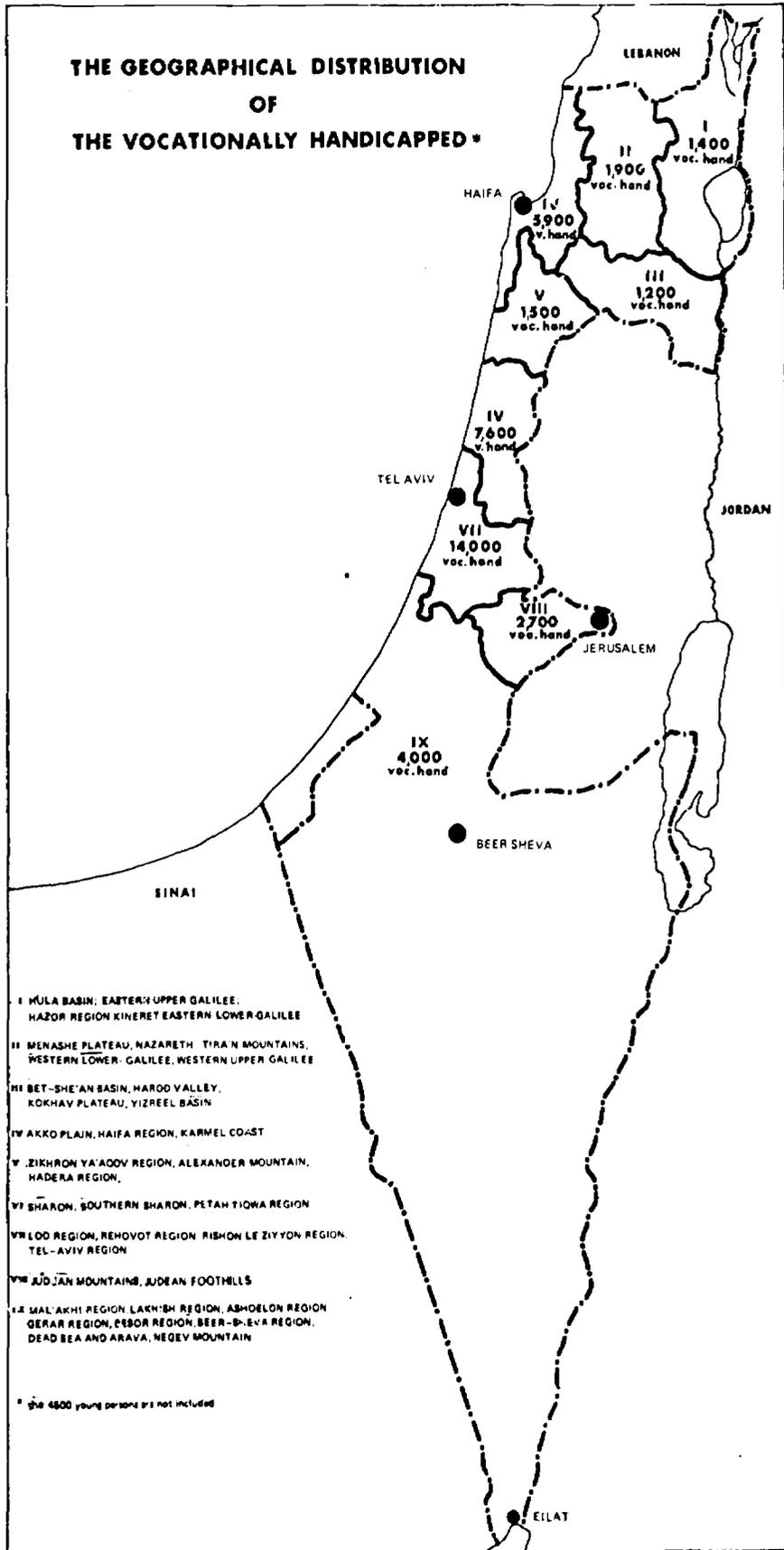
The majority of the vocationally handicapped are not new immigrants: 70% of them have resided in Israel for 13 years and more and only 8% of them have resided in Israel less than three years. Nevertheless, it is significant that the majority of the vocationally handicapped (70%) immigrated to Israel after the founding of the State in 1948.

Fifty-five percent of the vocationally handicapped originate from Asia-Africa as against 35% of the general comparable population. Ten percent of the vocationally handicapped are non-Jews, mainly Arabs, born in Israel, generally living in traditional rural communities.

Geographic area and type of settlement

The vocationally handicapped are not concentrated disproportionately in any particular geographic area or particular type of settlement (See Figure 2). Like the general population of Israel, 87% of the vocationally handicapped live in cities and urban areas.

FIGURE 2



2. Physical characteristics:

Diseases and functional limitations

Most of the vocationally handicapped suffer from more than one disease. Disturbances in the motor system and the circulatory system are the most frequent ailments. Internal, digestive and respiratory diseases predominate among people over 35 years of age, while emotional disturbances are more prevalent among those under 35.

Seven percent of the vocationally handicapped persons were disabled from birth or in early childhood, and the remainder as a result of illness and accidents.

The major functional limitation, one which is mentioned by 85% of the handicapped is in their capacity to lift and carry loads. Limitation in ability to bend, to sit or stand for prolonged periods, grouped here under gross movement, was mentioned by 70%. Limitation in the capacity for quick movements is mentioned by 59%; 23% are limited in mobility outside the home and 27% in concentration and memory. Other limitations are: holding with palm and fingers - 18%; reading - 11%; self-service - 9%.

3. Social characteristics

Family composition and economic status

One fourth of the vocationally handicapped live in large families of seven or more persons, whereas only 12% of families are of this size in the general comparable population.

The immediate family members of the vocationally handicapped comprise 200,000 persons (including the handicapped), or 7.7% of the total population of Israel. Many of these people are undoubtedly affected in one way or another, by the inadequate role performance of the vocationally handicapped member of the family. About a third of the family members (73,000 persons) are under 17 years of age.

Half of the vocationally handicapped, 62% of the men and 18% of the women, are the head of the household; they have a total of 72,000 persons dependent on them. About half of the vocationally handicapped heads of households had four or more persons to support; 43% of the vocationally handicapped household heads were not working at all at the time of the survey.

Family members contribute rather little to the income of these families. Among the 72,000 persons dependent on vocationally handicapped household heads, only 10,000 are working.

Among the 82,000 persons who are related to the vocationally handicapped who were not household heads, 22,000 persons or an average of 1.1 family members were working. In only a few of these families was the handicapped person working partially; he was generally not working at all.

Housing conditions, facilities and equipment

The average dwelling density in households of the vocationally handicapped is very high. In 10% of the families with six or more persons the whole family lives together in one room. About a quarter of all the vocationally handicapped live in crowded housing conditions with three or more persons per room.

Although so many of the vocationally handicapped live in crowded conditions, as a result of the fact that they generally live in centrally planned housing projects, their flats are equipped with running water, electricity and elementary conveniences.

The lowest housing standard is found among the vocationally handicapped who live alone without any relatives and among those who live in large families of six or more members.

4. Work history and vocational characteristics

The vocational crisis

It is generally assumed that the vocational crisis, which has been defined as the cessation or limitation of a person's principal activity from full to part-time,

is directly related to deterioration in health. It was found, however, that in many cases, persons were able to continue to perform adequately a full-time principal activity despite health impairment. When asked the reason for their eventual cessation or limitation of work, these persons mentioned factors other than health, such as immigration, dismissal from work, etc.

Among the vocationally handicapped who had immigrated to Israel, the vocational crisis did not occur in the year of immigration itself, but three or more years afterwards. The full impact of immigration on the person with impaired health may have been held off temporarily by the special employment opportunities available only to new arrivals in Israel to ease the period of their adjustment.

An immediate effect of immigration on the vocationally handicapped person appears in a lowering of the level of occupation prior to the onset of the vocational crisis. About one-third of those who had been engaged abroad in skilled, trade or clerical occupations, changed to unskilled work after their immigration prior to the vocational crisis.

For 80% of the vocationally handicapped, the vocational crisis meant cessation or limitation in gainful employment or housework, for 10% it meant cessation or limitation in study or transfer from regular educational framework to a special one for the handicapped. The 10% of the vocationally handicapped who became handicapped as children under six had, of course, no vocational crisis.

Contrary to what was expected, the majority of the vocationally handicapped do not belong to those groups who are neither accustomed to, nor interested in regular work regardless of their health condition. In fact, the data show that most of the vocationally handicapped had a fairly continuous working experience before their vocational crisis and make efforts to increase their activities. Only 20% (about 8,000 persons) - mainly those handicapped from birth or early childhood - never worked at all.

Among persons whose vocational crisis occurred before the age of 18, 80% were not working at the time of the survey. It is possible that persons handicapped from birth or childhood are not trained to even begin to work.

Current activity

Sixty-five percent of the vocationally handicapped were not working at all during the period covered by the survey. About one-quarter of this non-working group had ceased to work 1-2 years before that time; about a third had ceased to work 3-7 years before the survey; 15% had ceased to work 8-21 years before that time, and the remaining 30% - mainly children - had never worked in their lives. Over one-third of this population stated that they were, however, looking for work. As to the reasons given for not working, about half specified reasons other than health.

The remaining 35% of the vocationally handicapped were working partially, generally at unskilled occupations. They were on the whole older than the non-working group and, though usually married, were living only with a spouse; over a quarter of them were seeking additional work.

The age and work experience of the person prior to his vocational crisis appear to influence the likelihood of his being employed partially. The older a person at the time of the crisis, the more likely he was to be working partially at the time of the survey. Persons who had worked before the crisis were more likely to be working partially than those who had not.

Occupational level and aspirations

The occupational level of the vocationally handicapped is rather low. Unskilled work was the highest occupational status ever achieved by 44% of the vocationally handicapped in the course of their work history, 32% worked in skilled or clerical occupations at some time and only 1.4% ever worked in professional or managerial occupations. The remainder never worked at all.

Contrary to the image of the vocationally handicapped person as someone with far-fetched and unattainable occupational aspirations, it was found that the vocational aspirations of these persons are in most cases realistic and in accordance with their present abilities.

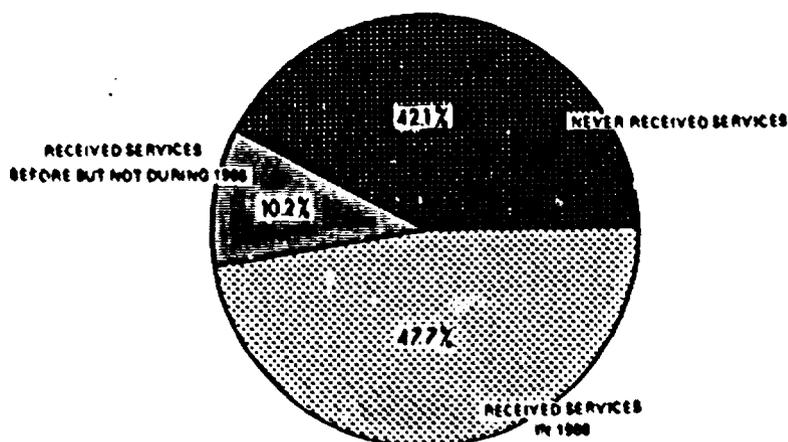
Professional and managerial jobs are aspired to only by those few with secondary or higher education. Vocationally handicapped with a low level of education almost always mentioned unskilled work as the only suitable employment; and many of those who never worked at all cannot specify any work suitable for themselves. A relatively high percentage of the handicapped limited in their mobility outside the home also cannot specify any suitable work for themselves.

B. SOCIAL AND REHABILITATION SERVICES

Although it is obvious that the vocationally handicapped are burdened with considerable social and economic problems, only 58% of them have ever received any social services. The remaining 42% never applied, are not known to, and have never received help from public agencies (See Figure 3). These figures are particularly striking in view of the fact that two-thirds of the persons in this study were unemployed during at least 12 months preceding the survey.

FIGURE 3

VOCATIONALLY HANDICAPPED BY SERVICES RECEIVED



Comparison of the vocationally handicapped receiving social services with those who did not receive services showed no significant differences in socio-economic level or in physical condition between the two groups. However, among the vocationally handicapped population which did not receive social assistance, we found relatively more persons living alone. Also characteristic of the group which never applied for social assistance was a relatively higher level of education and vocational skill and a longer period of residence in the country.

Only 15% of the vocationally handicapped applied for aid to social agencies before their vocational crisis, 11% applied in the year of the vocational crisis, 4% applied one year after the crisis and 28% applied two or more years after the crisis. The rest did not apply at all.

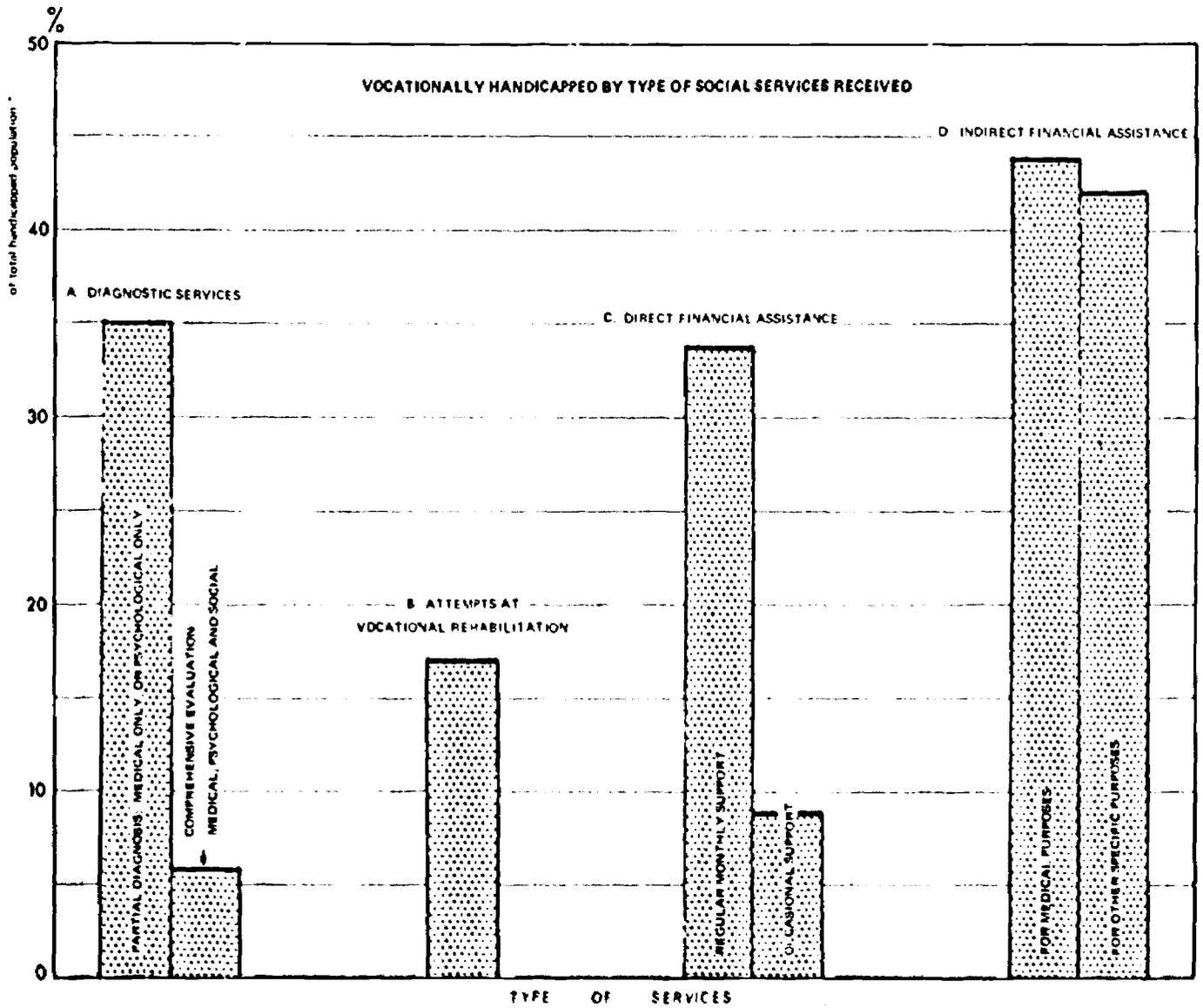
Of the vocationally handicapped who immigrated to Israel from abroad and applied to public agencies, 54% applied three or more years after their immigration, presumably at the point when they were no longer eligible for special aid made available to new immigrants.

The main source of services was the local welfare agencies. About half of those who received services from local welfare agencies received services from other public agencies as well - the welfare agency being the main liaison between the vocationally handicapped and the other agencies. Only 7% of the handicapped received services from other agencies without being known to the local welfare agencies.

Of the vocationally handicapped who received assistance, many received more than one type of assistance. The main form of aid was financial. Regular monthly allotments were received by 34% of the handicapped; other direct payments in the form of one-time grants or loans were received by 29%. Indirect financial aid, such as payments for medical purposes or for care of children, household help, rent, etc. were received by about 54% of the cases.

It was found that the majority of the vocationally handicapped do not conceal the fact of their application for help to public agencies. Their reports regarding

FIGURE 4



* percentages do not add up to 100 as each person may have received more than one type of service

contact with agencies and regarding the disease they were suffering from, were, to a large extent, consistent with the written documentation found in the agencies.

Services geared towards vocational rehabilitation constituted only a marginal item among the services rendered by the public agencies to the vocationally handicapped. Only 6% of the vocationally handicapped went through a process of comprehensive medical, psychological and social diagnosis for vocational rehabilitation (See Figure 4 on page 16).

Medical aid

The importance of medical insurance for this group of people is very clear. Although most of the vocationally handicapped have some provision for medical care, only 53% are fully insured (usually through the Sick Fund of the Labor Federation of Israel). Thirty-two percent, mainly people living alone or living in large families which immigrated from Asia and Africa receive limited medical services arranged by the local welfare office. These are generally limited to ambulatory services and do not include hospitalization, tests or appliances. Fifteen percent of the vocationally handicapped - about 6,000 persons - have no medical insurance whatsoever. Unexpectedly, a relatively high percentage of the non-insured are Israel-born or were living in Israel before 1948.

C. VOCATIONAL REHABILITATION PROSPECTS

The assessment team assessed the prospects for rehabilitation for 421 of the 501 persons interviewed in the sample. The conclusions of the team lead us to estimate that -

39.1% of the vocationally handicapped, i.e. about 15,700 persons have reasonable prospects for rehabilitation. This consists of:

- a) 26.3% of all the vocationally handicapped, i.e. about 10,600 persons who have reasonable prospects under ordinary working conditions, and
- b) 12.8% or about 5,100 persons who have reasonable prospects under special or protected conditions.

51.5% of the group have poor prospects for vocational rehabilitation. This is composed of:

- a) 22.6% of the total or about 9,100 persons whose physical and/or mental condition makes vocational rehabilitation unfeasible, and
- b) 28.9%, i. e. about 11,600 persons whose present activity seems the most suitable within the limits of their capacities.

The vocational rehabilitation prospects of 9.4% of the vocationally handicapped, i. e. about 3,800 persons, most of whom were mentally ill, were not assessed.

The vocationally handicapped considered to have reasonable prospects of rehabilitation under regular working conditions are relatively young, have a relatively high level of education, and a relatively low degree of functional limitation compared to the others in this population.

Those considered to have reasonable prospects of vocational rehabilitation under special working conditions are older, have more severe functional limitations and a much lower level of education than the persons in the first category.

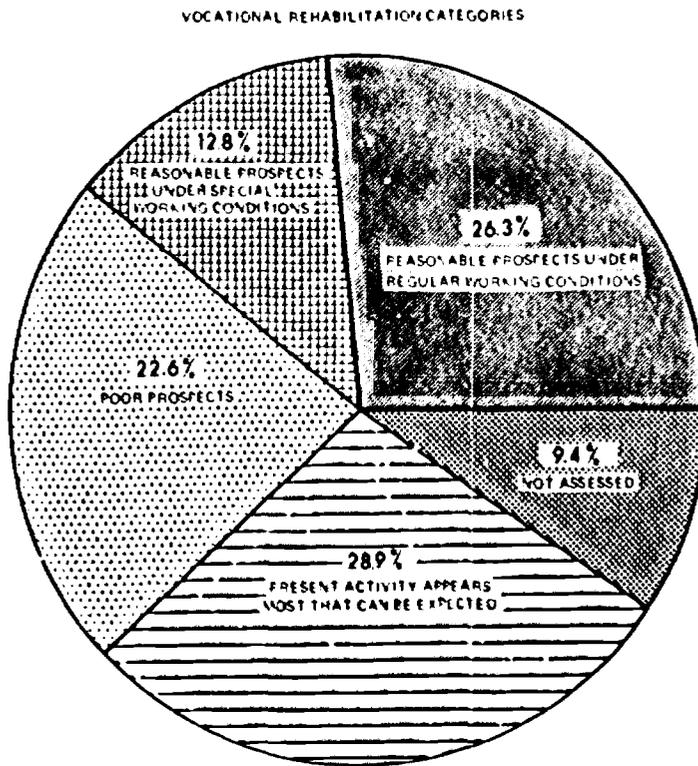
Thus, functional limitations, age and level of education seem to be the three main differentiating factors between those vocationally handicapped who may be able to work under regular working conditions and those who may need special conditions for their vocational rehabilitation.

Vocationally handicapped persons considered to have only slight prospects of vocational rehabilitation due to poor health, are impeded primarily by the severity of their functional limitation. They generally could not suggest any suitable work for themselves. Persons in this category have the lowest level of education, and almost half of them are elderly people of 55 or more.

The vocationally handicapped who were already engaged in an activity which was considered the most suitable for them within the limits of their mental and physical capacity, were generally older and a higher percentage of them were married. Regarding level of education and functional limitation they were in an intermediate position between those in the first group and those in the third.

FIGURE 5

VOCATIONALLY HANDICAPPED BY THEIR VOCATIONAL REHABILITATION PROSPECTS



IV CHARACTERISTICS OF THE VOCATIONALLY HANDICAPPED

A. DEMOGRAPHIC CHARACTERISTICS

1. Scope

On the basis of the sample of 535 cases which were drawn in this study, the number of vocationally handicapped is estimated to amount to 40,200 persons in the total population of men aged 14-64 and women aged 14-59. To this estimate 4,500 persons aged 14-17 studying in special educational frameworks for handicapped children have been added. Thus the total of vocationally handicapped amounts to approximately 45,000* constituting 2.9% of the whole population of Israel in the age groups covered by this study.

This figure must be regarded as a low estimate, because, for methodological reasons, the number of vocationally handicapped women in particular is understated.** Adults in resident institutions were excluded altogether.

Moreover, we are aware of the fact that the problem of need for vocational rehabilitation services is larger than that indicated by the scope of the vocationally handicapped population as defined in this study.

There is a large group of young persons who neither work nor study and yet do not claim that they have a handicap which prevents them from doing so. The extent of this group was first revealed in the figures obtained in our 1966 study and was subsequently investigated at our request in greater detail by the Israel Central Bureau of Statistics in 1967.

* One relative standard error = 7.3

** For details see pp. 113-120

It was found that of a total of 233,000 persons aged 14-17, 41,000 neither studied in regular schools nor worked. Of these:

20,000 were unemployed: i.e., they were seeking work but were not working at the time of the survey;

29,000 were neither studying nor working nor looking for work. Of these, 11,000 were boys and

18,000 were girls. Among the girls,

15,000 were engaged in housework.

Despite the fact that they do not belong to the vocationally handicapped as defined in this study, young persons who neither work nor study may be regarded as potential clients for vocational rehabilitation programs because they do not perform the principal activity expected of their age.

2. Age

The vocationally handicapped are generally assumed to be relatively old. As is shown in Table 1a, the majority of them - 55% - are in the main working ages of 18 to 54. In comparison to the rest of the population, they are however a generally older group. Although the vocationally handicapped of 55 years and over constitute only 29% of the vocationally handicapped, this age group accounts for only 10% of the general comparable population (See Figure 6).

The proportion of youth (14-17 year olds) among the vocationally handicapped is relatively high: they constitute 16% of the vocationally handicapped population as against 14% of the general comparable population, i.e. the total minus the handicapped population. This means that about 7,200 handicapped young people neither work nor study at all, or study in special educational frameworks for the handicapped, which provide them at the most with a basic elementary education.

Table 1a

Vocationally handicapped and general comparable population by age

Age	Vocationally handicapped		General comparable population	Proportion of the voc. handicapped in each age group of the general comparable population
Total	n 44,700	% 100.0	1,474,600 100.0	- 2.9
From 14 - 17	7,200	16.2	13.8	3.4
" 18 - 34	10,100	22.4	39.6	1.7
" 35 - 44	6,700	14.9	19.5	2.3
" 45 - 54	7,700	17.3	17.2	3.0
" 55 - 64 (men)	13,000	29.2	9.9	8.2
" 55 - 59 (women)				

FIGURE 6

AGE COMPOSITION: THE VOCATIONALLY HANDICAPPED AND THE GENERAL COMPARABLE POPULATION

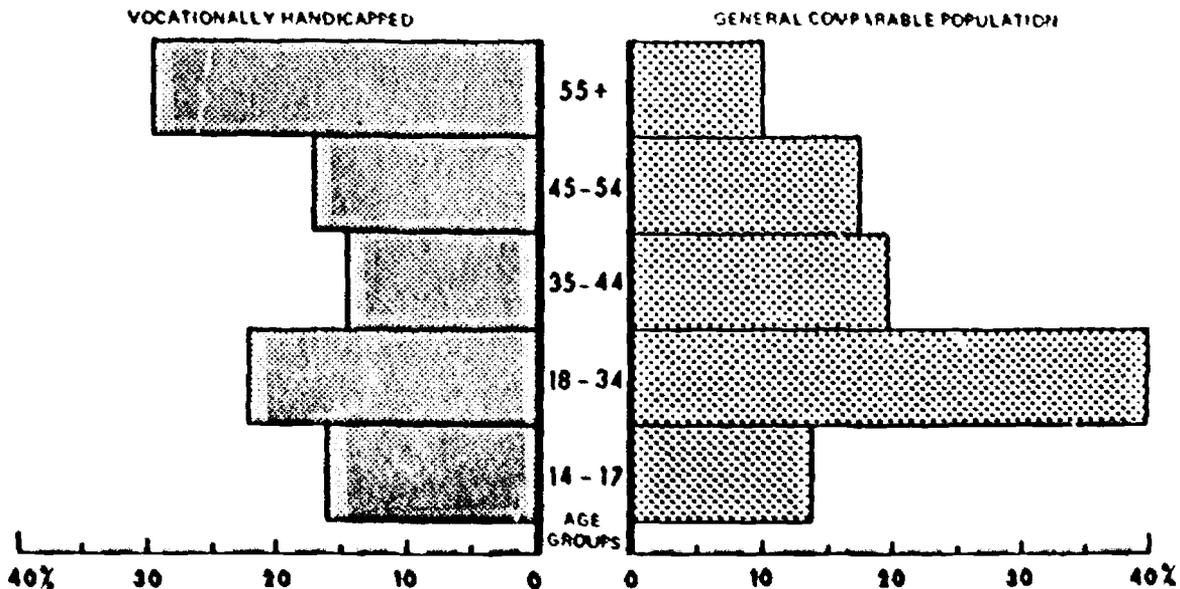


Table 1b
Special Educational Frameworks for Handicapped Youth

Educational framework	Criteria for acceptance	Study content	Number of youth 14 - 17
Special day schools for physically handicapped (mainly deaf mutes)	a) IQ normal b) Handicap which impedes ability to participate in regular framework for various reasons	General elementary studies: Pre-vocational training	170
Boarding schools for physically handicapped (mainly for paralytic and for blind)	IQ normal	As above	93
Special classes in regular elementary schools	IQ 63-85 and/or handicap in emotional or learning development	General elementary studies	721
Day schools for special education	a) Retarded children or children both retarded and disturbed who dropped out of regular schools; have some prior elementary education b) IQ 80 and over	General elementary studies; pre-vocational training; apprenticeship (in a few cases only)	619
Day schools for disturbed children	a) IQ 80 and over b) Emotionally disturbed	General elementary and pre-vocational for ----- Only general elementary for -----	----- 174 ----- 196

continued on next page

Table 1b - continued from previous page

Educational framework	Criteria for acceptance	Study content	Number of youth 14 - 17
Workshops for youth	a) IQ 60 and over b) Juvenile delinquents on parole or c) Children in danger of undesired development	Vocational training; general elementary education	442
Day schools for retarded children	a) IQ 50 - 80 and/or b) Learning and socialization difficulties	General elementary studies	1,258
Boarding institutions for the retarded	IQ 30 - 65	Training for everyday living and work habits	(aged 14-17) 767 (May remain indefinitely in this institution; no age limit)

In order to estimate the extent and the character of the handicapped among youth aged 14-17, a supplementary survey was undertaken among institutions and schools with special educational frameworks for the handicapped. A total of 4,540 young persons were found to be studying in these special frameworks, as described in Table 1b. With the exception of the last group in Table 1b, all of these frameworks are restricted to children up to 18.

3. Sex and marital status

The majority of the vocationally handicapped - 72%, or 32,000 persons - are men. Three-fourths of the vocationally handicapped men are married as compared to only 62% married men in the general comparable population.*

Women constitute only 28% of the vocationally handicapped - 13,000 persons - as against 49% of the general comparable population. Only 36% of the vocationally handicapped women are married as against 67% in the general comparable population.

Table 2a
Vocationally handicapped and the general comparable population by sex and marital status

Marital status	T o t a l		M e n		W o m e n	
	Voca- tionally handi- capped	General compa- rable popula- tion	Voca- tionally handi- capped	General compa- rable popula- tion	Voca- tionally handi- capped	General compa- rable popula- tion
Total	n 40,200 % 100.0	1,479,119 100.0	29,982 100.0	748,273 100.0	10,218 100.0	730,846 100.0
Married	64.5	64.5	75.6	62.0	36.2	67.0
Single	25.5	32.5	22.2	37.0	34.0	27.9
Widowed	7.0	2.1	1.1	0.5	22.0	3.8
Divorced	3.0	0.9	1.1	0.5	7.8	1.3

* The general comparable population which is used as our yardstick for comparison throughout this analysis is the total population minus the handicapped. However, the 4,500 young persons added to the population derived from the sample, are, for technical reasons, included in our tables (except for Table 1a), among the general comparable population rather than among the handicapped.

Table 2b
 Vocationally handicapped by sex and functional limitations,
 level of education and level of occupation

Various characteristics	Total	n. %	Men	Women
			360 100.0	141 100.0
<u>Functional limitations</u>			*	*
Mobility outside the home			19.7	29.8
Holding with the palm and fingers			17.5	18.4
Gross movements			68.3	74.5
Self-service			8.6	9.2
Carrying heavy objects			85.8	83.7
Quick movements			60.3	56.7
Reading			11.7	9.9
Concentration and memory			25.0	31.9
<u>Level of Education</u>			100.0	100.0
None			30.3	45.4
Low elementary			25.0	14.2
Partial elementary			17.8	11.3
Full elementary or vocational			17.2	19.2
Secondary or above			9.7	9.9
<u>Level of occupation</u>			100.0	100.0
Professional			1.4	1.4
Sales and clerical			13.3	6.4
Skilled			25.3	9.9
Unskilled			49.2	32.6
Never worked, housewives and unknown			10.8	49.7

* Percentages do not total up to 100 as one person may be included in more than one category.

The low percentage of women in general and married women in particular as shown in Table 2a is presumably not only a result of the methodological bias mentioned above, but may also be due to the fact that women are usually less exposed than men to the main sources of physical injuries, namely, war, work and traffic.

The fact that the women in the sample are considerably more handicapped than the men is borne out by Table 2b. The women have a generally higher incidence of functional limitations and a much larger proportion with no education and with no work experience. At the highest levels of education, women are represented in about the same proportion as men, but occupationally they do not achieve comparable levels at all. This fact of course reflects social as well as physical factors.

4. Level of education

In order to provide a meaningful measure of level of education the data were analyzed in terms of the following special groupings:

No education - studied two years or less. (Experienced observers have maintained that persons with two years or less of schooling retain virtually nothing of what they learned).

Low education- equivalent to completion of 3-5 school years.

Partial elementary education - equivalent to completion of six or seven school years.

Full elementary or vocational elementary education - completed eight years of elementary school or vocational education at an elementary level.

Partial secondary education - equivalent to completion of eight elementary grades and 2-3 years in secondary school.

Full secondary or vocational secondary education or more; completion of high school or equivalent vocational school; university or other higher education.

Table 3
 Vocationally handicapped by level of education,
 sex and continent of origin

Sex and continent of origin	Total		No & low elementary	Partial elementary	Full & vocat. elementary	Secondary and higher education
	n	%				
T o t a l	501	100.0	56.4	16.0	17.8	9.8
Men - Total	360	100.0	55.3	17.8	17.2	9.7
Israel	69	100.0	60.9	17.4	15.9	5.8
Asia-Africa	196	100.0	61.8	20.9	12.2	5.1
Europe-America	95	100.0	37.9	11.6	28.4	22.1
Women - Total	141	100.0	59.6	11.3	19.2	9.9
Israel	19	100.0	68.4	-	26.3	5.3
Asia-Africa	83	100.0	77.1	7.2	13.3	2.4
Europe-America	39	100.0	18.0	25.6	28.2	28.2

Table 3 reveals that over 56% of the vocationally handicapped have no or low elementary education; 16% a partial elementary education, 18% full elementary or vocational elementary education, and only 10% some secondary and higher education. No significant difference was found between the level of education of men and women.

Among the vocationally handicapped, as among the general comparable population, the average level of education of persons born in Asia-Africa is lower than that of those born in Europe-America.

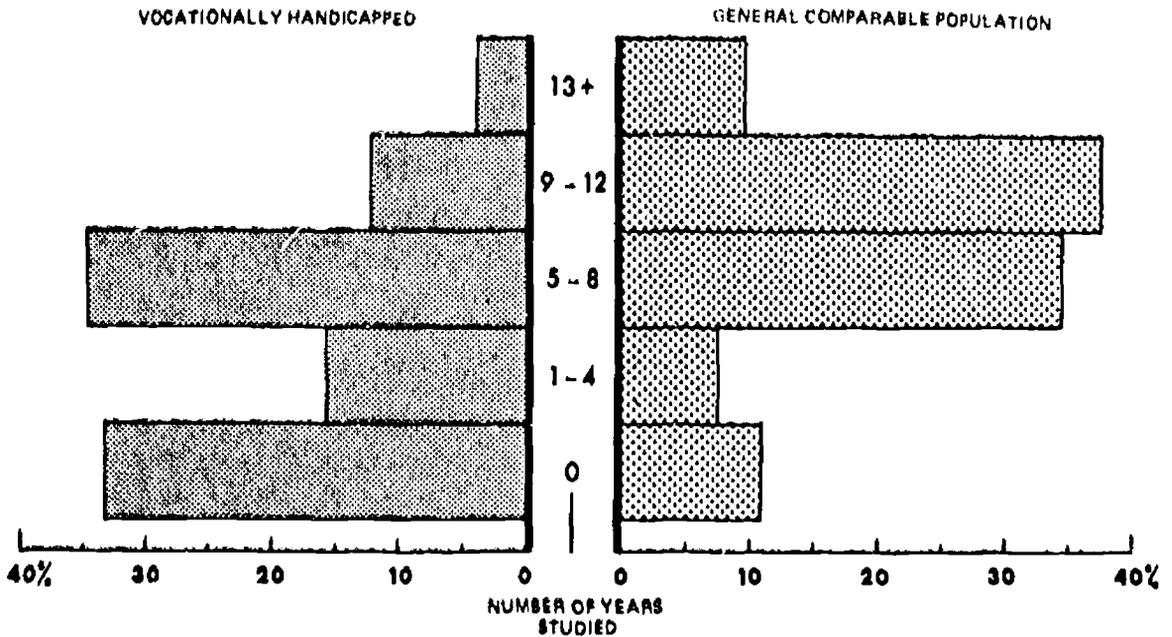
The level of education of the vocationally handicapped as compared to the rest of the population is low.* About a third had no formal education whatsoever,

* For purpose of this comparison it is necessary to use another measure of education, viz., the number of years of schooling.

as compared with 11% of the general comparable population. Whereas 47% of the general comparable population have attended school for nine years or more, only 16% of the vocationally handicapped have done so (See Table 4).

FIGURE 7

YEARS OF SCHOOLING: THE VOCATIONALLY HANDICAPPED
AND THE GENERAL COMPARABLE POPULATION



5. Year of immigration and continent of origin

The great majority of the vocationally handicapped cannot be considered new immigrants from the point of view of the number of years of residence in the country. The majority of them have been living in Israel for 13 years or more: 30% were born or living in Israel before 1948 and about 40% immigrated between 1948 and 1954. Only 8% arrived in or after 1963 (See Table 5).

Table 4
Years of schooling of the vocationally handicapped and
the general comparable population

Number of years in school		Handicapped	General comparable population
Total	n	40,200	1,479,119
	%	100.0	100.0
0 years		32.5	10.9
1 - 4 years		15.7	7.5
5 - 8 years		33.9	34.0
9 - 12 years		12.2	37.0
13 - and over		4.0	9.5
Unknown		1.7	1.1

Table 5
Year of immigration of the vocationally handicapped
and the general comparable population

Year of immigration		Handicapped	General comparable population
Total	n	40,200	1,479,119
	%	100.0	100.0
Born in Israel		17.6	30.7
Immigrated up to 1947		13.6	49.8
Immigrated 1948 - 1954		38.7	
Immigrated 1955 - 1962		21.7	19.5
Immigrated 1963 onwards		8.4	

However, as in other countries formed demographically by waves of immigrants, the term "new immigrants" in Israel has a social meaning, which is not based on length of residence alone. It is not uncommon that groups of people who live in a country for several decades are still labelled "new immigrants", if they remain marginal to the social and economic structure of the absorbing society.

In this sense a large proportion of those who immigrated to Israel after 1948, and especially those who emigrated from countries of the Middle East and North Africa, have remained "new immigrants" in spite of the long period that elapsed since their immigration. The relative failure to absorb and integrate these people in the prestigious occupational and social roles of society is mainly due to the fact that the majority of them had come from traditional societies and were faced with the demands of a modern technological society very suddenly.

Comparing continent of origin of the vocationally handicapped with the rest of the population (Table 6), we see that the handicapped group is more predominantly composed of immigrants from Asia and Africa, than is the population as a whole. Among the other groups only Israel-born Arabs are more dominant in the handicapped than in the general population. But their "over-representation" among the vocationally handicapped is very slight compared with the "over-representation" of Jews from Asia and Africa.

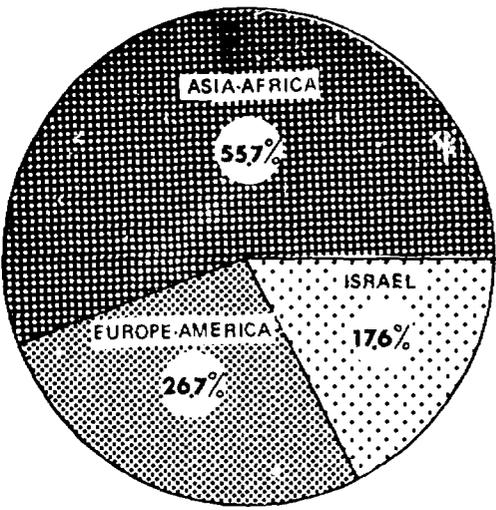
Table 6
Continent of origin of the vocationally handicapped
and the general comparable population

Continent of origin		Vocationally handicapped	General comparable population
Total	n	40,200	1,479,119
	%	100.0	100.0
Asia - Africa		55.7	34.7
Europe - America		26.7	34.6
Israel - Total		17.6	30.7
Jews -		(7.2)	(22.0)
Non-Jews		(10.4)	(8.7)

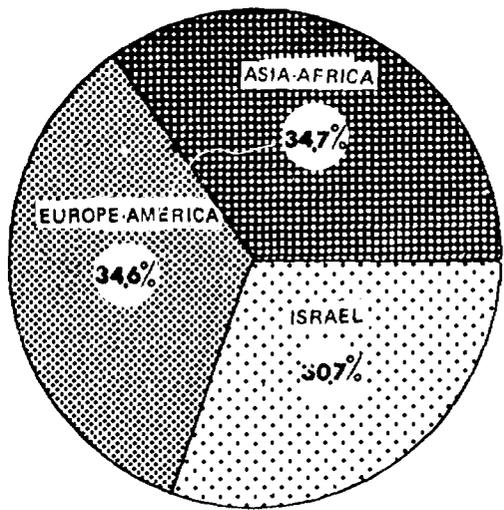
FIGURE 8

CONTINENT OF ORIGIN: THE VOCATIONALLY HANDICAPPED
AND THE GENERAL COMPARABLE POPULATION

VOCATIONALLY HANDICAPPED



GENERAL COMPARABLE POPULATION



6. Geographic distribution

The geographic distribution of the vocationally handicapped roughly corresponds to that of the general population in Israel.

Table 7
Vocationally handicapped by type of settlement and year of immigration to Israel

Type of settlement	Total		Total %	Year of immigration to Israel			
	n	%		Born in Israel	Immi-grated up to 1947	Immi-grated 1948 - 1954	Immigrated in 1955 and onwards
Total	501	100.0	100	18	13	39	30
Jerusalem, Tel-Aviv and Haifa	137	27.3	100	21	30	36	13
Urban settlements founded before 1948	135	27.0	100	7	10	53	30
Urban settlements founded after 1948	165	32.9	100	8	3	34	55
Rural settlements including Kibbutz and Moshav	33	6.6	100	21	21	54	4
Non-Jewish settlements	31	6.2	100	100	-	-	-

As is shown in Table 7, the vast majority of the vocationally handicapped - 87% - live in urban settlements: 27% of the vocationally handicapped live in the three main cities - Jerusalem, Tel-Aviv and Haifa; and 60% live in other urban settlements. Only 6.6% live in rural settlements and 6.2% are located in non-Jewish (mainly Arab) settlements. Nearly one-third of the vocationally handicapped live in the development towns established after the founding of the State in 1948.

A higher percentage of the vocationally handicapped who reside in rural areas than those who reside in urban areas were working partially at the time of the survey. This is presumably a result of the fact that unskilled partial employment is more readily available in rural areas.

Table 8
Vocationally handicapped by type of settlement and current activity

Type of Settlement	Total		Current Activity	
			Working partially at the time of the survey	Not working at the time of the survey
	n	%		
Total	501	100.0	34.9	65.1
Jerusalem, Tel-Aviv and Haifa	137	100.0	38.0	62.0
Urban settlements founded before 1948	135	100.0	33.3	66.7
Urban settlements founded after 1948	165	100.0	30.3	69.7
Rural settlements founded before 1948	15	100.0	80.0	20.0
Rural settlements founded after 1948	18	100.0	44.4	55.6
Non-Jewish settlements	31	100.0	25.8	74.2

B. PHYSICAL CHARACTERISTICS

1. Diseases*

The most prevalent categories of disease from which the vocationally handicapped suffer are diseases of the motor system and of the circulatory system. Only diseases of the motor system however, are prevalent among all ages of persons. Persons aged 45 and over suffer to a greater extent than others from internal diseases and diseases of the circulatory system, whereas persons of 18 to 44 have a higher incidence of emotional disturbances and mental retardation (Table 9).

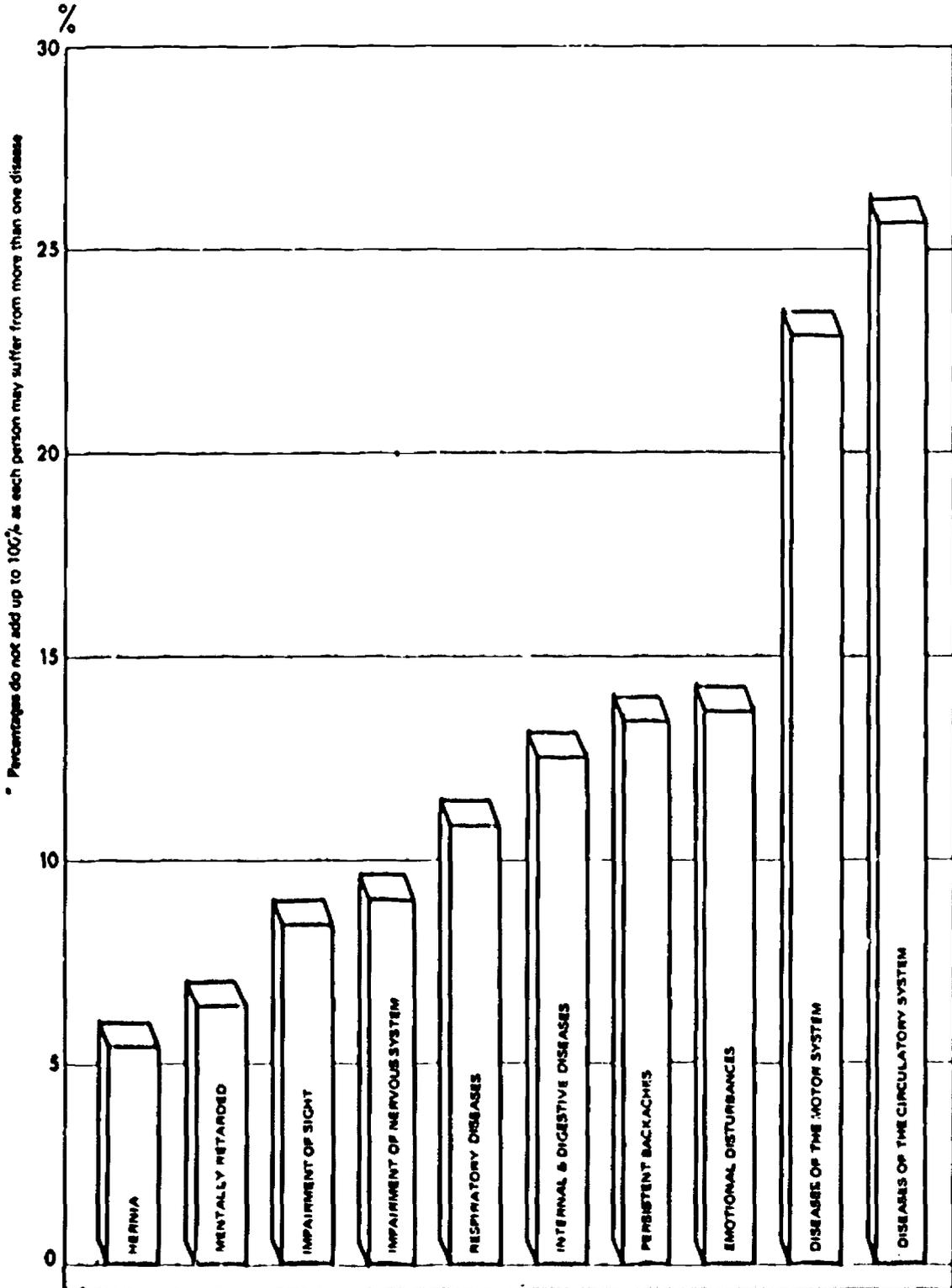
Most of the handicapped suffer from more than one ailment or defect. For purposes of this study it was of particular importance to specify that disease which the handicapped person claimed interfered with the performance of his principal activity. This was termed the "main disease".

As can be seen from Table 10 the most frequent main diseases are the same as those shown generally prevalent (Table 9); viz, diseases or disturbances of the motor system and of the circulatory system (including kidneys). Each of these two categories accounts for about 25% of the total illnesses mentioned. Illnesses mentioned in 10-15% of the total are: internal and digestive diseases, respiratory diseases; persistent backaches and emotional disturbances. Other ailments - each mentioned in less than 10% of the total responses are: impairment of the nervous system (including paralysis); skin diseases (including allergies), hernia, deafness or impaired hearing; blindness or impaired sight; mental retardation and epilepsy.

* For details on the specific diseases included in each category in the Tables see pp. 127-129.

FIGURE 9

VOCATIONALLY HANDICAPPED BY MAIN DISEASES



Percentages do not add up to 100% as each person may suffer from more than one disease

Table 9
Vocationally handicapped by disease categories and by age*

Disease categories	Total	Age at the time of the survey				
		14-17	18-34	35-44	45-54	55+
Total n	501	24	108	81	108	180
		Percent in each age group				
Diseases of the circulatory system (incl. kidneys)	39.3	29.2	22.2	32.1	44.4	51.1
Internal and digestive diseases	28.9	12.5	10.2	27.1	37.0	38.3
Respiratory diseases	16.7	8.3	12.0	13.6	16.7	22.2
Impairment of the nervous system (incl. paralysis)	11.4	8.3	13.9	7.4	11.1	12.2
Diseases of the motor system bones, muscles & kidneys	39.5	37.5	26.9	35.8	44.4	46.1
Skin diseases	7.0	4.2	5.5	7.4	6.5	8.3
Hernia	15.2	4.2	6.5	11.1	13.9	24.4
Impairment of hearing capacity and deafness	8.8	-	8.3	8.6	9.2	10.0
Impairment of sight and blindness	18.6	4.2	13.9	17.3	24.1	21.6
Persistent backaches	21.7	8.3	8.3	32.1	30.5	21.6
Emotional disturbances	21.3	12.5	28.7	29.6	20.4	15.0
Mentally retarded	7.4	29.2	17.6	3.7	4.6	1.7
Epilepsy	2.2	4.2	2.8	2.5	2.8	1.1

* Percentages do not add up to 100 as one person often suffers from more than one disease.

Table 10
 Vocationally handicapped by main diseases and by
 presence of additional diseases *

Categories of main diseases		Percentage of those suffering from ailments in the diseases category (whether in combination with other categories or not)	Percentage of those suffering solely from diseases in the category
Total	n %	501	501
Diseases of the circulatory system (inc. kidneys)		25.6	12.6
Internal and digestive diseases		12.6	4.6
Respiratory diseases		10.8	6.0
Impairment of the nervous system (inc. paralysis)		9.0	4.2
Diseases of the motor system, bones, muscles and knuckles		22.8	12.2
Skin diseases		2.0	0.8
Hernia		5.4	2.0
Impairment of hearing capacity and deafness		2.4	1.0
Impairment of sight and blindness		8.4	5.0
Persistent backaches		13.4	6.0
Emotional disturbances		13.6	8.6
Mentally retarded		6.4	4.0
Epilepsy		2.0	1.2
No diseases, and combination of diseases		3.4	3.4

* The total amounts to more than 100% as each person may be included in more than one category of disease.

The vast majority of the vocationally handicapped - 87% - were disabled as a result of diseases or accidents (excluding those incurred at work), 1% were disabled from birth, and 5% as a result of work injuries or injuries incurred in military service. The low proportion of those disabled as a result of work or military service injuries is indicative of the availability of current vocational rehabilitation programs for persons injured in these circumstances (See Table 11). These persons apparently succeed in achieving rehabilitation and therefore do not appear in our sample.

2. Functional limitations

Functional limitations were classed in the following categories:

- Mobility outside the home
- Holding with palm and fingers; holding objects in right hand, same in left hand, using scissors, holding writing implement
- Gross movements: standing for long periods; sitting for a long time (hour); walking fast, climbing stairs; bending down; kneeling
- Self-service: washing oneself, applying makeup; combing hair, dressing oneself
- Lifting and carrying of heavy objects
- Quick movements
- Reading
- Concentration and memory

Vocational rehabilitation may be assumed to be directly affected by functional limitations resulting from diseases. The major functional limitation, one which is mentioned by 85% of the handicapped is in their capacity to lift and carry loads. Another frequently mentioned limitation (70%) is in gross movements, which includes difficulties in bending, climbing stairs or in prolonged sitting or standing. Limitation in the capacity for quick movements is mentioned by 59%; 23% are limited in mobility outside the home and 27% in concentration and memory. Other limitations are: holding with palm and fingers - 18%; reading - 11%; self-service - 9% (See Table 12).

Table 11

Vocationally handicapped by categories of main diseases
and cause of disability

Categories of main diseases	Total		Cause of disability		
	n	%	From birth and early childhood	Diseases and accidents*	Work & military service injuries
Total	501	100.0	7.4	87.6	5.0
Diseases of the circulatory system (incl. kidneys)	128	100.0	3.9	93.8	2.3
Internal and digestive diseases	63	100.0	-	96.8	3.2
Respiratory diseases	54	100.0	1.9	96.2	1.9
Impairment of the nervous system (incl. paralysis)	45	100.0	6.7	84.4	8.9
Diseases of the motor system, bones, muscles & knuckles	114	100.0	7.0	82.5	10.5
Skin diseases	10	100.0	-	100.0	-
Hernia	27	100.0	-	96.3	3.7
Impairment of hearing capacity and deafness	12	100.0	41.7	58.3	-
Impairment of sight & blindness	42	100.0	14.3	76.2	9.5
Persistent backaches	67	100.0	-	88.1	11.9
Emotional disturbances	68	100.0	1.5	97.0	1.5
Mentally retarded	32	100.0	59.4	40.6	-
Epilepsy	10	100.0	20.0	80.0	-
No diseases	17	100.0	-	100.0	-

* Excluding work-connected diseases and accidents.

Table 12

Vocationally handicapped by functional limitations

Type of functional limitation	n	%
Total	501	*
Mobility outside the home	113	23
Holding with palms and fingers	89	18
Gross movements	351	70
Self-service	44	9
Carrying heavy loads	427	85
Quick movements	298	59
Reading	56	11
Concentration and memory	135	27

* Percentages do not add up to 100 as each person may suffer from more than one functional limitation.

C. SOCIAL CHARACTERISTICS

1. Family composition and economic status

The social effects of vocational handicap extend beyond the handicapped population itself. Also affected are other members of the immediate family. The number of the vocationally handicapped and their immediate families residing with them in the same household, is estimated to comprise 200,000 persons, thus constituting 7.7% of the total population of Israel. *

Over one third of the family members are children and youngsters aged 17 years or under. Only 21% of the family members were working.

* The families of the 4,500 young persons in special educational frameworks are not included in this estimate.

Table 13
Family members* by employment status and sex

Employment status of family members		Total	Men	Women
Total	n	154,160	68,160	86,000
	%	100	100	100
Were working		21	29	15
Were not working		33	20	44
Were studying		32	34	31
In the army		2	5	-
Children under school age		12	12	10

* The handicapped person himself is not included.

Table 14
Vocationally handicapped by status as household head, current activity and family size*

Family size	Grand Total	Status as household head and current activity						
		Household head			Not household head			
		Total	Worked partially	Did not work	Total	Worked partially	Did not work	
Total	n	501	248	140	108	253	35	218
	%	100	100	100	100	100	100	100
1 person	5.2	7.2	3.6	12.0	3.2	5.7	2.8	
2 persons	17.7	23.0	27.8	16.7	12.6	17.1	11.9	
3 persons	14.6	13.3	12.9	13.9	15.8	17.1	15.6	
4 persons	17.4	13.3	15.0	11.1	21.3	22.9	21.1	
5 persons	11.0	9.7	9.3	10.2	12.3	14.3	11.9	
6+ persons	34.1	33.5	31.4	36.1	34.8	22.9	36.7	

* Includes the handicapped person.

Economic hardship is likely to be aggravated more seriously in those families where the handicapped person is the head of the household. About half of the persons interviewed in their survey considered themselves head of their household. Among the men, 62% were household heads; among women, 18%. An estimated 72,000 persons were dependent on these household heads.

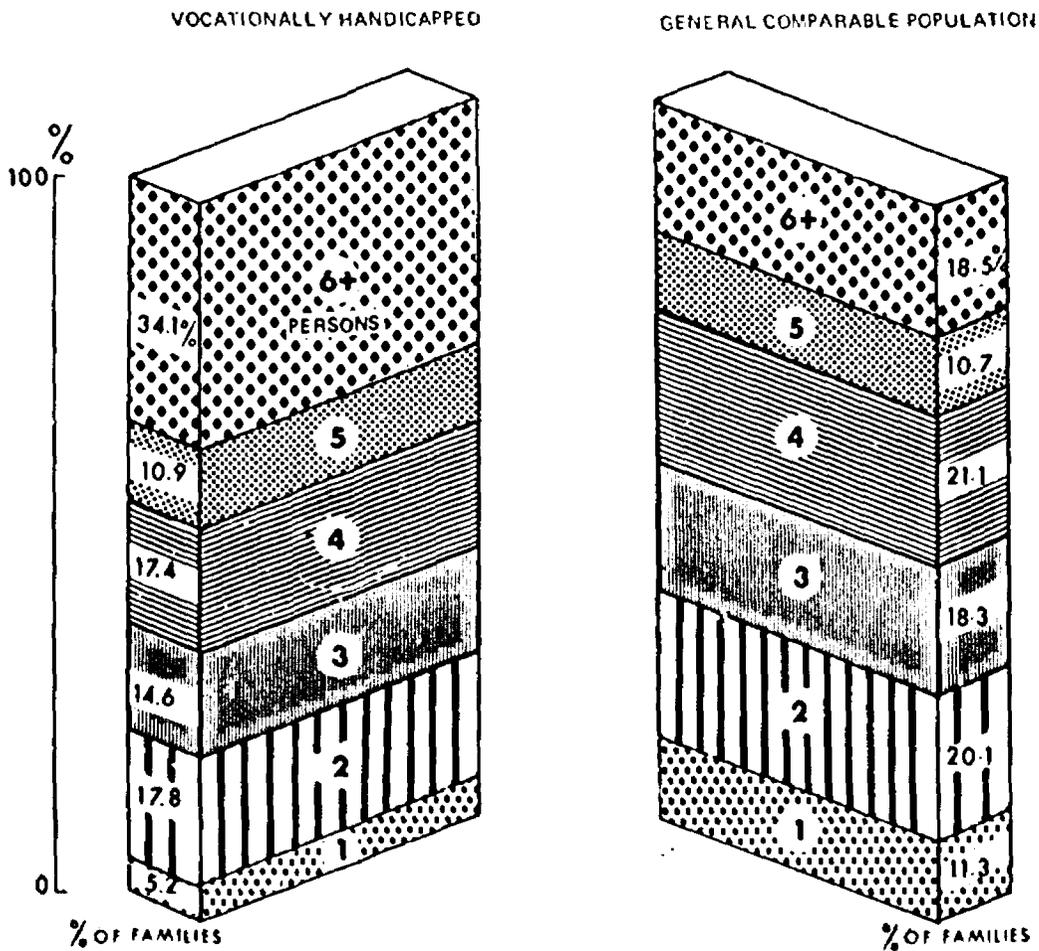
As is shown in Table 14, 43% of the household heads did not work at all at the time of the survey and the others worked only partially. A third are members of families of six or more persons.

Family members contributed rather little to the handicapped persons' family income especially in those families where the vocationally handicapped person himself is the household head. Among 72,000 persons in 19,000 families of the vocationally handicapped who are household heads, 10,000 are working; thus there are only 0.5 working members per family in addition to the handicapped person himself who either did not work at all or worked only partially.

Of the 82,000 persons who are related to the vocationally handicapped who are not household heads, 22,000 persons, or an average of 1.1 family members per family were working in addition to the handicapped person who was most often not working at all. As seen in Table 13, only 21% of the total family members of the vocationally handicapped were working at the time of the survey.

FIGURE 10

FAMILY SIZE: THE VOCATIONALLY HANDICAPPED
AND THE GENERAL COMPARABLE POPULATION



In general, a relatively high proportion of the vocationally handicapped live in very large families comprising seven or more persons - 25%, compared to only 12% of families of this size in the general comparable population (See Table 15).

Table 15
Family size of vocationally handicapped and
general comparable population

Number of family members*		Vocationally handicapped population	General comparable population**
Total	n	40,000	670,000
	%	100.0	100.0
1		5.2	11.3
2		17.7	20.1
3		14.6	18.3
4		17.4	21.1
5		11.0	10.7
6		9.0	6.3
7+		25.1	12.2

* Includes the handicapped person

** Figures based on Statistical Yearbook, 1967, p. 43

2. Housing conditions

The vocationally handicapped live in crowded housing conditions. Especially severe is the situation among those who live in large families of six or more persons: in 10% of these large families the whole family lives together in one room, and in 32% of the families the whole family lives in two rooms. A quarter of the families live in conditions of three or more persons per room.

Table 16

Vocationally handicapped by family size and number of rooms

Number of rooms	Total	Number of persons in the family		
		1 - 2	3 - 5	6 plus
Total	n 501	115	215	171
	% 100.0	100.0	100.0	100.0
1	15.8	34.2	11.0	9.9
2	42.3	47.8	47.3	32.6
3	34.9	14.4	33.9	49.4
4	7.0	3.6	7.8	8.1

FIGURE 11

DWELLING DENSITY: THE VOCATIONALLY HANDICAPPED AND THE GENERAL COMPARABLE POPULATION

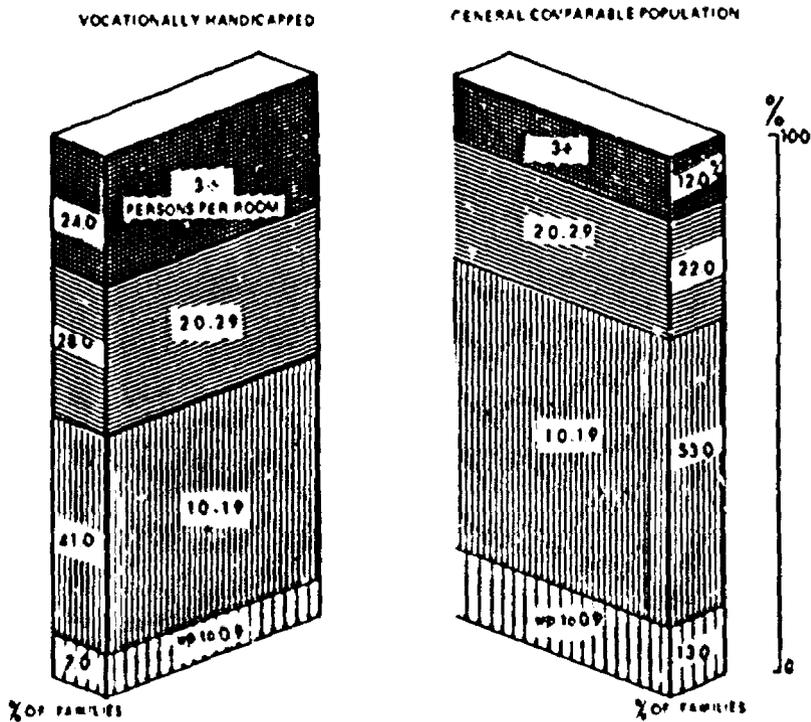


Table 17
 Vocationally handicapped and general population
 by dwelling density

Number of persons per room	Total	Among families of the handicapped	Among Jewish families of the general population
Total	n	40,200	617,300
	%	100	100
Up to 0.9 persons		7	13
From 1.0 - 1.9		41	53
From 2.0 - 2.9		28	22
From 3 plus		24	12

A breakdown of the figures on dwelling density by country of origin shows (Table 18) unexpectedly that the highest density is found among the vocationally handicapped born in Israel (both Jews and non-Jews). This may be attributed to the fact that the Israel-born are not eligible for immigrant housing.

Table 18
 Vocationally handicapped by continent of origin
 and number of persons per room

Continent of origin	Total		Persons living in density of 3 + persons per room
	n	%	
Total	501	100	24
<u>Israeli born</u>			
Jews	38	100	37
Non-Jews	50	100	46
<u>Immigrated from</u>			
Asia - Africa	279	100	29
Europe - America	134	100	4

3. Housing facilities and equipment

The evaluation of facilities and equipment in the homes of the vocationally handicapped was made in two steps.

In the first step, items of facilities and equipment were classified into three groups according to their importance and prevalence in the Israeli household.

The first group, indicating the lowest standard, included only those items of facilities and equipment considered as basic and universal: running water, electricity, kitchen, indoor W. C.

The second group included in addition to the former items, basic but less universal items: gas or electric cooking range, refrigerator, bathtub or shower.

The third group, indicating the highest standard, included, in addition to the former items, facilities and equipment not yet considered basic: telephone and washing machine.

In the second step, five levels of facilities and equipment were formulated on the basis of the above judgements.

Level 1: The first and lowest, included families whose houses lacked one or more items of group 1, such as electricity, running water, etc.

Level 2: The second level included those families who possessed all items in group 1, but lacked one or more items in group 2, like refrigerators, showers, etc.

Level 3: The third level included all families possessing all items in groups 1 and 2, but lacked all items in group 3.

Level 4: The fourth level included all families possessing all items in groups 1 and 2 and part of the items in group 3 (either telephone or washing machine).

Level 5: The fifth and highest level of standard of living included families possessing all items in groups 1, 2 and 3.

Facilities like running water, kitchen, electricity, indoor W. C. and bathtub and shower, are possessed by most of the vocationally handicapped, because they generally live in public housing projects where these facilities are standard.

It was also found that most of the vocationally handicapped own electric or gas cooking stoves, refrigerators, radios and transistors, although to a lesser extent than the general comparable population. Washing machines and telephones are relatively scarce possessions among the vocationally handicapped.

Table 19a
Households by facilities in dwellings of the vocationally handicapped and the total population
(Percent)

Facilities in dwelling		Vocationally handicapped	Total population *
Total	n	40,200	631,000
	%	100	100
Running water		95	
Kitchen		95	97
Electricity		93	
Bathtub or shower		84	90
Indoor toilet		79	89
Outside toilet		18	

* Source of figures for total population is the Statistical Yearbook 1967. These figures do not include residents of cooperative agricultural settlements.

Table 19b

Percentage of families possessing selected durable goods among the vocationally handicapped and the total population

Selected durable goods		Vocationally handicapped	Total population*
Total	n	40,200	631,000
	%	100	100
Gas or electric cooking range		75	83
Radio or transistor		72	91
Electric refrigerator		67	80
Ice box		17	8
Washing machine		16	30
Telephone		5	
Television		2	3

* Source of figures for total population is the Statistical Yearbook, 1967. These figures do not include residents of cooperative agricultural settlements.

Seven percent of the vocationally handicapped belong to the lowest level (Level 1) lacking even basic facilities like electricity and running water, etc. and about 18% of the handicapped families belong to the relatively high level of living standard (Levels 4 - 5), possessing - amongst other items - either a washing machine or a telephone or both.

As in the general population in Israel, there are significant differences in standard of living as measured not only by dwelling density, but also by level of facilities and equipment between people who came to Israel before 1948 and those who came after 1948, and between those originating from Asia-Africa and those originating from Europe-America.

Table 20

Vocationally handicapped by level of facilities and equipment

Level of facilities and equipment		
Total		n
		%
		501
		100
Levels 1 } 2 }	Low	7
		29
Level 3	Middle	42
Levels 4 } 5 }	High	16
		2
Not known		4

Handicapped persons originating from Asia-Africa were found to have a lower standard of facilities and equipment than those originating from Europe-America: in each continent of origin, groups who immigrated to Israel after 1948 had a lower standard of living than those who immigrated before 1948.

Non-Jews belonged to the lowest level of standard of living. This group is culturally autonomous and has not yet adopted modern domestic appliances as a social norm. (See Table 21).

To conclude, the figures show that most vocationally handicapped persons live in crowded housing conditions, but their dwellings are generally equipped with basic facilities.

Table 21

Vocationally handicapped by domestic appliances and equipment level,
continent of origin and year of immigration to Israel

	Total		Level of living standard		
			1 - 2 (Low)	3 (Middle)	4 - 5 (High)
	n	%			
Total	501	100	37	44	19
<u>Originating from Asia - Africa</u>	260	100	45	41	14
Immigrated before 1948	22	100	23	64	13
Immigrated after 1948	238	100	47	39	14
<u>Originating from Europe-America</u>	133	100	12	59	29
Immigrated before 1948	43	100	5	46	49
Immigrated after 1948	90	100	16	65	19
<u>Israeli born</u>	88	100	53	26	21
Jews	38	100	11	42	47
Non-Jews	50	100	86	14	-
Not known	20	100	-	-	-

D. VOCATIONAL HISTORY AND CHARACTERISTICS

1. The vocational crisis

It is generally thought that the vocational crisis, which is the point of cessation or limitation of a person's vocational activity is a direct result of health impairment. One of the hypotheses of this study - which was proven correct - was that health impairment in itself does not always result in a vocational crisis. In many cases it is the addition of impeding situational factors, like immigration, introduction of new machinery, etc. that bring about the vocational crisis. The vocational crisis may occur at a time considerably after the date of the health impairment itself.

When asked what caused their vocational crisis, only 46% of the vocationally handicapped mentioned health impairment as the major factor. About 16% mentioned dismissal from work for reasons such as the introduction of new working techniques or cutbacks in the number of employees. Seven percent gave immigration to Israel as the main cause of their vocational crisis.

For 76% of the vocationally handicapped, the vocational crisis meant cessation or limitation in gainful employment or housework, for 10% it meant cessation or limitation in study or transfer from a regular educational framework to a special one for the handicapped. The 10% of the vocationally handicapped who became handicapped as children under six had, of course, no vocational crisis (See Table 22).

a. Work history and the vocational crisis

The vocationally handicapped are often assumed to be people with poor working habits and lacking in work experience without the motivation for work, irrespective of and even prior to their physical health impairment.

It was found that, on the contrary, many of the vocationally handicapped had considerable working experience prior to their vocational crisis and that many of them continued to work after it.

Table 22

Vocationally handicapped by activity at the time of the crisis

Activity at the time of the crisis	n	%
Total	501	100.0
Worked	326	65.1
Army service	8	1.6
Studied	49	9.8
Housewife	47	9.4
Child under 6	54	10.7
Others	17	3.4

Only 20% of the vocationally handicapped have never worked at all. Forty percent of those who never worked were either handicapped at birth or before they were 18 years old. Twenty six percent worked before the vocational crisis but did not continue after it; 9% did not work before the vocational crisis but started to work partially after it. The greatest portion - 45% - of the vocationally handicapped worked before the vocational crisis and continue to work partially after it (See Table 23).

The majority of the vocationally handicapped not only worked, but worked continuously before their vocational crisis. By continuous work is meant work at least 80% of the time, from the age of 16 to the crisis. Sixty five percent of the vocationally handicapped worked continuously before the vocational crisis, and 22% of the vocationally handicapped worked partially continuously even after the crisis despite their impaired health.

Table 23
Vocationally handicapped by work history

Work history	n	%
Total	501	100.0
Never worked	98	19.6
Worked only before the vocational crisis	132	26.3
Worked before and continued to work partially after the vocational crisis	224	44.8
Worked partially only after the vocational crisis	47	9.3

b. Level of education and the vocational crisis

Level of education appears to be a factor in the work history of the vocationally handicapped: the higher the level of education, the more likely he was to be working at the time of the survey. There is however no apparent relationship between level of education and cessation of work after the vocational crisis.

The high percentage of persons with a low level of education who never worked at all (Table 24) possibly reflects large numbers of persons handicapped from birth or childhood who were not adequately trained to even begin to work. Table 25 shows that among persons whose vocational crisis occurred before the age of 18, 80% were not working at the time of the survey.

c. Immigration and vocational crisis

It was expected that for people with impaired health, immigration to Israel would be shown as a predominant cause of vocational crisis, because the adjustment to new conditions in a new country is especially difficult.

Table 24

Vocationally handicapped by work history and level of education

Level of education	Total		Never worked	Worked only before the vocational crisis	Worked after the vocational crisis	
	n	%			But not at the time of the survey	At the time of the survey
Total	501	100.0	19.6	26.3	19.2	34.9
None or low	284	100.0	26.4	22.2	20.8	30.6
Partial and full elementary	168	100.0	13.1	32.1	16.7	38.1
Secondary plus	49	100.0	2.0	30.6	18.4	49.0

Table 25

Vocationally handicapped by age at the time of the vocational crisis and current activity

Age at the time of the vocational crisis	Total		Current activity	
	n	%	Worked partially at the time of the survey	Did not work at the time of the survey
Total	501	100.0	34.9	65.1
Up to 17	120	100.0	19.2	80.8
From 18 - 34	101	100.0	30.7	69.3
From 35 - 44	97	100.0	42.3	57.7
From 45 - 54	107	100.0	45.8	54.2
From 55 +	76	100.0	40.8	59.2

Of the 501 persons in our sample, 416 - 83% - had immigrated with a health impairment. Table 26 shows that among these 416 cases, 21% had already undergone the vocational crisis before coming to Israel. Only 12% experienced the crisis in the year of immigration. In the majority of cases, 59%, the crisis occurred only three years or more after immigration (Table 26).

Table 26

The vocationally handicapped who immigrated to Israel by time span between year of health impairment and year of immigration to Israel, and time span between year of vocational crisis and year of immigration

Health Impairment occurred	Total		The crisis occurred						years
			Before immigration			In the year of immigration	After Immi-		
			3 or more years	2 years	1 year		1 year	2 years	
n	%								
Total	416	100.0	18.5	1.4	1.0	12.3	4.8	3.4	
Before Immi-gration									
3 or more years	146	100.0	52.0	-	1.4	11.0	3.4	3.4	
2 years	13	100.0	-	46.1	-	15.4	7.7	-	
1 year	7	100.0	-	-	28.6	14.3	14.3	-	
In the year of Immigration	42	100.0	-	-	-	71.4	2.4	-	26.2
After Immi-gration									
1 year	14	100.0	-	-	-	-	78.6	-	21.4
2 years	13	100.0	-	-	-	7.7	-	61.5	30.8
3 or more years	181	100.0	0.5	-	-	0.5	0.6	0.6	97.8

The findings may be explained by the fact that in the first years of their residence in Israel, most immigrants are eligible for public relief work in order to ease the initial period of adjustment. This work appears suitable also for people with impaired health and lacking adequate modern occupational skills. Thus, the vocational crisis occurred only three or more years after their immigration, when those with impaired health had to start to compete for work in the regular labor market.

d. Occupation and the vocational crisis*

It should be kept in mind that a mere change in occupation albeit a deterioration in occupational status does not constitute a vocational crisis. Only cessation of work or the change from full-time to part-time work is defined as a vocational crisis.

A third of the vocationally handicapped who had been engaged abroad in skilled work or trade and clerical occupations, changed after immigration to Israel to unskilled work, prior to their vocational crisis (See Table 27).

The shift to unskilled work may, however, possibly have had some effect on vocational crisis by causing a deterioration in the physical condition of the handicapped.

* For definition of categories of level of occupation see p. 130.

Table 27

Vocationally handicapped by level of occupation abroad and in Israel prior to their vocational crisis

Occupational level abroad prior to vocational crisis	Occupational level in Israel prior to vocational crisis					
	Total		Trade and clerical	Skilled	Unskilled	Did not work abroad or born in Israel
	n	%				
Total	501	100.0	6.0	18.5	30.0	45.5
Trade and clerical	81	100.0	14.8	14.8	37.0	33.4
Skilled	109	100.0	1.8	38.6	33.9	25.7
Unskilled	51	100.0	3.9	11.8	52.9	31.4
Did not work abroad or born in Israel	260	100.0	5.4	12.7	21.5	60.4

2. Current activity

The major focus of this study was, as we have pointed out, effective performance, both current and potential. Current performance was studied on the basis of current activity which was analyzed in terms of those persons working partially and those not working at all.* Tables 28a - 28d in the following pages describe the main characteristics of the handicapped population as divided between the working partially and the non-working.

* For definitions of terms see p. 127.

FIGURE 12

VOCATIONALLY HANDICAPPED BY CURRENT ACTIVITY

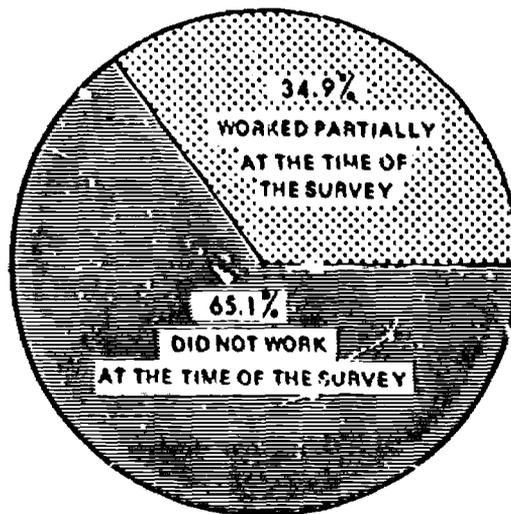


Table 28a

Vocationally handicapped by current activity and age,
marital status, family size and year of immigration

Various characteristics	Total	Current activity		
		Working partially	Not working	
Total	n	501	175	326
	%	100.0	100.0	100.0
<u>Age at the time of the survey</u>				
14 - 17	4.8	-	7.4	
18 - 34	21.6	16.0	24.6	
35 - 54	37.7	36.6	38.3	
55+	35.9	47.4	29.8	
<u>Marital status</u>				
Married	64.5	81.7	65.2	
Not married	35.5	18.3	44.8	
<u>Family size</u>				
1 person	5.2	4.0	5.8	
2 persons	17.8	24.6	14.1	
3 - 5 persons	42.9	40.6	44.2	
6 or more persons	34.1	30.8	35.9	
<u>Year of immigration</u>				
Born in Israel	17.6	10.3	21.5	
Immigrated up to 1947	13.6	18.3	11.0	
Between 1948 - 1954	38.7	43.4	36.2	
Between 1955 - 1962	21.7	21.1	22.1	
Between 1963 - 1966	8.4	6.9	9.2	

Table 28b

Vocationally handicapped by current activity and level of education and age at the time of the crisis

Various characteristics	Total	Current activity	
		Working partially	Not working
Total	n 501 % 100.0	175 100.0	326 100.0
<u>Level of education</u>			
None and low elementary	56.4	49.7	60.1
Partial elementary	16.0	17.7	15.0
Full elementary	17.8	18.9	17.2
Secondary or more	9.8	13.7	7.7
<u>Age at the time of the crisis</u>			
Up to 17	23.9	13.1	20.8
From 18 - 34	20.1	17.7	21.5
From 35 - 44	19.4	23.4	17.2
From 45 - 64	21.4	28.0	17.8
55 plus	15.2	17.8	13.7

Table 28c
 Vocationally handicapped by current activity and main diseases

Main diseases	Total	Current activity	
		Working partially	Not working
Total	501	175	326
	%	*	*
Diseases of the circulatory system (incl. kidneys)	25.6	40.2	23.0
Internal and digestive diseases	12.6	12.0	12.8
Respiratory diseases	10.8	11.5	10.4
Impairment of nervous system including paralysis	9.0	7.4	9.8
Diseases of the motor system bones, muscles and knuckles	22.8	22.3	23.0
Skin diseases	2.0	2.3	1.8
Hernia	5.4	8.0	4.0
Impairment of hearing capacity and deafness	2.4	3.4	1.8
Impairment of sight and blindness	8.4	8.7	9.8
Persistent backaches	13.4	18.3	10.7
Emotional disturbances	13.6	7.4	16.9
Mentally retarded	6.4	1.7	8.9
Epilepsy	2.0	0.6	2.8

* Percentages do not add up to 100 as one person may suffer from more than one main disease.

Table 28d

Vocationally handicapped by current activity and services received

Social services rendered	Total	Current activity	
		Working partially	Not working
Total	n 501	175	326
	% 100.0	100.0	100.0
Never received services	42.1	54.3	35.6
Received services in the past but not in 1966	10.2	9.1	10.7
Received services in 1966	47.7	36.6	53.7

a. Characteristics of the non-working

Sixty-five percent of the vocationally handicapped were not working at the time of the survey. The majority of this non-working group had not worked for three years or more.

The depth of non-employment, as measured by the time elapsed between the date of the survey and the date of cessation of work was as follows:

14% had ceased work less than one year prior to the survey

11% had ceased work 1 - 2 years before the survey

29% had ceased work 3 - 7 years before the survey

9% had ceased work 8 - 15 years before the survey

7% had ceased work 16 - 21 years before the survey

The remaining 30% never worked at all. These were generally non-married persons, concentrated in the age group under 18 (Table 29).

As working techniques and forms of organizations are constantly changing, the fact that so many of the vocationally handicapped did not work for a long period may be expected to present special problems for their integration and reintegration in occupational activity.

FIGURE 13

VOCATIONALLY HANDICAPPED WHO DID NOT WORK AT THE TIME OF THE SURVEY
BY AGE AND TIME GAP SINCE CESSATION OF WORK

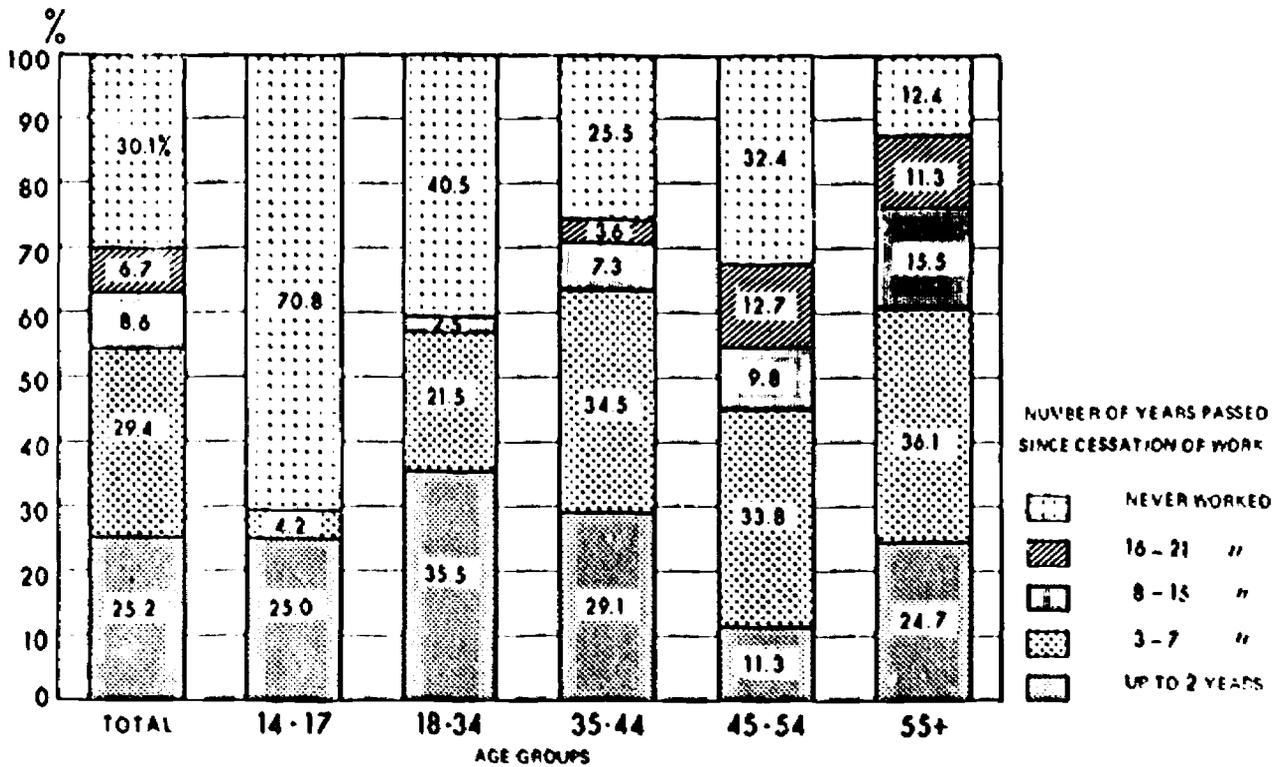


Table 29

Vocationally handicapped who did not work at the time of the survey, by age and marital status at the time of the survey and time gap since cessation of work

Number of years passed since cessation of work	Grand Total	Age and Marital Status											
		Married					Not Married						
		Total	18-34	35-44	45-54	55+	Total	18-17	18-34	35-44	45-54	55+	
Total	n %	326 100.0	180 100.0	20 100.0	35 100.0	52 100.0	73 100.0	146 100.0	24 100.0	59 100.0	20 100.0	19 100.0	24 100.0
Up to 1 year		14.1	15.0	20.0	20.0	7.7	16.4	13.0	4.2	20.3	15.0	-	12.5
1 - 2 years		11.0	11.1	20.0	14.3	7.7	9.6	11.0	20.8	13.6	5.0	-	8.3
3 - 7 years		29.4	38.9	35.0	37.1	36.5	42.5	17.5	4.2	16.9	30.0	26.3	16.7
8 - 15 years		8.6	11.1	5.0	5.7	11.5	15.1	5.5	-	1.7	10.0	5.3	16.7
16 - 21 years		6.8	8.5	-	2.9	15.4	10.9	3.4	-	-	5.0	5.3	12.5
Never worked		30.1	14.4	20.0	20.0	21.2	5.5	49.3	20.8	17.5	35.0	63.1	33.3

Half of the vocationally handicapped who did not work at the time of the survey gave reasons other than their health condition for not working (See Table 30).

The non-working group were concentrated in the working ages of 18-54: 25% were aged 18-34 and 38%, 35-54. Most were married, but 45% were not. A considerable number - 21% - were born in Israel (Table 28a).

Their level of education was very low: 60% had attained only a low elementary level or had none at all. Almost 30% had been under 18 at the time of the vocational crisis; 50% had been under 35 (Table 28b).

Diseases of the circulatory system and of the motor system were both mentioned as main diseases by 23%. Also mentioned by significant numbers (16%) were emotional disturbances (Table 28c).

Table 30

Vocationally handicapped who did not work at the time of the survey by reason for not working

Reason for not working	n	%
	326	100
Cannot - due to health condition	169	52
Does not find suitable work	117	36
Age: too young or too old	4	1
Due to study	9	3
Not interested	27	3

Over half were receiving social services in 1966; but, surprisingly, over one-third of these non-working persons had never received any social services at any time (Table 28d).

b. Characteristics of the working partially

Although most of the vocationally handicapped were not working at the time of the survey, 35% were working partially. The majority of the working partially were wage earners and were engaged in unskilled occupations (See Tables 31 and 32).

Almost half of the working partially were 55 years and over; over 80% were married; family size for 70% was 1-5 persons. A large proportion - 43% - had immigrated between 1948 and 1954 and 65% had immigrated between 1948 and 1962. (See Table 28a).

Table 31

Vocationally handicapped who worked at the time of the survey by level of occupation

Total	Professional and managerial	Trade and clerical	Skilled workers	Unskilled workers
n 175	3	25	41	106
% 100.0	1.7	14.3	23.4	60.6

Table 32

Vocationally handicapped who worked at the time of the survey by economic status

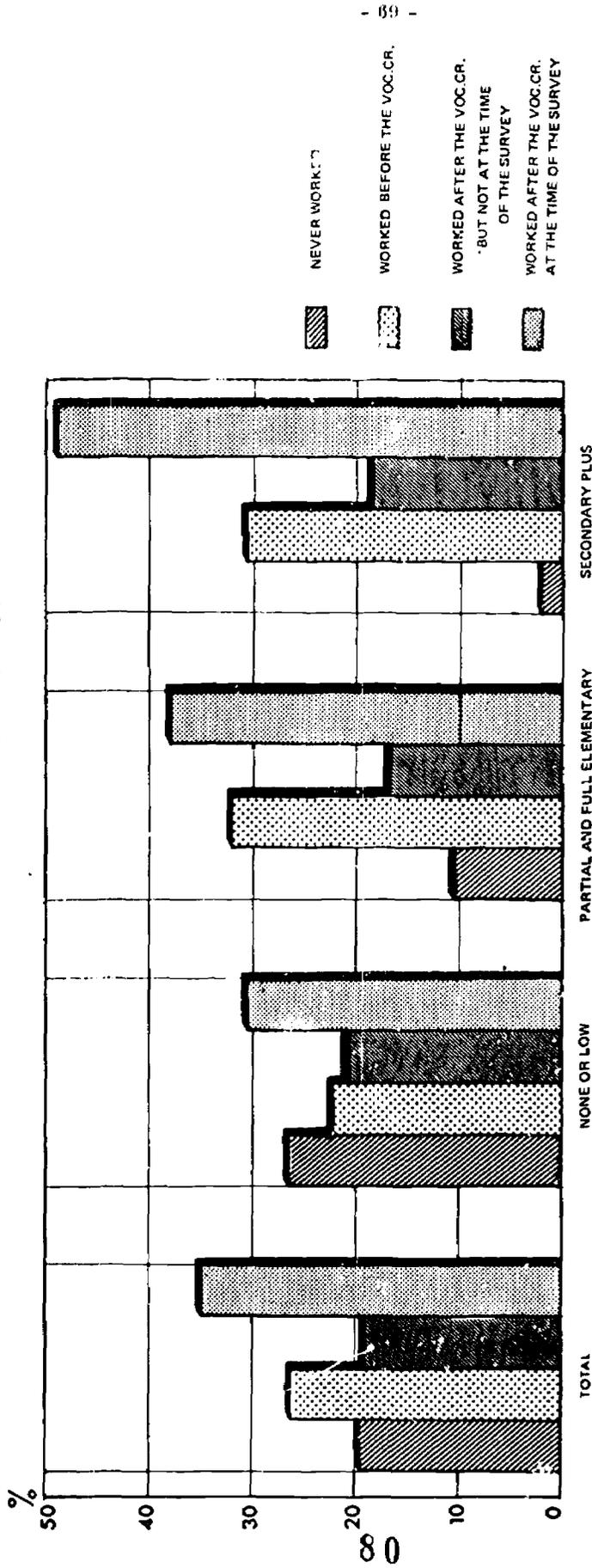
Total	Self-employed	Wage-earners
175	70	105
100.0	40.0	60.0

At the time of the vocational crisis almost 70% were 35 years or more (Table 28b). Educational level, though generally low, came to full elementary or vocational or secondary school for about one-third. As was pointed out above, this fact is probably related to age at the time of the crisis: the higher the age at that time, the higher the educational level.

The main diseases interfering most often with the performance of the working partially were diseases of the circulatory system - mentioned by 40% of these persons. Next frequent were diseases of the motor system (22%) and frequent backaches (18%), as is clear from Table 28c.

FIGURE 14

VOCATIONALLY HANDICAPPED BY WORK HISTORY AND LEVEL OF EDUCATION



Only one-third of those working partially were receiving social services in 1966. As is seen in Table 28d, 54% had never received services at any time.

c. Comparison of the working partially with the non-working

The vocationally handicapped who worked at the time of the survey are generally older than those not working at the time. They are more often married and more often immigrants who had arrived in Israel between 1948 and 1962.

Those who did not work had more often been under 18 at the time of their vocational crisis. The level of education of the non-working was lower than that of the working partially. There were, however, no significant differences in occupational aspirations.

Although generally similar in the pattern of main diseases, emotional disturbances and mental retardation were more prevalent among the non-working than among the working partially.

As might be expected, the non-working were more likely to be receiving services than the working partially. For both, however, the percentage who never received social services is strikingly high.

3. Occupational characteristics and aspirations

a. Occupational level*

The occupational status of the vocationally handicapped measured by the highest occupational level ever achieved by each person in the course of his work history is rather low. The highest occupational level ever achieved by 44% of the vocationally handicapped who ever worked at all was unskilled work. Only 1.4% of the vocationally handicapped ever worked in professional or managerial occupations (See Table 33).

*

For list of occupations included in each category see p. 130-131.

Table 33
**Vocationally handicapped by highest occupational level
 in their work history**

Occupational level	n	%
Total	501	100.0
Professional and managerial	7	1.4
Clerical and sales	57	11.4
Skilled	105	20.9
Unskilled	222	44.3
Never worked, housewives and unknown	110	22.0

Only 7% of the younger persons aged 18-34 were ever occupied in trade and clerical occupations, compared to 19% of the elderly persons of 55+ who worked at one time in these occupations (See Table 34).

b. Job seeking efforts

Among the vocationally handicapped who were not working, 34% sought work during the period of 26 weeks prior to the survey; 27% of the vocationally handicapped who were working partially at the time of the survey sought additional work during this period.

As could be expected, the lowest percentage of those who sought work was found among those who never worked in their lives (23%) (See Table 35). The highest percentage (50%) was among those who were not working at the time of the survey, but had worked after the vocational crisis.

Table 34

Vocationally handicapped by age at the time of the survey and highest occupational level

Age at the time of the survey	Total		Trade, professional & clerical	Skilled labor	Unskilled labor	Never worked
	n	%				
Total	501	100.0	12.8	20.9	44.3	22.0
14 - 17	24	100.0	-	4.2	29.2	66.6
18 - 34	108	100.0	7.4	21.3	38.9	32.4
35 - 54	189	100.0	11.6	19.6	45.5	23.3
55+	180	100.0	18.9	24.4	47.8	8.9

Table 35

Vocationally handicapped by work history and job seeking activity

Seeking employment	n	501	Never worked	Worked before the voc. crisis	Worked after the voc. crisis but not at the time of the survey	Worked at the time of the survey
Total			98	132	96	175
Sought employment		31.7	23.5	29.8	50.5	27.5
Did not seek employment		61.7	55.1	66.4	48.5	69.1
Not asked*		6.6	21.4	3.8	1.0	3.4

* Those who answered "not interested" to the question "Why don't you work", were not asked whether they sought employment.

The fact that about a third of the vocationally handicapped (13,000 persons) sought work, indicates that in these cases the person himself believes in his ability to work.

It was also found that about a quarter of the vocationally handicapped who did not seek work or additional work during 26 weeks prior to the survey, claimed factors other than their health as reasons for not seeking work (See Table 36).

Table 36.

Vocationally handicapped who did not seek employment (or additional employment) in the period of 26 weeks prior to the survey by current activity and reasons for not seeking employment

Reasons for not seeking employment or additional employment	Total		Current activity			
	n	%	Worked partially at the time of the survey		Did not work at the time of the survey	
			n	%	n	%
Total	309	100.0	120	100.0	189	100.0
Was unable	111	35.9	57	47.5	54	28.6
Due to health condition	118	38.2	22	18.3	96	50.8
Did not find work	39	12.6	17	14.2	22	11.6
Due to study	10	3.3	-	-	10	5.3
Not interested	31	10.0	24	20.0	7	3.7

c. Vocational aspirations

It is interesting to note that vocational aspirations of the vocationally handicapped show in most cases a realistic appraisal of capabilities in accordance with health, age, level of education and work experience.

Professional jobs are aspired to almost only by those vocationally handicapped persons with secondary or higher education. The highest proportion of those who thought that no work suitable for them exists, was found among those who have never worked in their lives and have a low or medium educational level. About a third of the vocationally handicapped thought themselves fit for sales, white-collar work and skilled labour. The remainder thought themselves fit for unskilled work only, or could not specify any occupation suitable for themselves. Thus most of the handicapped have adjusted their level of occupational aspiration to the facts of their objective limitations (See Table 37).

Table 37

Vocationally handicapped who were interested in additional work by occupational level aspired to or considered most suitable, and by level of last occupation

Level of last occupation	Total		Occupation aspired to or considered as most suitable				
			Profes- sional & mana- gerial	Trade & clerical	Skilled	Unskilled	Did not specify suitable work *
	n	%					
	501	100.0	1.2	14.6	14.4	12.6	57.2
Professional and managerial	7	100.0	42.8	14.3	14.3	-	28.6
Sales and clerical	57	100.0	3.5	36.8	3.5	5.3	50.9
Skilled	105	100.0	-	15.2	32.4	6.7	45.7
Unskilled	222	100.0	0.4	12.6	7.7	20.3	59.0
Housewives and never worked	110	100.0	-	6.3	16.4	7.3	70.0

* Or were not interested in additional work.

Table 38

Vocationally handicapped by type of functional limitations and occupational aspirations

Type of functional limitations	Total		Occupations aspired to or regarded as suitable by vocationally handicapped				
			Cannot specify any *	Professional & managerial	White collar and sales	Skilled	Unskilled
	n	%					
Total	501	100.0	57.3	1.2	14.6	14.6	12.3
Mobility outside the home	113	100.0	74.3	0.9	9.7	11.5	3.6
Holding with palm and fingers	89	100.0	71.9	-	14.6	9.0	4.5
Gross movements	351	100.0	66.1	0.6	12.5	10.5	10.3
Self-service	44	100.0	77.3	-	13.6	4.6	4.5
Carrying heavy objects	427	100.0	59.5	0.9	13.8	12.9	12.9
Quick movements	298	100.0	67.8	0.3	10.4	9.4	12.1
Reading	56	100.0	67.9	-	5.3	16.1	10.7
Concentration and memory	135	100.0	68.9	0.7	10.4	11.9	8.1

* Or not interested in additional work.

The occupational self-image of the handicapped is clearly influenced by their functional limitations. Limitations of mobility outside the home apparently frustrates the occupational aspirations of the vocationally handicapped more than any other functional limitation: 74% of the vocationally handicapped with a limitation in mobility outside the home claimed that they could think of no suitable occupation for themselves (Table 38.)

V. SOCIAL AND REHABILITATION SERVICES

Historically, rehabilitation services in Israel have developed to meet the needs of specific groups of handicapped persons defined on the basis of type of handicap or the circumstances under which it was incurred. Today there are some 40 to 50 agencies and institutions which include some aspect of rehabilitation among their services. There is, however, no general legal right to rehabilitation for the handicapped disabled as a result of circumstances other than work or military service.

Information regarding the social services received by the handicapped persons in this study was obtained from the persons themselves in special interviews and from all of the agencies that were or might have been concerned.

We found that the great majority of the vocationally handicapped do not conceal the fact of application for services and on the whole, their reports on their contacts with the agencies are correct. This conclusion was reached on the basis of interviews with social agency staffs as well as examination of agency reports. In the 242 cases of persons who claimed in the interview that they had applied for help, the information was fully corroborated in 195 cases; in 28 cases no file or documents were found by the agencies and the persons were not known to the social workers; 19 cases could not be located for technical reasons. In the cases of 212 persons who had stated that they had not applied for social services in the 12 months prior to the survey, the local service agencies in the vicinity of their residence which were contacted in order to determine whether they knew or had extended services to them, generally confirmed the statements of the respondents. In only 12 cases was it found that some limited help had actually been extended in the last 12 months. Another 22 persons had not received services in the last 12 months but were known to the agencies from previous years.

A. SCOPE OF SERVICES

Although the picture of the vocationally handicapped that emerges from the demographic and social data gathered in this survey shows a population in considerable economic stress, only 58% have ever received social services. Forty-two percent of all the vocationally handicapped are not known to and have never received services from any public agency. Moreover, in 1966, the year of the survey, actually only 48% of the vocationally handicapped were receiving services. A detailed comparison between the group receiving aid from social services and those not receiving aid is made at the end of this chapter.

B. TYPES OF SERVICES

The main type of assistance received by the vocationally handicapped was in the form of payments made on behalf of the client for medical or other services. About 54% of the persons surveyed received help of this kind. Forty two percent of the handicapped received payments made directly to them. (Table 39.)

As can be seen from Table 39 below, vocational rehabilitation services constitute only a marginal item among the types of services rendered. Only 6% of the vocationally handicapped underwent a process of comprehensive diagnosis, i.e., ability assessment reached through medical, psychological and social evaluation as a basis for vocational rehabilitation. Nevertheless, for some 17% attempts were made at rehabilitation through vocational training and/or placement, most of them, therefore, without prior comprehensive diagnosis.

Table 39

Vocationally handicapped by type of services received

Type of services	n	% of total handi- capped population*
Total	501	100.0
1. <u>Financial assistance</u>	Total	281
		56.1
a) <u>Indirect financial assistance</u>	Total	271
For medical purposes	219	43.7
For other specific purposes	207	41.3
b) <u>Direct financial assistance</u>	Total	209
Regular monthly support	169	33.7
Occasional support	44	8.8
Grants	80	16.0
Loans	21	4.2
2. <u>Diagnostic services</u>	Total	205
		41.0
a) Medical diagnosis only	172	34.3
b) Psychological diagnosis only	4	0.8
c) Comprehensive medical, psychological & social diagnosis	29	5.8
3. <u>Attempts at vocational rehabilitation</u>	Total	85
		17.0
a) In regular work	32	6.3
b) In sheltered work	29	5.8
c) In self-owned business	26	5.2
d) Vocational training	17	3.4

* Percentages do not add up to 100 as one person may have received more than one type of services.

It is important to note that in most cases, except in those few in which comprehensive diagnosis was carried out by Rehabilitation Teams, the medical certificate in the files of agencies specified only the name of the disease and gave no indication of its impact on functional capacity. Hence the value of these certificates for formulating occupational rehabilitation plans is very limited.

More vocational rehabilitation attempts have been made for the vocationally handicapped who have been either handicapped from early childhood, or as a result of a work or war injury, than for adults handicapped by diseases or accidents. (See Table 40). This is presumably due to the fact that people handicapped by work and war injuries enjoy legal rights for services and small children are in many cases given priority of treatment by social agencies.

Table 40
Vocationally handicapped by cause of handicap & type of services

Type of Services		Cause of handicap			
		From birth	From diseases & accidents	From work accidents	
Total	n	501	37	439	25
	%	*)	*)	*)	*)
Indirect financial assistance		54.1	62.6	51.9	84.0
Direct financial assistance		42.0	43.2	38.7	92.0
Diagnostic services		41.0	48.6	39.9	80.0
Vocational rehabilitation services		17.0	27.0	14.3	36.0

* Percentages do not add up to 100 as one person may have received more than one type of services.

C. MEDICAL INSURANCE

From the information gathered in this survey, it was found that:

- Only 53% of the vocationally handicapped are fully insured through one or another of the Sick Funds;
- About 32% receive limited medical services arranged by local welfare offices. These are generally limited to ambulatory services and do not include hospitalization, tests or appliances;
- About 15% (some 6,000 persons) have no medical insurance or provision for medical aid.

It may be pointed out that among the population of Israel as a whole, about 85% are insured in the Sick Funds, in contrast to the 53% among this group of persons all of whom have health deficiencies.

Unexpectedly, a relatively high percentage of the non-insured are Israel-born or were living in Israel before 1948. (See Table 41.) Immigrants from Western countries, "insurance-conscious" as they are, may be assumed to have joined the Sick Funds on their own initiative. The high level of insurance among the immigrants from Asia and Africa may well demonstrate the great efforts made on their behalf by public agencies. This leaves the persons who had no immigrant rights in the State of Israel, i. e. the Israel-born and those who immigrated prior to 1948 in a disadvantaged position in the health service network.

The largest proportions of persons without insurance and receiving no aid for medical services were among persons in small families or living alone (Table 42). The insured were mainly persons who were either working partially at the time of the survey or had worked at some time in the past (Table 43).

Table 41

Vocationally handicapped by type of medical insurance, continent of origin and year of immigration to Israel

Continent of origin and year of immigration	Total		Type of medical insurance			
			Sick Funds	Insured partially through welfare agencies	Not insured	
	n	%				
Total	501	100	53	32	15	
<u>Asia-Africa</u>	Total	279	100	48	44	8
Immigrated up to 1947		23	100	48	48	4
Immigrated after 1948		256	100	48	43	9
<u>Europe-America</u>	Total	134	100	74	13	13
Immigrated up to 1947		45	100	84	5	11
Immigrated after 1948		89	100	68	18	14
<u>Israel</u>	Total	88	100	40	21	39
Jews		38	100	74	10	16
Non-Jews		50	100	14	30	56

Table 42

Vocationally handicapped by type of medical insurance and family size

Type of medical insurance	Total		Family size: Number of persons			
	n	%	1	2	3-5	6+
Total	501	100.0	5.2	17.8	42.9	34.1
Sick Funds	268	100.0	3.7	19.0	44.8	32.5
Partial care through welfare agencies	159	100.0	6.3	12.6	42.7	38.4
No insurance or aid for medical services	74	100.0	8.1	24.3	36.5	31.1

Table 43

Vocationally handicapped by type of medical insurance and work history

Type of medical insurance	Total		Work history	
	n	%	Never worked	Worked partially at the time of the survey or sometime in the past
Total	501	100.0	19.6	80.4
Sick Funds	268	100.0	12.3	87.7
Partial care through welfare agencies	159	100.0	29.6	70.4
No insurance or aid for medical services	74	100.0	24.3	75.7

D. TYPES OF SERVICE AGENCIES

Public welfare agencies are the main sources of services to the vocationally handicapped: 50% of the vocationally handicapped received some kind of aid from these agencies.

About half of those who received aid from welfare agencies also received services from other public agencies. In most of these latter cases, the public welfare agency was found to have referred the client to the other agencies. Only 7% of the vocationally handicapped received aid only from agencies other than public-welfare offices.

Table 44

Vocationally handicapped, by type of public agency rendering services

Type of agency	<u>Vocationally handicapped receiving services</u>	
	n	%
Total	501	100.0
Public welfare agency only	130	25.9
Public welfare and other agencies	123	24.6
Other agencies only	37	7.4
No agencies	211	42.1

E. TIMING OF APPLICATIONS TO SERVICE AGENCIES

The vocational crisis is apparently an important factor in the application of vocationally handicapped persons to public welfare agencies. Only 14% of the vocationally handicapped persons applied for the first time to public welfare agencies before their vocational crisis. 8% applied in the year of their vocational crisis, 3% applied one year after the crisis and 25% applied two or more years after their vocational crisis. The rest did not apply at all.

Half of the vocationally handicapped whose vocational crisis had occurred before their immigration to Israel and who applied to public welfare agencies, did so in the year of immigration. And 42% of the vocationally handicapped whose vocational crisis occurred in the year of immigration and who applied for help to public welfare agencies, did so in the same year. (See Table 45.)

Among the vocationally handicapped who immigrated to Israel and who applied to public welfare agencies, 24% did so in the year of immigration and 19% applied 1-2 years after their immigration. Fifty seven percent applied three or more years after their immigration to Israel, presumably at the point when they were no longer eligible for special aid and employment available only to new immigrants.

Table 45

Vocationally handicapped immigrants who applied to public welfare agencies by time span between year of vocational crisis and year of immigration and time span between year of application to public welfare agencies and year of immigration

Application to Public welfare agencies	Total		Vocational Crisis									
			2 yrs before		1 year of		In year of		1 year after		2+ yrs after	
	n	%	Immigration									
			n	%	n	%	n	%	n	%	n	%
Total	145	100	33	100	2	-	19	100	7	100	84	100
In the year of immigration	35	24	17	52	1	-	8	42	2	29	7	8
Up to 1 year after immigration	17	12	7	21	-	-	1	5	1	14	8	9
Up to 2 years after immigration	10	7	2	6	-	-	4	21	1	14	3	4
Up to 3 years and more after immigration	83	57	7	21	1	-	6	32	3	43	66	79

F. COMPARISON OF THOSE WHO RECEIVED SERVICES WITH THOSE WHO DID NOT

Since, as we have seen above, only 48% of the vocationally handicapped were found to be receiving services in 1966, it was of interest to compare in detail the group receiving services with the group that did not, in order to determine what, if any, were the significant differences between them.

In terms of demographic characteristics (Table 46) we find that, on the whole, the recipients are more often persons over 35, immigrants from countries of Asia and Africa, and persons with no or a low elementary level of education.

Those receiving services appear to live more often in settlements established after 1948, whether rural or urban (Table 47). This may reflect the fact that the Jewish Agency and other welfare agencies render special social and medical services to immigrants. Persons not receiving services live mainly in older urban areas.

No significant differences appear with regard to physical characteristics - main diseases and functional limitations - in comparing the persons receiving services with those not receiving them (Table 48).

Large families are more likely to be receiving services than small families or persons living alone; however, the fact of being head of the household appears to have no bearing on receipt of services (Table 49).

As could be expected, those receiving services are more often not working at all than those not receiving services. However, it should be noted that even among those not receiving services as many as 55% were not working at all (Table 50). There were no great differences in work history or in the seeking of employment related to the factor of receipt of services. However, the level of occupation as well as the occupational aspirations of those not receiving services is somewhat higher than those receiving services.

Altogether, it is clear that the factors bearing on receipt of services are indicative of social class rather than economic or physical need. In order to render services to this group the agencies will have to take action to locate them rather than wait for them to apply.

Table 46

Vocationally handicapped by receipt of services and demographic characteristics

Vocationally handicapped	Total		Received services in 1966	Received services in the past but not in 1966	Never received services
	n	501	239	51	211
Total	%	100.0	100.0	100.0	100.0
a) <u>Age</u>					
14 - 17		4.8	3.4	5.9	6.2
18 - 34		21.5	18.8	37.3	20.8
35 and over		73.7	77.8	56.8	73.0
b) <u>Sex</u>					
Men		71.9	70.2	84.8	71.9
Women		28.1	29.8	15.2	28.1
c) <u>Marital status</u>					
Married		64.5	66.0	57.6	63.5
Not married		35.5	34.0	42.4	36.5
d) <u>Level of education</u>					
None		34.4	41.1	24.2	27.6
Low elementary		22.0	29.8	15.2	12.8
Partial elementary		16.0	12.5	27.3	18.7
Full elementary or vocational		17.8	12.8	24.2	23.2
Partial secondary or above		9.8	3.8	9.1	17.7
e) <u>Year of immigration</u>					
Born in Israel		17.6	12.1	24.2	23.6
Up to 1947		13.6	7.9	12.1	21.2
1948 - 1954		38.7	40.8	36.4	36.5
1955 - 1962		21.7	28.3	27.3	12.3
1963 - 1966		8.4	10.9	-	6.4
f) <u>Continent of origin</u>					
Born in Israel		17.6	12.1	21.2	24.1
Asia - Africa		55.7	72.8	48.5	34.5
Europe - America		26.7	15.1	30.3	41.4

Table 47

Vocationally handicapped by receipt of services and type of settlement

Type of Settlement	Total		Received services in 1966	Received services in the past but not in 1966	Never received services
	n	501	239	51	211
	%	100.0	100.0	100.0	100.0
Three main cities - Jerusalem, Tel-Aviv and Haifa		27.3	25.5	27.5	29.4
Urban settlements established before 1948		27.0	24.7	29.4	28.9
Urban settlements established after 1948		32.9	42.2	35.3	21.8
Rural settlements established before 1948		3.0	0.4	-	6.6
Rural settlements established after 1948		3.6	4.6	3.9	2.4
Non-Jewish settlements and not known		6.2	2.6	3.9	10.9

Table 48

Vocationally handicapped, by receipt of services and physical characteristics

Total		Received services in 1966	Received services in the past but not in 1966	Never received services
Total	n	239	51	211
	%	*)	*)	*)
a) Main diseases				
Diseases of circulatory system (incl. kidneys)	25.6	23.8	27.3	27.6
Internal and digestive diseases	12.6	11.7	6.1	14.8
Respiratory diseases	10.3	11.3	9.1	10.3
Impairment of nervous system (incl. paralysis)	9.0	9.8	9.1	7.9
Diseases of motor system, bones, muscles & knuckles	22.8	25.7	21.2	19.2
Skin diseases	2.0	2.2	-	2.0
Hernia	5.4	5.7	-	5.9
Impairment of hearing capacity and deafness	2.4	3.4	6.1	0.5
Impairment of sight and blindness	8.4	12.1	6.1	3.9
Persistent backaches	13.4	11.7	12.1	15.8
Emotional disturbances	13.6	16.6	15.1	14.3
Mentally retarded	6.4	6.4	12.1	5.4
Epilepsy	2.0	1.9	6.1	1.5
b) Functional limitations				
Mobility outside the home	22.7	30.1	3.0	19.7
Holding with palm and fingers	17.7	18.8	24.2	15.8
Gross movements	70.1	74.3	42.4	70.0
Self service	8.7	10.9	6.1	5.4
Carrying heavy loads	85.2	86.8	78.8	84.2
Quick movements	59.2	62.3	48.5	57.1
Reading	11.1	12.1	12.1	9.9
Concentration and memory	27.0	28.7	21.2	25.6

* Percentages do not total up to 100 as one person may be included in more than one category.

Table 49

Vocationally handicapped by receipt of services and family characteristics

Total		Received services in 1966	Received services in past but not in 1966	Never received services	
Total	n	501	239	51	211
	%	100.0	100.0	100.0	100.0
a) <u>Family size</u>					
	1 person	5.2	4.2	3.9	6.6
	2 persons	17.8	13.4	7.9	25.1
	3-5 persons	42.9	40.6	49.0	44.1
	6 + persons	34.1	41.8	39.2	24.2
b) <u>Family status of the handicapped person</u>					
	Household head	49.5	49.4	41.2	51.6
	Not household head	50.5	50.6	58.8	48.4

Table 50

Vocationally handicapped by receipt of services and occupational and work characteristics

		Total	Received services in 1966	Received services in the past but not in 1966	Never received services
Total	n	501	239	51	211
	%	100.0	100.0	100.0	100.0
a) <u>Current activity</u>					
	Working partially	34.9	26.8	31.4	45.0
	Not working	65.1	73.2	68.6	55.0
b) <u>Work history</u>					
	Never worked	19.6	22.3	21.2	15.8
	Worked only before the crisis	26.3	29.0	33.3	21.6
	Worked after the crisis but not at the time of the survey	19.2	20.0	33.3	15.8
	Worked at the time of the survey	34.9	28.7	12.2	46.8
c) <u>Seeking employment</u>					
	Sought employment	31.7	28.7	48.5	33.0
	Did not seek employment	61.7	63.0	45.4	62.6
	Not asked	6.6	8.3	6.1	4.4
d) <u>Level of occupation</u>					
	Professional	1.4	0.7	6.1	1.5
	Trade and clerical	11.4	7.2	6.1	17.7
	Skilled	21.0	16.2	21.2	27.1
	Unskilled	44.4	50.6	45.4	36.0
	Never worked and not known	21.8	25.3	21.2	17.7
e) <u>Occupational aspirations</u>					
	Professional	1.2	0.7	3.0	1.5
	Trade and clerical	14.4	11.3	12.1	18.7
	Skilled	14.6	15.1	24.2	12.3
	Unskilled	12.4	13.6	15.2	10.4
	Does not know	10.8	10.2	15.2	10.8
	No suitable work	24.3	30.6	18.2	17.2
	Not asked	22.3	18.5	12.1	29.1

VI. VOCATIONAL REHABILITATION PROSPECTS

Combining the information from the personal questionnaire, the written impressions of the interviewer, and the reports on assistance received from the social agencies, a professional team examined and assessed each of 421 cases in the sample.*

Reasonable prospects for rehabilitation were found for 39.1% of the sample - or an estimated total of 15,700 persons. It may be noted that the young persons studying in special educational frameworks described above (p. 23) were not interviewed personally and therefore were not assessed by the team. The assessment of this group, which may be assumed to consist mainly of persons with reasonable prospects for rehabilitation would probably have increased considerably the estimate of potential clients for rehabilitation.

Two Categories were defined among those with reasonable prospects for rehabilitation. They are:

- 26.3% - about 10,600 persons with reasonable prospects under regular working conditions, (Vocational Rehabilitation Category 1), and
- 12.8% - about 5,100 persons with reasonable prospects under special working conditions (Vocational Rehabilitation Category 2).

Poor prospects for rehabilitation were assessed for 51.5% of the sample, or an estimated 20,700 vocationally handicapped persons. This is composed of two Categories, as follows:

- 22.6% - about 9,100 persons who are in such poor physical and/or mental condition that they have only poor prospects of benefitting from a vocational rehabilitation program (Vocational Rehabilitation Category 3); and

* Not assessed were 34 persons professionally diagnosed previously as mentally ill and 46 married women; see chapter on Methodology, p. 121 for discussion of procedure.

28.9% - about 11,600 persons who are unlikely to benefit from vocational rehabilitation programs because their present activity appears to be the most that can be expected of them within the limits of their physical and mental capacities (Vocational Rehabilitation Category 4).

The remaining 9.4% consist of 34 persons diagnosed as mentally ill and 13 cases in which the team reached no decision. The 46 married women who were not assessed were however included in the estimate of the scope; they were distributed among the four Categories in the same proportion as the total of the assessed population.

It is interesting to note that except in cases of mental retardation and epilepsy no significant statistical correlation was found between any one specific disease and the assessment made of rehabilitation prospects. There was, however, a correlation between specific functional limitations and rehabilitation prospects. But above all it was the combination of medical and non-medical (age, level of education, work experience, etc.) factors that determined the team's decision.

FIGURE 15

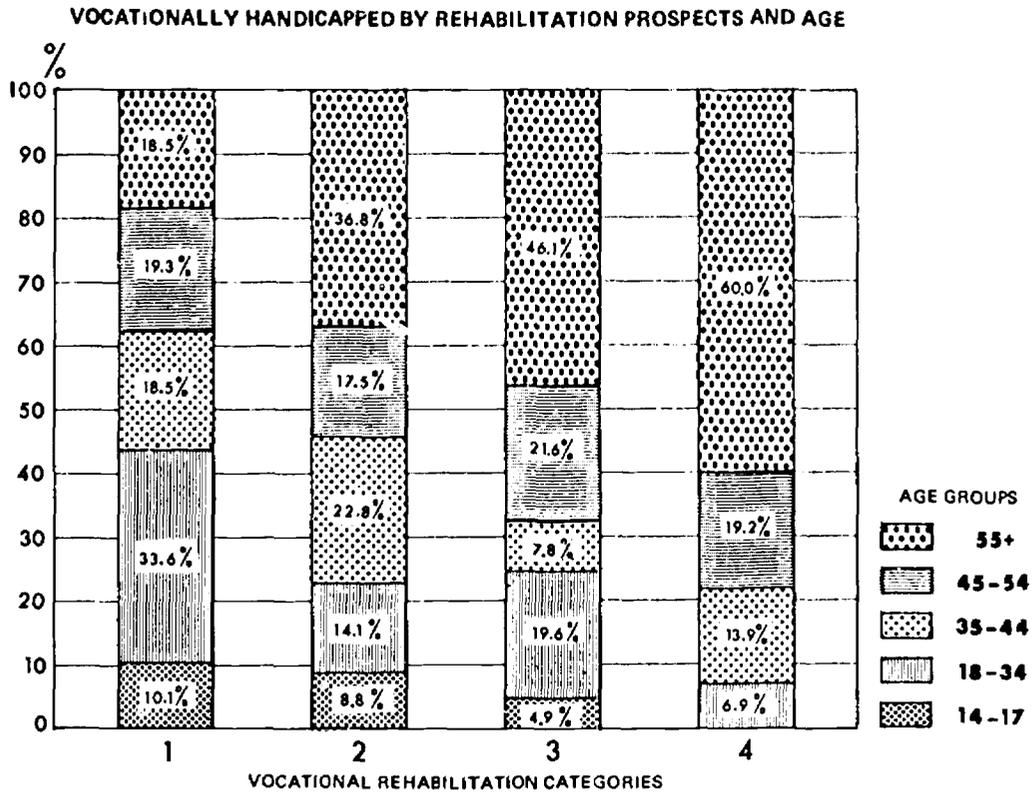
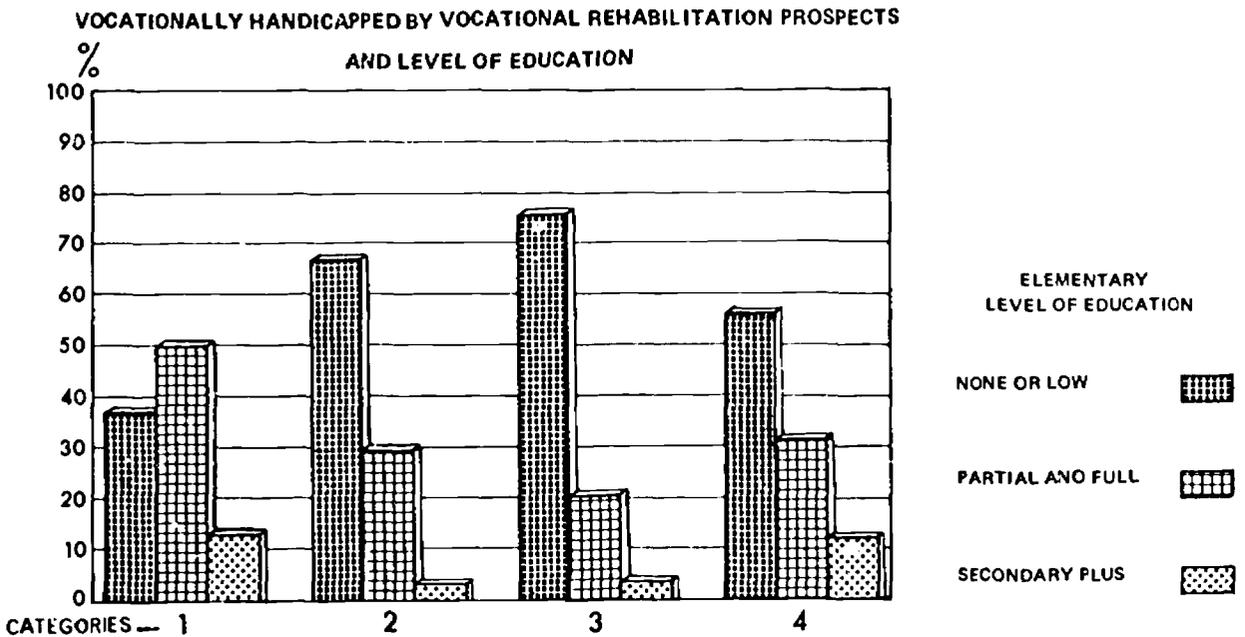


FIGURE 16



A. VOCATIONAL REHABILITATION CATEGORY 1

Demographic characteristics

Although there are persons of all ages in this Category, it consists largely of persons in the working age groups of 18-54 with a relatively high proportion in the 18-34 cohort. Half of all the 14-17 year olds are in this Category; as the age level increases the percent of persons in each age group in Category 1 decreases (Table 51a).

Persons in Category 1 have the highest level of education in relation to all others. However there are persons of all levels of education and, surprisingly, the proportion of persons with secondary or higher education in this Category, though high, is not outstanding (Table 52).

A relatively high proportion of persons in this Category were born in Israel but there is considerable representation from immigrants of all periods (Table 53). In type of settlement, this Category does not differ from the general distribution of all the vocationally handicapped (Table 54).

Physical characteristics

There is no significant difference in the incidence of main diseases between Category 1 and the vocationally handicapped in general, but their functional limitations are fewer in each one of the limitations classed. Limitations with regard to gross movements, i. e. bending, prolonged sitting and standing, and with regard to reading and concentration and memory are markedly less than those among all other groups (Table 55, 56).

Social and occupational characteristics: receipt of services

Vocational Rehabilitation Category 1 is comprised to a large extent of persons with very large families of six or more persons (Table 57b). The pattern of current activity and work activity does not differ much from that of the total vocationally handicapped (Table 58 a,b). However, in contrast to the other Categories,

most of the persons in Category 1 are seeking employment - a clear indication that they themselves believe in their capacity to increase their work activity (Table 58c).

In level of occupation, Category 1 differs from the vocationally handicapped as a whole only inasmuch as it includes a higher proportion in the skilled occupation level and a lower proportion of those who never worked. (Table 59a). Occupational aspirations show relatively large groups aspiring to professional and trade and clerical as well as skilled occupations, denoting a tendency to seek improvement on the part of these people. (Table 59b).

Category 1 received a lower proportion of services in 1966 than the vocationally handicapped in general but it had a relatively large proportion of persons who had received services before 1966. The main type of service extended to persons in Category 1, as for all others, was financial assistance. In addition, a fairly large proportion - close to one-fourth - were given job placement and/or vocational training. However a much smaller percentage had had a comprehensive diagnosis of their capabilities which is a prerequisite for planned vocational rehabilitation. (Table 61).

B. VOCATIONAL REHABILITATION CATEGORY 2

Demographic characteristics

In comparison with Category 1, Category 2 is composed of a much larger proportion of persons 55 years and over (Table 51a). In level of education it is much lower than Category 1 and lower than the vocationally handicapped in general (Table 52).

Length of stay in Israel as designated by year of immigration shows that Category 2 includes a relatively large proportion of the newer immigrants. (Table 53). They are however mainly settled in the older urban areas. (Table 54).

Physical characteristics

On the whole there are few differences in main diseases among Category 2 in comparison with the total vocationally handicapped. There is however a higher proportion of persons with impairment of the nervous system and a higher proportion of the mentally retarded in this Category. (Table 55). In functional limitations they are quite similar to the vocationally handicapped as a whole. (Table 56).

Social and occupational characteristics; receipt of services

Category 2 is even more than Category 1 comprised largely of persons from very large families (Table 57b). A very high proportion were not working at the time of the survey, as compared with Category 1 or the vocationally handicapped in general. (Table 58b). However a large proportion had worked after the vocational crisis though not at the time of the survey. (Table 58a). Compared to all the vocationally handicapped a large proportion were seeking employment, although not so large as the proportion seeking employment in Category 1. (Table 58c).

Occupationally they are primarily unskilled workers. (Table 59a). Some proportion of them do aspire however to trade and clerical and skilled occupations. (Table 59b).

The large majority of persons in Category 2 were receiving services in 1966. They were the main recipients of all types of services - financial, diagnostic and vocational. In this Category as well as in Category 1, the proportion of persons receiving placement and training services exceeded those who had a comprehensive diagnosis. (Table 61).

C. VOCATIONAL REHABILITATION CATEGORY 3

Demographic characteristics

In age composition Category 3 shows a preponderance of older persons 45 years and older, and a very large group 55 and older - considerably older than Category 2 (Table 51a). Level of education is lower than that of any other Category (Table 52).

They are not significantly different from the general vocationally handicapped population in year of immigration (Table 53); but a relatively large proportion are settled in urban areas established after 1948. (Table 54).

Physical characteristics

Compared with Categories 1 and 2, there is a high proportion of mental retardation among Category 3 as well as a higher proportion of diseases of the circulatory system. (Table 55). The incidence of functional limitations of all types is higher than for any other Category. (Table 56).

Social and occupational characteristics; receipt of services

There is a very large proportion of persons living alone in Category 3 and over half of the persons living alone are found in this Category. (Table 57b). No one in this Category was working at the time of the survey. (Table 58b). Very large proportions of persons in Category 3 had never worked or had worked only before the vocational crisis. (Table 58a). They were generally not seeking employment. (Table 58c).

With a large proportion who had never worked at any level of occupation, the largest group who had worked were at an unskilled level. There were however some at a skilled level of occupation. (Table 59a). Most important however is the fact that by far the large majority - more than in any other Category - could not think of any suitable work for themselves. (Table 59b).

A relatively large proportion, though not as large as in Category 2, were receiving services in 1966. Services were more concentrated in the areas of financial assistance, and in medical diagnosis only. (Table 61).

D. VOCATIONAL REHABILITATION CATEGORY 4

Demographic characteristics

Category 4 is the oldest in age composition of all the Categories. It is predominantly composed of persons 55 and over; of the total of persons 55 and over the largest proportion are in Category 4. (Table 51a). It does not differ greatly from the vocationally handicapped as a whole in level of education, however the proportion of persons with secondary or higher education is relatively high. (Table 52). The largest proportion of persons with secondary or higher education is in Category 4.

It contains a relatively large number of persons who immigrated before 1948. (Table 53).

Physical characteristics

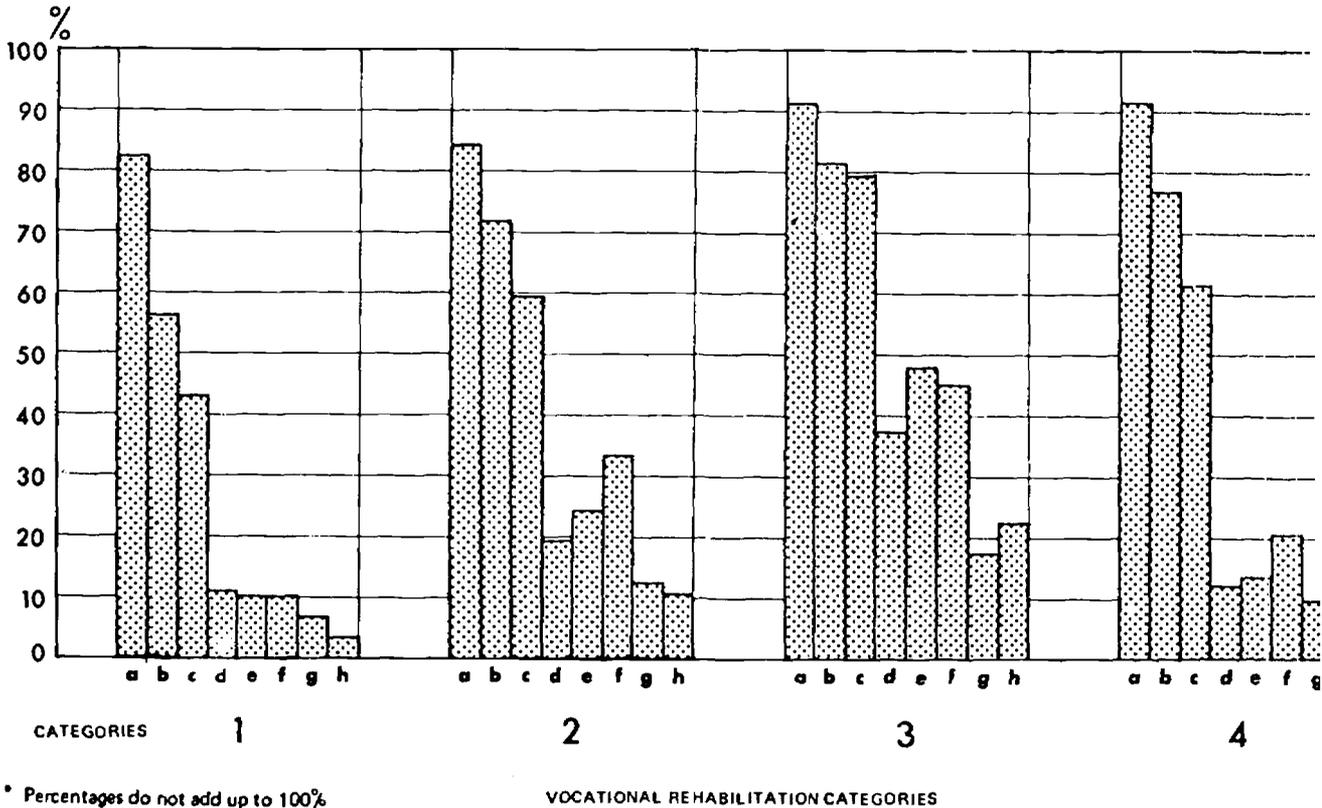
Apart from somewhat higher prevalence of diseases of the circulatory system, respiratory diseases and persistent backaches, there is no significant difference in main diseases between Category 4 and all vocationally handicapped. Functional limitations are generally less with the exception of limitations in lifting and carrying heavy objects and gross movements.

Social and occupational characteristics; receipt of services

Category 4 is close to the general average in family composition (Table 57b). In contrast to all other Categories, the large majority are working partially (Table 58b). The large majority were not seeking employment or additional employment. (Table 58c).

FIGURE 17

VOCATIONALLY HANDICAPPED BY VOCATIONALLY REHABILITATION CATEGORIES AND FUNCTIONAL LIMITATIONS



FUNCTIONAL LIMITATIONS			
LIFTING & CARRYING	- a	OUTDOOR ACTIVITIES	- e
GROSS MOVEMENTS	- b	CONCENTRATION & MEMORY	- f
QUICK MOVEMENTS	- c	READING	- g
HOLDING WITH PALM & FINGERS	- d	SELF SERVICE	- h

Level of occupation was mainly unskilled with however some skilled and a relatively large group in trade and clerical occupations. Of all persons in trade and clerical occupations, the largest group were in Category 4 (Table 59a). Occupational aspirations are not significantly higher than current occupational levels. (Table 59b).

A relatively large proportion in Category 4 have never received any services. However, compared to other Categories, persons in Category 4 received the highest proportion of placements in sheltered work and in the establishment of self-owned businesses. (Table 61).

Table 51a*

Vocationally handicapped by rehabilitation categories and age

		Vocational rehabilitation categories						
		Total	1	2	3	4	No decision	Not assessed
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
14-17 yrs.		4.8	10.1	8.8	4.9	-	15.4	-
18-34		21.6	33.6	14.1	19.6	6.9	53.8	30.0
35-44		16.1	18.5	22.8	7.8	13.9	-	25.0
45-54		21.6	19.3	17.5	21.6	19.2	15.4	32.5
55+		35.9	18.5	36.8	46.1	60.0	15.4	12.5
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
14-17 yrs.	24	100.0	50.0	20.8	20.8	-	8.4	-
18-34	108	100.0	37.1	7.4	18.5	8.3	6.5	22.2
35-44	81	100.0	27.1	16.1	9.9	22.2	-	24.7
45-54	108	100.0	21.3	9.2	20.4	23.1	1.9	24.1
55+	180	100.0	12.2	11.7	26.1	43.3	1.1	5.6

* In all of the Tables on rehabilitation categories, the percentages are presented both vertically and horizontally in order to facilitate analysis from both points of view.

Table 51 b,c

Vocationally handicapped by vocational rehabilitation categories
and sex and marital status

		Total	Vocational rehabilitation categories					No decision	Not assessed
			1	2	3	4			
b) <u>Sex</u>									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Men		71.9	82.4	78.9	65.7	89.2	84.6	28.8	
Women		28.1	17.6	21.1	34.3	10.8	15.4	71.2	
	n	%							
Total	501	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
Men	360	100.0	27.2	12.5	18.6	32.2	3.1	6.4	
Women	141	100.0	14.9	8.5	24.8	9.9	1.5	40.4	
c) <u>Marital status</u>									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Married		64.5	56.3	64.9	45.1	83.8	38.5	73.7	
Not married		35.5	43.7	35.1	54.9	16.2	61.5	26.3	
	n	%							
Total	501	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
Married	323	100.0	20.7	11.5	14.2	33.7	1.6	18.3	
Not married	178	100.0	29.2	11.2	31.5	11.8	4.5	11.8	

Table 52

Vocationally handicapped by rehabilitation categories and level of education

Level of education	Total		Vocational rehabilitation categories					
			1	2	3	4	No decision	Not assessed
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
No and low elementary		56.4	37.0	66.7	75.5	56.2	23.1	60.0
Partial elementary		16.0	16.8	14.0	12.8	17.7	46.1	12.5
Full elementary & vocational		17.8	33.6	15.8	7.8	13.8	23.1	13.7
Secondary or above		9.8	12.6	3.5	3.9	12.3	7.7	13.8
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
None	173	100.0	12.7	12.1	33.5	24.3	1.2	16.2
Low elementary	110	100.0	20.0	15.4	17.3	28.2	0.9	18.2
Partial elementary	80	100.0	25.0	10.0	16.3	28.7	7.5	12.5
Full elementary equivalent vocational	89	100.0	44.9	10.1	9.0	20.2	3.4	12.4
Partial secondary	17	100.0	47.1	5.9	5.9	23.5	-	17.6
Secondary or above	32	100.0	21.9	3.1	9.4	37.5	3.1	25.0

Table 53

Vocationally handicapped by rehabilitation categories and year of immigration

Year of Immigration	Total	Vocational rehabilitation categories					No decision	
		1	2	3	4			
Total	n %	501 100.0	119 100.0	57 100.0	102 100.0	130 100.0	13 100.0	100.0
Born in Israel		17.6	25.2	17.5	17.6	10.0	53.8	12.5
Immigrated: Up to 1947		13.6	13.5	5.3	7.9	23.1	7.7	12.5
1948 - 1954		38.7	31.9	36.8	44.1	40.8	23.1	42.5
1955 - 1962		21.7	21.0	24.6	22.5	21.5	15.4	21.2
1963 - 1966		8.4	8.4	15.8	7.9	4.6	-	11.3
	n %							
Total	501 100.0		23.7	11.4	20.4	25.9	2.6	16.0
Born in Israel	88	100.0	34.1	11.4	20.4	14.8	7.9	11.4
Immigrated: Up to 1947	68	100.0	23.5	4.4	11.8	44.1	1.5	14.7
1948 - 1954	194	100.0	19.6	10.8	23.2	27.3	1.6	17.5
1955 - 1962	109	100.0	22.9	12.9	21.1	25.7	1.8	15.6
1963 - 1966	42	100.0	23.8	21.4	19.1	14.3	-	21.4

Table 54

Vocationally handicapped by rehabilitation categories and type of settlement

Type of settlement	Total		Vocational rehabilitation categories					No decision	Not assessed
			1	2	3	4			
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Jerusalem, Tel-Aviv and Haifa		27.3	29.4	24.6	24.5	30.8	30.8	23.7	
Other urban settlements established before 1948		27.0	26.1	42.1	18.6	23.1	38.4	32.5	
Urban settlements established after 1948		32.9	31.9	21.0	44.1	30.0	7.7	37.5	
Rural settlements established before 1948		3.0	-	7.0	1.0	6.1	-	2.5	
Rural settlements established after 1948		3.6	6.7	-	3.0	4.6	-	1.3	
Non-Jewish settlements		6.2	5.9	5.3	8.8	5.4	23.1	2.5	
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Jerusalem, Tel-Aviv & Haifa	137	100.0	25.6	10.2	18.2	29.2	2.9	13.9	
Other urban settlements established before 1948	135	100.0	23.0	17.8	14.1	22.2	3.7	19.2	
Urban settl. est. after 1948	165	100.0	23.0	7.3	27.3	23.6	0.6	18.2	
Rural settl. est. before 1948	15	100.0	-	26.7	6.7	53.3	-	13.3	
Rural settl. est. after 1948	18	100.0	44.4	-	16.7	33.3	-	5.6	
Non-Jewish settlements	31	100.0	22.6	9.7	29.0	22.6	9.7	6.4	

Table 55a

Vocationally handicapped by rehabilitation categories and type of main diseases

Type of main diseases	Total	Vocational rehabilitation categories						
		1	2	3	4	No decision	Not assessed	
Total	n %	501	119	57	102	130	13	80
Diseases of the circulatory system (including kidneys)	25.6	21.0	26.3	30.4	32.3	23.1	15.0	
Internal and digestive diseases	12.6	11.7	14.0	16.6	12.3	15.4	7.5	
Respiratory diseases	10.8	10.1	8.8	10.8	15.4	7.7	6.2	
Impairment of the nervous system (including paralysis)	9.0	3.4	12.3	16.6	9.2	15.4	3.7	
Diseases of the motor system, bones, muscles and knuckles	22.8	31.1	29.8	22.5	20.7	15.4	10.0	
Skin diseases	2.0	1.7	-	2.9	1.5	-	3.7	
Hernia	5.4	6.7	5.3	3.9	7.7	7.7	1.2	
Impairment of hearing capacity & deafness	2.4	1.7	1.7	1.9	3.1	7.7	2.5	
Impairment of sight and blindness	8.4	6.7	7.0	11.8	6.9	7.7	10.0	
Persistent backaches	13.4	15.1	7.0	15.7	18.5	-	6.3	
Emotional disturbances	13.6	8.4	7.0	10.8	3.8	7.7	46.3	
Mentally retarded	6.4	0.8	10.5	19.6	1.5	15.3	1.2	
Epilepsy	2.0	-	3.5	6.9	-	7.7	-	
No diseases	3.4	5.0	1.7	3.9	3.1	7.7	1.2	

* Percentages do not add up to 100 as one person often suffers from more than one disease.

Table 55b
Vocationally handicapped by rehabilitation categories
and type of main diseases

Type of Main Disease	Total		1	2	3	4	No Decision	A
	n	%						
Disease of the circulatory system (Including kidneys)	128	100.0	19.5	11.7	24.2	32.8	2.4	
Internal digestive diseases	63	100.0	22.2	12.7	27.0	25.4	3.2	
Respiratory diseases	54	100.0	22.2	9.3	20.4	37.0	1.8	
Impairment of nervous system (Including paralysis)	45	100.0	8.9	15.5	37.8	26.7	4.4	
Disease of motor system, bones, muscles and knuckles	114	100.0	32.4	14.9	20.2	23.7	1.8	
Skin diseases	10	100.0	20.0	-	30.0	20.0	-	
Hernia	27	100.0	29.7	11.1	14.8	37.0	3.7	
Impairment of hearing capacity and deafness	12	100.0	16.7	8.3	16.7	33.3	8.3	1
Impairment of sight and blindness	42	100.0	19.0	9.6	28.6	21.4	2.4	1
Persistent backaches	67	100.0	26.8	6.0	23.9	35.8	-	
Emotional disturbances	68	100.0	14.7	5.9	16.2	7.3	1.5	5
Mentally retarded	32	100.0	3.1	18.7	62.5	6.3	6.3	
Epilepsy	10	100.0	-	20.0	70.0	-	10.0	
No disease	17	100.0	35.3	5.9	23.5	23.5	5.9	

Table 56

Vocationally handicapped, by rehabilitation categories and functional limitations

Functional limitations	Total	Vocational rehabilitation categories					
		1	2	3	4	No decision	Not assessed
Total	n 501	119	57	102	130	13	80
	% *						
Mobility outside the home	22.8	10.1	24.6	48.0	13.8	23.1	22.5
Holding with palm of hand or fingers	17.8	10.9	19.3	37.3	12.3	7.7	12.5
Gross movements	70.1	56.3	71.9	81.4	76.9	61.5	65.0
Self-service	8.8	3.4	10.5	22.5	3.1	7.7	7.5
Carrying heavy loads	85.2	82.4	84.2	91.2	91.5	61.5	76.2
Quick movements	59.3	42.9	59.6	79.4	61.5	53.8	55.0
Reading	11.2	6.8	12.3	17.6	10.0	15.4	10.0
Concentration and memory	26.9	10.1	33.3	45.1	20.8	15.4	36.2
	n %						
Total	501 100.0	23.7	11.4	20.4	25.9	2.6	16.0
Mobility outside the home	114 100.0	10.5	12.3	43.0	15.8	2.6	15.8
Holding with palm of hand and fingers	89 100.0	14.6	12.4	42.7	17.9	1.2	11.2
Gross movements	351 100.0	19.1	11.7	23.6	28.5	2.3	14.8
Self-service	44 100.0	9.1	13.6	52.3	9.1	2.3	13.6
Carrying heavy loads	427 100.0	22.9	11.2	21.8	27.9	1.9	14.3
Quick movements	297 100.0	17.2	11.4	27.3	26.9	2.4	14.8
Reading	56 100.0	14.3	12.5	32.1	23.2	3.6	14.3
Concentration and memory	135 100.0	8.9	14.1	34.1	20.0	1.4	21.5

* Percentages do not add up to 100 as one person may suffer from more than one functional limitation.

Table 57 a, b

Vocationally handicapped, by rehabilitation categories and family characteristics

		Total	Vocational rehabilitation categories					No decision	Not assessed
			1	2	3	4			
a) Family status of the handicapped person									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Head of household		49.5	55.5	47.4	34.3	85.4	38.5	5.0	
Not head of household		50.5	44.5	52.6	65.7	14.6	61.5	95.0	
	n	%							
Total	501	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
Head of household	248	100.0	26.6	10.9	14.1	44.8	2.0	1.6	
Not head of household	253	100.0	20.9	11.9	26.5	7.5	3.2	30.0	
b) Family size									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
1 person		5.2	2.5	1.7	14.7	5.4	-	-	
2 persons		17.8	12.6	12.3	20.6	25.4	7.7	15.0	
3 "		14.6	12.6	10.5	14.7	15.4	23.1	17.5	
4 "		17.4	17.6	10.5	19.6	17.7	15.4	18.8	
6 "		11.0	14.3	8.8	8.8	10.7	7.7	11.2	
6 or more persons		34.0	40.4	56.2	21.6	25.4	46.1	37.5	
	n	%							
Total	501	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
1 person	26	100.0	11.5	3.8	57.7	27.0	-	-	
2 persons	89	100.0	16.8	7.9	23.6	37.1	1.1	13.5	
3 "	73	100.0	20.5	8.2	20.5	27.4	4.1	19.3	
4 "	87	100.0	24.1	6.9	23.0	26.4	2.3	17.3	
5 "	55	100.0	30.9	9.1	16.4	25.4	1.8	16.4	
6 or more persons	171	100.0	28.1	18.7	12.9	19.3	3.5	17.5	

Table 58 a

Vocationally handicapped by rehabilitation categories and work history

Work history	Total	Vocational rehabilitation categories						
		1	2	3	4	No decision	Not assessed	
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Never worked		19.6	10.1	21.0	38.2	2.3	30.7	35.0
Worked only before crisis		26.3	35.3	28.1	37.3	9.2	38.5	23.7
Worked after crisis but not at time of survey		19.2	20.2	35.1	22.5	3.9	23.1	26.3
Worked partially at time of survey		34.9	34.4	15.8	2.0	84.6	7.7	15.0
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Never worked		98	12.2	12.2	39.8	3.1	4.1	28.6
Worked only before crisis		132	31.8	12.1	28.8	9.1	3.8	14.4
Worked after crisis but not at time of survey		96	25.0	20.8	24.0	5.2	3.1	21.9
Worked partially at time of survey		175	23.4	5.1	1.1	62.9	0.6	6.9

Table 58 b, c
 Vocationally handicapped by rehabilitation categories and current
 and job-seeking activity

		Total	Vocational rehabilitation categories					No decision	Not assessed
			1	2	3	4			
b) Current activity									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Working partially		34.9	35.3	19.3	-	83.8	15.4	12.5	
Not working		65.1	64.7	80.7	100	16.2	84.6	87.5	
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0	
	%	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
Working partially		175	24.0	6.3	-	62.9	1.1	5.7	
Not working		326	23.6	14.1	31.6	5.8	3.4	21.5	
c) Seeking employment									
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Seeking employment		31.7	53.8	42.1	17.7	20.8	61.5	22.5	
Not seeking employment		61.7	45.4	56.1	77.4	73.1	38.5	55.0	
Not asked		6.6	0.8	1.8	4.9	6.1	-	22.5	
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0	
	%	100.0	23.7	11.4	20.4	25.9	2.6	16.0	
Seeking employment		159	40.3	15.1	11.4	16.9	5.0	11.3	
Not seeking employment		309	17.5	10.4	25.6	30.7	1.6	14.2	
Not asked		33	3.0	3.0	15.2	24.2	-	54.6	

Table 59 a

Vocationally handicapped by rehabilitation categories and occupational level

Level of occupation	Total	Vocational rehabilitation categories						
		1	2	3	4	No decision	Not assessed	
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Professional	1.4	1.7	1.8	-	1.5	-	2.5	
Trade & clerical	11.4	12.6	7.0	5.9	17.7	23.1	7.5	
Skilled	20.9	34.5	7.0	17.7	23.1	23.1	11.2	
Unskilled	44.3	40.3	57.9	34.3	55.4	23.1	38.8	
Housework	0.6	-	-	-	-	-	3.7	
Never worked	19.6	10.1	21.0	38.2	2.3	30.7	35.0	
Unknown	1.8	0.8	5.3	3.9	-	-	1.3	
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Professional	7	100.0	28.6	14.2	-	28.6	-	28.6
Trade & clerical	57	100.0	26.3	7.0	10.5	40.4	5.3	10.5
Skilled	105	100.0	39.0	3.8	17.1	28.6	2.9	8.6
Unskilled	222	100.0	21.6	14.9	15.8	32.4	1.3	14.0
Housework	3	100.0	-	-	-	-	-	100.0
Never worked	98	100.0	12.2	12.2	39.8	3.1	4.1	28.6
Unknown	9	100.0	11.1	33.3	44.5	-	-	11.1

Table 59 b
 Vocationally handicapped by rehabilitation categories
 and occupational aspirations

Occupational aspirations*		Total	Vocational rehabilitation categories						
			1	2	3	4	No decision	Not assessed	
Total	n	501	119	57	102	130	13	80	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Professional		0.8	1.7	-	-	0.7	-	1.3	
Trade & clerical		17.7	27.8	21.1	5.8	20.0	23.1	11.2	
Skilled		18.8	31.1	14.0	6.9	20.8	23.1	15.0	
Unskilled		22.2	17.6	24.6	6.9	47.7	7.7	7.5	
Does not know and no suitable work		40.5	21.8	40.3	80.4	10.8	46.1	65.0	
Total	n	501	23.7	11.4	20.4	25.9	2.6	16.0	
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0	
Professional		4	100.0	50.0	-	-	25.0	-	25.0
Trade & clerical		89	100.0	37.1	13.5	6.7	29.2	3.4	10.1
Skilled		94	100.0	39.3	8.5	7.5	28.7	3.2	12.8
Unskilled		111	100.0	18.9	12.6	6.3	55.9	0.9	5.4
Does not know and no suitable work		203	100.0	12.8	11.3	40.4	6.9	3.0	25.6

* Among the working partially, persons who stated that they were not interested in additional work were not asked about aspirations and were entered in the same level of occupation in which they were employed.

Table 60

Vocationally handicapped by rehabilitation categories and receipt of services

Receipt of services	Total	Vocational rehabilitation categories						
		1	2	3	4	No decision	Not assessed	
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
Received services in 1966		47.7	39.5	70.2	60.8	36.9	15.4	50.0
Did not receive in 1966 but received previously		10.2	18.5	5.3	8.8	7.7	7.7	7.5
Never received services		42.1	42.0	24.5	30.4	55.4	76.9	42.5
Total	n							
	%							
			23.7	11.4	20.4	25.9	2.6	16.0
Received services in 1966	239	100.0	19.7	16.7	26.0	20.1	0.8	16.7
Did not receive in 1966 but received previously	51	100.0	43.1	5.9	17.6	19.6	2.0	11.8
Never received services	211	100.0	23.7	6.6	14.7	34.1	4.8	16.1

Table 61
Vocationally handicapped by rehabilitation categories
and type of services rendered

Type of services rendered	Total	Vocational rehabilitation categories						
		1	2	3	4	No decision	Not assessed	
Total	n	501	119	57	102	130	13	80
	%	100.0	100.0	100.0	100.0	100.0	100.0	100.0
<u>Indirect financial assistance</u>		54.1	49.6	73.7	69.6	40.8	15.4	55.0
For medical purposes		43.7	39.5	63.2	58.8	29.2	7.7	46.3
For other specific purposes		41.3	34.5	56.1	51.9	32.3	15.4	46.3
<u>Direct financial assistance</u>		42.0	41.2	59.6	53.9	30.8	15.4	36.2
Regular monthly support		33.7	33.6	52.6	42.2	22.3	15.4	31.3
Occasional support		8.8	9.2	15.8	10.8	6.1	-	6.3
Grants		16.0	16.8	15.8	18.6	13.1	-	18.8
Loans		4.2	5.9	1.8	1.9	7.6	-	1.3
<u>Diagnostic services</u>		41.0	42.9	61.4	51.0	28.5	23.1	33.7
Medical diagnosis only		34.3	30.2	50.8	43.1	26.9	15.4	32.5
Physical diagnosis "		0.8	2.5	-	-	-	-	1.3
Comprehensive diag.		5.8	10.1	10.5	7.8	1.5	7.7	-
<u>Attempts at vocational rehabilitation</u>		17.0	23.0	28.1	10.8	19.2	7.7	5.0
In regular work		6.3	7.6	12.3	4.9	5.4	-	5.0
In sheltered work		5.8	5.9	14.0	2.9	8.5	-	-
In own business		5.2	6.7	5.3	2.9	7.6	7.7	1.3
Vocational training		3.4	8.4	5.3	2.9	0.7	-	-

VII. METHODOLOGY

The ultimate aim of this study was to estimate and describe the population of persons who have long-term disorders or impairments which substantially handicap them in their principal activity, and who appear likely to improve their capacity if rehabilitation services are provided. In order to obtain a representative sample of this population, the research was designed in three phases:

- A. Phase 1: the aims of the first phase were -
- a) to estimate the number of vocationally handicapped persons in Israel under the definitions of this study;
 - b) to compare the main characteristics of the vocationally handicapped with the general comparable population;
 - c) to identify a sample of the vocationally handicapped for detailed investigation.

In order to obtain a nation-wide sample of the vocationally handicapped population, special questions were added to five successive quarterly labor force surveys conducted by the Central Bureau of Statistics, starting in October 1965 and throughout the year 1966.*

In each of these quarterly regular surveys about 6,000 families, i. e. 1.0% of the total population are interviewed in their homes. The sample for the survey is drawn up as follows:

Lists of polling stations are obtained annually from the Ministry of Interior, and from each polling station chosen, a sample of families is selected. Special provisions are made to obtain adequate representation of families belonging to the following groupings: families without a member on the voting register; families

* See pp. 135-136 for text of labor force survey questionnaire and added questions.

living in a kibbutz or moshav, non-Jewish community, or closed institutions. The surveyed polling stations are rotated by the successive elimination of one third of the previously included polling stations and their replacement by new stations. Each polling station is included in three consecutive quarters.

The Central Bureau of Statistics agreed, for the purposes of this study, to add special questions designed to identify those members of the interviewed families who were not performing the principal activity expected for their age, sex and marital group and who claimed that they have a handicap or disease which prevents them from doing so.

Under the usual procedure the interviewer for the labour force survey visits the home and interviews only one family member who serves as the informant regarding each member and regarding the family as a unit. The informant is chosen according to the following priority: the household head; in his absence - his spouse; in her absence - any household member 14 years old or more, who happens to be at home.

However, because the definition of a vocationally handicapped person in this study involved a subjective element of self-evaluation, namely, the claim of a person that he has a handicap which prevents him from performing his principal activity, it was important to interview the relevant family member personally. Therefore, the following procedure was established: The interviewer of the Central Bureau of Statistics visited the home of the family and asked, as usual, one of the family members all the questions in the questionnaire, except the last additional question. The interviewer then could identify those family members who did not perform or performed only partially the principal activity expected of their age-sex-marital group. He then repeated the interview with these specific persons, adding the last question. If the relevant family member was not at home, the interviewer revisited the home up to three times in an effort to carry out this personal interview. When a person answered this last question in the affirmative, he was classified as vocationally handicapped and included in the sample population of this study.

The special procedure described above was tried out in a pretest administered to 100 families before it was actually put into effect.

The labour force survey thus identified a representative sample of the vocationally handicapped. It comprised 535 persons from among 8,000 different families covered in the period surveyed. However, because of the definitions and procedures used in the survey:

- 1) Adults in resident institutions for a year or more are excluded entirely.
- 2) Youngsters aged 14-17 enrolled in special classes, schools or other frameworks (for the physically disabled, emotionally disturbed, mentally retarded, etc.) though not able to perform adequately as students, could not be identified by the labor force survey because they actually do study full-time and are so reported in the labor force survey.

Therefore, information regarding the scope of this group of vocationally handicapped youth was obtained by means of a special supplementary survey. A list of schools and special classes for the handicapped and disabled was obtained from the Ministry of Education and the Ministry of Welfare and questionnaires were sent to all the educational frameworks included in this list.*

By this means it was possible to locate a total of 4,540 young persons studying in special frameworks for the handicapped. (The types of frameworks as well as the numbers of people in each type were described above on pp. 23-24). This group was added to the total estimate of the scope of the vocationally handicapped. It was not included in other aspects of the analysis and no assessment was made of rehabilitation prospects because these persons were not interviewed individually.

- 3) Women are under-represented in the sample because of the procedure adopted in the supplementary questions to the labor force survey. Question No. 24 in the schedule asked, in the case of a person who did not work or worked only partially in the previous 12 months, whether he: studied, or did housework, or was

abroad, or was in military service during this period. Only if the answer to all of these alternatives was in the negative was the relevant individual sought out and asked the last question, Question No. 25, the answer to which then determined whether he was included in the sample for this study.

Thus women who may have had a disability which prevented them from working or studying but who managed to help even minimally in the home, were excluded from the sample. Only those who could not manage even to do housework were included.

In order to get some idea of the possible scope of the vocationally handicapped women who were excluded from the sample because of this procedure, the Central Bureau of Statistics, at our request, analyzed the information in the questionnaires of persons who, in answer to Question No. 24 stated that they performed housework. On the basis of the figures obtained in this analysis it is estimated that, in order to correct for this factor, about 800-1,000 women should be added to the total population of the vocationally handicapped.

Each of the persons located by the labor force survey for the sample of the vocationally handicapped was visited again by interviewers from the Central Bureau of Statistics in order to explain the purposes of the study of the vocationally handicapped and to obtain his explicit permission to be included in the study under the auspices of the National Rehabilitation Council. This is in accordance with the law of secrecy with regard to data gathered by the Central Bureau of Statistics. A person who agreed to be included in the study and to be interviewed by a rehabilitation specialist for the purpose of this study was then asked the language he preferred for the interview and the time most convenient for him. Each person who gave his permission was sent a letter from the Chairman of the National Rehabilitation Council thanking him for his cooperation and setting a date for the visit of the rehabilitation specialist.

Virtually all (97%) of the persons in the sample gave their permission to be included in the study.

B. Phase 2: The aims of this phase were -

- a) to obtain information on the demographic, social, physical and occupational characteristics of each one of the vocationally handicapped;
- b) to obtain information on the social and rehabilitation services rendered to the individual vocationally handicapped person.

Efforts were made to contact all the vocationally handicapped identified in Phase 1 who gave their explicit permission to be interviewed by rehabilitation specialists. Vocationally handicapped persons who were not found at home, were revisited in their homes up to three times. As a result of these efforts, 90%, i. e. 501 out of the 533 vocationally handicapped who gave their permission to be included in the study, were interviewed. Efforts were also made to interview each person in the language he preferred.

The interviews were conducted by six experienced social workers, specialists in the field of vocational rehabilitation, among them one who was especially appointed to interview Arab families. All interviewers received special training and were also given written directives.

The questionnaire used in Phase 2 was designed to elicit both objective information and subjective evaluation of the interviewee.* It covered five principal areas:

1. Socio-economic information on the past and the present - such as family status and composition, housing conditions, education, work history, current activity, job-seeking activity, occupational aspirations.
2. Social service agencies contacted and services received.
3. Events and conditions leading to the vocational crisis.

* See pp. 138-145 for text of the questionnaire.

4. Health information - i. e., state of health with special reference to long term diseases or impairments, their nature, severity and course; functional capacity; medical care. This part of the questionnaire was prepared by a physician experienced in research methods. It was based to some extent on questionnaires used in the U.S., England and Israel for surveys on health conducted without physical examinations.

5. Impressions of the interviewer, i. e., obvious prominent defects of the interviewee, estimate of his comprehension, degree of cooperation.

The questionnaire was pretested with 50 persons with characteristics similar to those of the vocationally handicapped in the sample.

Following a statement by an interviewee that he had applied for, was receiving, or had in the past received social services, the stipulated agencies were visited in order to obtain details on:*

- 1) medical or health data;
- 2) diagnostic information;
- 3) vocational training;
- 4) work placement, placement in sheltered workshops, help in setting up independent businesses;
- 5) financial assistance, direct or indirect.

In cases where no statement was made by the interviewee that he was receiving or had applied for services, the interviewer nevertheless visited the main social and rehabilitation agencies situated in the person's area of residence in order to corroborate the fact. As was pointed out in the chapter on social and rehabilitation services (p.77) the social agencies generally corroborated the information given by the handicapped person as to applications for and receipt of services.

* For details of questions posed to the agencies, see pp. 146-147.

It was also found that on the whole the disease named by the vocationally handicapped person corresponded with the diseases reported in their medical certificates. In 200 (out of 212) cases, it was found that the disease claimed by the respondent and the disease registered in the certificate were identical. However in the majority of cases the respondent claimed that he suffered from additional diseases which were not registered in the certificate. In 17 cases the opposite was found - more diseases were registered in the certificate than were mentioned in the interview.

C. Phase 3:

In the final phase it was possible to carry out the main aim of the study, which was to identify among the vocationally handicapped population those who could be regarded as potential vocational rehabilitation clients.

For this purpose, two teams of assessors were formed - each consisting of two persons: a physician and a rehabilitation counsellor. Each of these four persons had worked at least for ten years in diagnostic evaluation and classification of handicapped persons for the purpose of vocational rehabilitation. The assessments were carried out using the detailed written information gathered from the handicapped person and from the service agencies as described in phase 2. The rehabilitation prospects of the handicapped persons were assessed by the two teams, each independently of the other; there was no communication whatsoever between them.

A pretest of the procedure was conducted simultaneously with the pretest for phase 2. This pretest led to the conclusion that the information provided by the detailed questionnaire was an adequate basis for prognosis. The pretest also indicated a high degree of reliability (92%) in the results of the assessments by the two teams. In spite of this high level of reliability it was decided to continue with the two teams for the sample population. After the assessment of 25% of the sample showed a similarly high level of reliability, it was decided to continue with one assessment team.

Also on the basis of the experience of the pretest, it was decided not to assess the vocational prospects of 46 married women. The problems raised in defining "adequate" performance of housework were too complex to be resolved within the limits of this study.

For the purpose of estimating the scope of the vocationally handicapped in each of the four Categories, the married women were included; they were distributed among the Categories in the same proportion as the total of all the assessed population. They were however not included in the analysis of the characteristics of each of the Categories.

The assessment team also decided not to assess the vocational rehabilitation prospects of those who had previously been professionally diagnosed as mentally ill, because it maintained that its experience with such cases was insufficient.

Altogether, rehabilitation prospects were assessed for 421 out of the 501 persons interviewed. Only in 13 out of the 421 assessed cases did the team fail to reach any decision. In five of these 13 cases the teams thought that additional medical information might have influenced their decision.

D. Evaluation of the methodology

Phase 1

Connecting this study to the labor force survey had both advantages and disadvantages. The main advantage was that a country-wide representative sample was obtained relatively easily. The data on the vocationally handicapped population could also be validly compared with that on the population as a whole.

The main disadvantage lay in the exclusion or only limited inclusion of certain segments of the population from the sample as a result of the specific definitions laid down by the labor force survey for its own needs. The underrepresented segments were women and young persons. Persons in resident institutions for over a year were altogether excluded.

Another limitation of the use of the labor force sample as the base for our work is the small size of the sample obtained. Because of this, the sample of the vocationally handicapped is too small to allow for detailed planning of vocational rehabilitation programs.

Phase 2

The material gathered in the interviews with the vocationally handicapped at their homes and with personnel of service agencies proved a reliable and adequate basis for the work of the assessment team in determining prospects for rehabilitation. If the practice of using only written reports prepared by social workers in the field of rehabilitation proves valid, it will facilitate and expedite preliminary intake procedures in vocational rehabilitation programs.

Phase 3

The assessment procedure was shown to be reliable by the comparison made of the work of two teams working simultaneously and independently of each other. The similarity in judgement shows that persons in the vocational rehabilitation field have apparently arrived at some common approach to cases. It would be interesting to analyze the variables used in reaching judgements and the extent of their uniformity.

The validity of the assessment procedure can only be determined on the basis of a follow-up study comparing the vocational rehabilitation achieved under rehabilitation programs with the assessment by the team.

Each phase of the methodology was designed with specific aims. Notwithstanding the limitations pointed out above, the aims for phase 1 and phase 2 may be considered fulfilled. The ultimate aim of the research, specified as the aim of phase 3, i. e. the identification of a sample of the vocationally handicapped who could be regarded as potential clients for rehabilitation, was also attained. However, as we have stated, a follow-up study is required in order to validate the findings.

TESTS OF SIGNIFICANCE OF RELATIONSHIP
BETWEEN SELECTED VARIABLES

a. Relationship between vocational rehabilitation
prospects and selected variables

The Chi Square test shows a relationship at a significance level of $\alpha = 0.01$, between vocational rehabilitation prospects and a series of selected variables: age, sex, marital status, level of education, household head, and work history.

The high significance of the relationship between these variables and vocational rehabilitation prospects was, of course, to be expected, as the assessing team presumably took these variables into account in forming their judgement.

Nevertheless, the judgement of the team was based on a configuration of factors. It was therefore important to test the relationship between vocational rehabilitation prospects and each individual factor separately.

b. Relationship between receipt of services from
public agencies and selected variables

A relationship at a significance level of $\alpha = 0.01$ was found between receipt of services from public agencies and level of education, family size, and land of origin, level of occupation, work history, current employment and vocational rehabilitation prospects.

No significant relationship was found between receipt of services and the following variables: age, the status of household head, and specific main diseases.

GLOSSARY OF TERMS, CONCEPTS, AND CLASSIFICATIONS

CURRENT ACTIVITY was classified into -

- worked full time: thirty five hours or more per week during 26 weeks or more during the year prior to the survey
- worked partially: worked less than 35 hours per week, or worked full weeks for less than 26 weeks during the year prior to the survey
- did not work: during the year prior to the survey

DISEASES

Main disease - a disease or impairment claimed by the occupationally handicapped person to interfere with the performance of his principal activity

Diseases reported by the interviewed persons were classified into the following categories:

Diseases of circulatory system and heart: Heart trouble; high blood pressure.

Internal and digestive diseases: stomach ulcer; other chronic stomach trouble; gall bladder or liver trouble; diabetes.

Respiratory diseases: tuberculosis; other chest trouble; asthma.

Impairment of nervous system: including paralysis of any kind.

Diseases of the motor system, bones, muscles and knuckles; arthritis or rheumatism; missing fingers, hand, arm, toes, foot or leg. Permanent stiffness or deformity of foot, leg, fingers, hand, arms or spine.

Skin diseases: any allergy, chronic skin trouble.

Hernia: includes kidney stones.

Impairment of sight and blindness

Persistent backaches

Emotional disturbances

Mentally retarded

EDUCATIONAL LEVEL is classified in the following categories:

No education: studied 2 years or less.

Low elementary education: equivalent to completing 3-5 school years.

Partial elementary education: equivalent to completion of 6-7 school years.

Full elementary education or vocational elementary school: completed 8 years of elementary school or vocational school on elementary level. Included also are those with only one additional year in a secondary framework.

Partial secondary education: equivalent to completion of 8 elementary school years and completion of additional 2-3 years in secondary school.

Full secondary education: completion of high school or equivalent vocational secondary school.

Higher education: university or other higher education above secondary level.

FUNCTIONAL LIMITATIONS were classified within the following categories:

Mobility outside the home

Holding with palms and fingers: holding objects firmly in right hand; same with left hand; using scissors; holding writing implement.

Gross movements: standing for long periods; sitting for long periods (hour); walking fast, climbing steps; bending down; kneeling.

Self-service: washing oneself, applying makeup; combing hair; dressing oneself.

Lifting and carrying of heavy loads

Quick movements

Reading

Concentration and memory

HANDICAPPED - A person in a condition of long term illness or disability, as a result of which he does not engage in the principal activity for his age-sex-marital group. By "long term" is meant a chronic condition existing for at least 26 weeks prior to the interview.

HEAD OF HOUSEHOLD - the person identified as such by the interviewee himself; not related to income in comparison with other household members.

HOUSING FACILITIES AND EQUIPMENT LEVEL

Level 1 of housing facilities and equipment:

The first and lowest level included families whose house lacked one or more items of group 1, such as electricity, running water, etc.

(Group 1 includes: running water, electricity, kitchen, indoor W. C.)

Level 2 of housing facilities and equipment:

The second level included those families who possessed all items in group 1 (see Level 1) but who lacked one or more items in group 2, like refrigerators, showers, etc.

(Group 2 included in addition to group 1, refrigerator, bathtub or shower).

Level 3 of housing facilities and equipment:

The third level included all families possessing all items in Group 1 (see Level 1) and 2 (see Level 2), but lacked all items in Group 3.

(Group 3 included in addition to the former items - telephone and washing machine).

Level 4 of housing facilities and equipment:

The fourth level included all families possessing all items in Groups 1 and 2 and part of the items in Group 3 (either telephone or washing machine).

Level 5 of housing facilities and equipment:

The fifth and highest level of living standard included families possessing all items in Groups 1, 2, & 3.

OCCUPATIONAL LEVEL

The criteria for assessing of occupational level of an occupation were: the

level of education required and the number of years of apprenticeship training and experience necessary for its performance. The occupational level was determined by the highest level of occupation engaged in during the period of his work history.

The specific occupations were assigned to categories as follows:

Professional and managerial: accountant, teacher, registered nurse, dental technician.

Clerical and sales: bookkeeper; general clerk, storekeeper, mailman, policeman, animal slaughterer; telephone operator, nursemaid; foreman, cafe-owner, laundry owner, owner of other business. salesman, sales agent, professional farmer.

Skilled: tailor, seamstress, weaver, knitter, cutter, spinner, shoemaker; housepainter, plasterer, glazier, scaffolding erector, tile-layer, iron-bender; upholsterer, carpenter; engraver, goldsmith, silversmith, printer, electrician, clockmaker; baker, cook, waiter; metal-worker, tin worker, blacksmith, auto repairman diamond polisher, plumber; driver, fisherman, baker.

Unskilled: farm hand, gardener; street vendor of kerosene, ice or other items; porter, messenger, butcher's helper, apprentice or trainee in workshop; housemaid, sanitation worker, helper to kindergarten teacher, taking care of a child; laborer in agriculture, building and industry, watchman.

PRINCIPAL ACTIVITY FOR AGE-SEX-MARITAL GROUPS

- (a) For young people aged 14-17. Full participation in a recognized general or vocational secondary school, or gainful employment. (Young people who claim that, because of a disability, they are not able to attend a regular secondary school such as those described above, including those who attend a special school, and those who cannot, because of their disability, do gainful work, are considered not able to carry on the principal activity appropriate to their group).
- (b) For persons aged 18-64. Performance of full-time gainful work or full-time military service.

Gainful work includes: work for wages, salary or payment in kind; self-employment; work as an unpaid family worker, and membership

of a producers' cooperative. Housebound work of a remunerative nature and sheltered employment are included.

- (c) For housewives who do not perform full-time gainful work, performance of housework.

REHABILITATION

A process involving counselling, physical, mental and social restoration, vocational training and placement for principal activity.

Vocational rehabilitation - is rehabilitation whose major objective is preparation for gainful work.

Rehabilitation for other principal activity is rehabilitation whose major objective is studying or housework.

SEEKING EMPLOYMENT

For those currently working partially: applied for full-time employment in the last six months before the survey.

For those not working currently: applied for employment of any kind in the last six months before the survey.

SOCIAL AND REHABILITATION SERVICES - were grouped in the following categories:

Diagnostic Services:

- a) Medical diagnosis only
- b) Psychological diagnosis only
- c) Assessment of observation centre
- d) Assessment of vocational rehabilitation centre
- e) Assessment of rehabilitation team
- f) Classification as handicapped by Classification Board at the Labor Exchange.

Vocational Rehabilitation Attempts:

- a) By work placement under normal work conditions
- b) By placement in sheltered workshop
- c) By setting up independent business

Direct Financial Assistance:

- a) Monthly assistance on a permanent basis
- b) Occasional assistance
- c) Financial grants
- d) Loans

Indirect Financial Assistance:

- a) Medical insurance, hospitalization, medical examinations, teeth, implements, etc. ;
- b) Other types of indirect financial assistance i.e. maintenance of children, tax reductions, rent, domestic assistance, clothing, school fees.

VOCATIONAL CRISIS

The cessation or limitation of the principal activity from a full-time to a part-time activity.

VOCATIONAL REHABILITATION CATEGORIES

Vocationally handicapped persons were classified by the assessing team into four groups, according to their vocational rehabilitation prospects.

Vocational Rehabilitation Category 1

Includes persons having reasonable prospects for vocational rehabilitation under regular working conditions.

Vocational Rehabilitation Category 2

Includes persons with reasonable prospects under special or sheltered working conditions.

Vocational Rehabilitation Category 3

Includes persons with poor prospects for vocational rehabilitation as their physical and/or mental condition makes vocational rehabilitation unfeasible.

Vocational Rehabilitation Category 4

Persons whose present condition appears the most that could be expected within the limits of their capacities.

VOCATIONALLY HANDICAPPED

Men aged 14-64, and women aged 14-59, who did not perform or performed only partially the principal activity expected of their age-sex-marital group and who claimed that they have a long-term illness or disability which prevents them from doing so.

WORKED CONTINUOUSLY AFTER THE VOCATIONAL CRISIS

Worked at least 80% of the time from the inception of work after the crisis until the date of the interview.

WORKED CONTINUOUSLY BEFORE THE VOCATIONAL CRISIS

Worked at least 80% of the actual working years from age 16 up to the date of the crisis.

The determinant week	01	02	03	04	05	06	07
	08	09	10	11	12	13	14

LABOUR FORCE SURVEY
1965
July-September

Number of Questionnaire

--	--	--	--	--	--	--	--

(3 - 11)

<p>A. TYPE OF SAMPLE (12)</p> <p>1. Electoral districts</p> <p>2. Electoral districts A, B, C</p> <p>3. Areas</p> <p>4. New houses</p> <p>5. Kibbutzim</p> <p>6. Moshavim and small villages</p> <p>7. Institutions</p> <p>B. GROUP OF SAMPLE (13)</p> <p>x New</p> <p>1 Recurrent "A"</p> <p>2 Recurrent "B"</p>	<p>C. In how many rooms does the family (household) dwell? <input type="text"/> (14)</p> <p>D. Number of children under 14 <input type="text"/> (15)</p> <p>E. Number of persons aged 14 and above <input type="text"/> (16)</p> <p>F. Number of persons in household <input type="text"/> (17-18)</p> <p>G. Number of persons aged 18 years and above <input type="text"/> (19)</p> <p>H. Who gave the information? (20)</p> <p>1. Head of family</p> <p>2. His wife</p> <p>3. A member of the family aged 20 or more</p> <p>4. A member of the family under 20</p> <p>5. Other (specify)</p> <p>6. Mailed questionnaire</p> <p>7. Previous questionnaire</p> <p>N. Q. <input type="checkbox"/> N. E. <input type="checkbox"/></p> <p>(21 - 22)</p>
<p>Space for special enquiries which differ in each survey</p>	
<p>Comments</p> <p>.</p> <p>.</p>	

**QUESTIONS POSED TO SCHOOLS AND OTHER INSTITUTIONS
WITH SPECIAL FRAMEWORKS FOR HANDICAPPED YOUTH**

1. What is the total number of children aged 14-17 in this special educational framework for the handicapped?
2. What are the criteria for acceptance of children into this framework?
3. Is there any age limit for children remaining in this framework, and if so, what is the limit?
4. What is the purpose and content of the curriculum? Do you provide vocational or any other training apart from regular academic studies?
5. Does your school have any hand in the planning of the continuation of education, or training or placement in work of the children on leaving school? Please specify.
6. Is there any follow-up on children who have left the school? If so, please give details.

STATE OF ISRAEL
VOCATIONAL REHABILITATION COUNCIL

SURVEY OF THE POPULATION IN NEED OF VOCATIONAL REHABILITATION

PURPOSE OF THE STUDY

THE VOCATIONAL REHABILITATION COUNCIL IS CONCERNED WITH MAKING AVAILABLE TO EVERY PERSON THE ASSISTANCE REQUIRED FOR HIS PARTICIPATION IN PRODUCTIVE ACTIVITIES. ACCORDINGLY, THE COUNCIL HAS DECIDED TO STUDY THE PROBLEMS OF PERSONS WHO SUFFER HANDICAPS WHICH INTERFERE WITH THEIR WORKING, STUDYING, OR PERFORMING HOUSEWORK. THE INFORMATION WHICH IS BEING GATHERED WILL REMAIN CONFIDENTIAL, BUT WILL HELP THE COUNCIL TO PLAN AND TO DEVELOP SERVICES WHICH WILL ENABLE HANDICAPPED PERSONS TO FIND A PLACE IN SUITABLE EMPLOYMENT.

1. IDENTIFYING DATA					
IDENTITY NUMBER	FAMILY NAME		FIRST NAME	FOR OFFICE USE	
V - MALE	1 SINGLE	2. DIVORCED	YEAR OF BIRTH	YEAR OF IMMIGRATION	COUNTRY OF BIRTH
X - FEMALE	3 MARRIED	4. WIDOWED			OF MOTHER OF FATHER
PLACE OF RESIDENCE (ADDRESS)					
NAME OF PLACE	QUARTER	STREET	HOUSE NUMBER	(FOR OFFICE USE)	

2. FAMILY COMPOSITION

ARE YOU THE MAJOR BREADWINNER OF THE FAMILY? V= YES, X= NO.						
MEMBERS OF THE FAMILY WHO LIVE WITH YOU. (TO INTERVIEWER: ASK EACH MEMBER OF THE FAMILY, SEPARATELY, THE FOLLOWING QUESTIONS.)						
FIRST NAME	RELATIONSHIP TO YOU	AGE	STATUS (E, N, ST, SO)	OCCUPATION	AVERAGE MONTHLY INCOME (IL.)	SUFFERS DISABILITY?

3. LANGUAGES

WHAT LANGUAGES DO YOU KNOW?			
LANGUAGE	SPEAK	READ	WRITE
	1 - 2 - 3 - 4 -	1 - 2 - 3 -	1 - 2 - 3 -
1 HEBREW			
2			
3			
4			

E - EMPLOYED, N - NOT EMPLOYED, ST - STUDENT, SO - SOLDIER.

4. CURRENT ACTIVITY

QUESTION NUMBER	QUESTION	ANSWER	GO TO QUESTION
1A	WHAT IS YOUR PRINCIPAL ACTIVITY? (TO INTERVIEWER: MORE THAN ONE ANSWER MAY BE GIVEN. ASK CONCERNING EACH ACTIVITY SEPARATELY. A PERSON MAY, FOR EXAMPLE, WORK AND ALSO STUDY.)	1. EMPLOYED 2. NOT EMPLOYED 3. STUDENT 4. HOUSEWORK	1B 1C 2L 2M

4. CURRENT ACTIVITY (CONTINUED)

"EMPLOYED" (FOR THOSE WHO ANSWERED QUESTION 4A WITH "EMPLOYED")

QUESTION NO.	QUESTION	ANSWER	GO TO QUESTION
4B	1. IN WHAT OCCUPATION ARE YOU CURRENTLY EMPLOYED?		
	2. EMPLOYMENT STATUS	SELF-EMPLOYED - V WAGE EARNER - X	
	3. IS YOUR WORK:	1 PERMANENT 2 TEMPORARY 3 SEASONAL	
	4. HOW MANY YEARS HAVE YOU WORKED IN YOUR CURRENT OCCUPATION? YEARS	
	5. WHAT IS YOUR AVERAGE MONTHLY INCOME FROM THIS EMPLOYMENT? IL (GROSS)	
	6. HOW LONG HAVE YOU WORKED PART TIME? (TO INTERVIEWER: IF HE WORKS FULL TIME, EXPLAIN THE CONTRADICTION TO ANSWER IN LABOUR FORCE SURVEY AND CONSIDER, IN THE LIGHT OF THE INSTRUCTIONS, WHETHER TO CONTINUE THE INTERVIEW.)	1 UP TO 3 MONTHS 2 4 TO 6 MONTHS 3 7 MONTHS OR MORE	
	7. WOULD YOU LIKE TO WORK FULL TIME? IF SO, AT WHAT SORT OF JOB? WHY THAT SORT?	YES - V NO - X	
4C	WHY DO YOU WORK PART TIME ONLY? (TO INTERVIEWER: ONE ANSWER ONLY IS TO BE GIVEN. INDICATE THE MOST APPROPRIATE ANSWER.)	1 NO MORE WORK AVAILABLE IN THIS JOB. 2 PHYSICALLY UNABLE TO WORK MORE IN THIS JOB 3 COULD NOT WORK LONGER HOURS AT ANY JOB 4 COULD NOT FIND AN APPROPRIATE JOB WITH LONGER HOURS 5 BECAUSE OF STUDYING 6 BECAUSE OF HOME-KEEPING RESPONSIBILITIES 7 AGE, TOO YOUNG, TOO OLD 8 NOT INTERESTED IN WORKING MORE 9	5
4D	DID YOU, DURING THE PAST SIX MONTHS, LOOK FOR FULL-TIME WORK?	YES - V NO - X	4F
4E	HOW DID YOU LOOK FOR WORK	1 NATIONAL EMPLOYMENT SERVICE 2 WELFARE OFFICE 3 BY DIRECT APPROACH TO EMPLOYERS 4 THROUGH FRIENDS 5	5
	WHY DIDN'T YOU LOOK FOR ADDITIONAL WORK?		

"NOT WORKING" (FOR THOSE WHO ANSWERED QUESTION 4A WITH "NOT EMPLOYED")

QUESTION NO.	QUESTION	ANSWER	GO TO QUESTION
4G	FOR HOW LONG (CONTINUOUSLY) HAVE YOU BEEN WITHOUT WORK?	1 UP TO 3 MONTHS 2 4 TO 6 MONTHS 3 7 MONTHS OR MORE	
4H	WHY ARE YOU NOT EMPLOYED? (TO INTERVIEWER: MORE THAN ONE ANSWER MAY BE GIVEN.)	1 CANNOT FIND APPROPRIATE WORK 2 HEALTH DOES NOT PERMIT 3 STUDYING 4 AGE, TOO YOUNG; TOO OLD 5 NOT INTERESTED 6	5
4I	DID YOU, DURING THE PAST SIX MONTHS, LOOK FOR WORK? IF NOT, WHY NOT?	YES - V NO - X	4K
4J	HOW DID YOU LOOK FOR WORK?	1 NATIONAL EMPLOYMENT SERVICE 2 WELFARE OFFICE 3 BY DIRECT APPROACH TO EMPLOYERS 4 THROUGH FRIENDS 5	
4K	WHAT SPECIFIC KIND OF WORK IS APPROPRIATE FOR YOU? EXPLAIN: THERE IS NO APPROPRIATE WORK: X	V

"STUDENT" (FOR THOSE WHO ANSWERED QUESTION 4A WITH "STUDENT")

QUESTION NO.	QUESTION	ANSWER	GO TO QUESTION
4L	1. WHAT ARE YOU STUDYING?	1 ELEMENTARY 2 SECONDARY 3 SECONDARY-VOCATIONAL 4 COURSE IN 5 SPECIAL SCHOOL OR INSTITUTION... 6	
	2. HOW MANY HOURS PER WEEK DO YOU ATTEND CLASS? HOURS	
	3. SINCE WHEN?	

"HOUSEKEEPER" (FOR THOSE WHO ANSWERED QUESTION 4A WITH "HOUSEKEEPER")

4M	1. DO YOU HAVE DIFFICULTIES AS A RESULT OF YOUR HEALTH IN DOING HOUSEWORK? EXPLAIN.	YES - V NO - X	
	2. IN YOUR OPINION, IS IT POSSIBLE TO IMPROVE YOUR CAPACITY TO DO HOUSEWORK? EXPLAIN.	YES - V NO - X	

5. CONTACTS WITH AGENCIES

QUESTION	ANSWER
1. DURING THE PAST 12 MONTHS, HAVE YOU APPLIED FOR ASSISTANCE TO: (TO INTERVIEWER: NOTE WHICH LOCAL OFFICE WAS APPLIED TO)	1 WELFARE OFFICE IN 2 MENTAL HEALTH SERVICE IN 3 NATIONAL INSURANCE INSTITUTE IN 4 DIAGNOSTIC STATION IN 5 THE JEWISH AGENCY OFFICE IN
2. WHAT KIND OF ASSISTANCE DID YOU RECEIVE?	
3. HOW DID THEY TREAT YOU?	

6. THE CRISIS WHICH CAUSED DISABILITY

QUESTION	ANSWER	GO TO QUESTION
1. WHAT LED TO YOUR BEING HANDICAPPED FOR WORK OR STUDY?	1 FROM BIRTH 2 ILLNESS 3 OCCUPATIONAL DISEASE 4 WORK ACCIDENT 5 TRAFFIC OR OTHER ACCIDENT (WHICH IS NOT A WORK ACCIDENT) 6 MILITARY SERVICE 7	
2. WHEN WAS THERE A CHANGE IN YOUR PRINCIPAL ACTIVITY AS A RESULT OF YOUR BEING HANDICAPPED?	1 AT THE AGE OF 2 IN THE YEAR	
3. WHAT WAS YOUR PRINCIPAL ACTIVITY AT THAT TIME?	1 EMPLOYED 2 STUDENT 3 IN MILITARY SERVICE, ENLISTED, OR REGULAR SERVICE (NOT ON RESERVE DUTY) 4 HOUSEKEEPER 5 RETIRED 6 UNDER AGE SIX (SCHOOL AGE) 7 UNEMPLOYED 8	9
4. FOR HOW LONG A PERIOD WERE YOU CONTINUOUSLY ABSENT FROM YOUR PRINCIPAL ACTIVITY AS A RESULT OF THE EVENT WHICH LED TO YOUR HANDICAP?	1 TO THE PRESENT TIME 2 UP TO ONE YEAR 3 MORE THAN ONE YEAR 4 WAS NOT ABSENT	8
5. DURING THE PAST YEAR, HOW MANY TIMES WAS YOUR PRINCIPAL ACTIVITY INTERRUPTED BECAUSE OF THE GENERAL STATE OF YOUR HEALTH? TIMES WEEKS WAS NOT INTERRUPTED	

6. PENSIONS, GRANTS AND ASSISTANCE

QUESTION	AGENCY	TYPE OF PAYMENT BASED ON	P PERMANENT OR T TEMPORARY	AMOUNT (IN TL PER MONTH)
DO YOU (OR DID YOU IN THE PAST 12 MONTHS) RECEIVE A PENSION PAYMENT OR WELFARE GRANT FROM: (TO INTERVIEWER: ASK ABOUT EACH SOURCE SEPARATELY.)	1. MINISTRY OF DEFENCE			
	2. NATIONAL INSURANCE INSTITUTE			
	3. WELFARE OFFICE			
	4. SPECIAL PENSION FUND			
	5. MONTHLY RESTITUTION PAYMENTS FROM GERMANY			
	6. COMPENSATION GRANTS TO VICTIMS OF NAZISM			
	7. RELATIVES			
8.				

7. OWNERSHIP OF HOUSE AND EQUIPMENT

QUESTION	ANSWER
1. DO YOU LIVE IN A RENTED HOUSE?	YES - V NO - X
2. HOW MANY ROOMS IN YOUR HOUSE?	
3. IS YOUR HOUSE EQUIPPED WITH:	1 ELECTRICITY 2 RUNNING WATER 3 PRIVATE FAMILY KITCHEN 4 BATHTUB OR SHOWER 5 INDOOR TOILET 6 OUTHOUSE TOILET
4. IS THERE IN THE HOUSE:	1 ELECTRIC FRIDGE 2 ICEBOX 3 GAS OR ELECTRIC COOKING RANGE 4 WASHING MACHINE 5 TELEPHONE 6 RADIO 7 TELEVISION 8
5. DOES ANY MEMBER OF THE FAMILY WHO LIVES IN THE HOUSE OWN A VEHICLE?	1 CAR 2 MOTORCYCLE 3 SCOOTER

B. WORK HISTORY

BEFORE YOU BECAME HANDICAPPED, WERE YOU EMPLOYED? YES - V NO - X (TO INTERVIEWER: ASK ALL QUESTIONS CONCERNING EACH OCCUPATION.)

OCCUPATION	FOR HOW LONG? (YEARS)	WHEN?		WHERE?		WORK STATUS			WERE YOU SATISFIED WITH THIS WORK? IF NOT, EXPLAIN	WHAT WAS THE REASON FOR CHANGE OR STOPPING WORK?
		FROM	TO	ISRAEL	ABROAD	SELF EMP. & WAGE EARNER	PERM. - P TEMP. - T SEAS. - S	FULL-TIME F PART-TIME P		
		YEAR	YEAR	PLACE	COUNTRY					
1.										
2.										
3.										
4.										
5.										

AFTER YOU BECAME HANDICAPPED, WERE YOU EMPLOYED? YES - V NO - X (DATE OF THE CRISIS

1.										
2.										
3.										
4.										

IC. MILITARY SERVICE

DID YOU SERVE IN THE ARMY?	HOW MANY YEARS	DATE OF DISCHARGE	COMMENTS
YES - V NO - X			

II. EDUCATIONAL HISTORY

BEFORE YOU BECAME HANDICAPPED, DID YOU ATTEND SCHOOL? YES - V NO - X (TO INTERVIEWER: ASK ALL QUESTIONS SEPARATELY CONCERNING EACH EDUCATIONAL EXPERIENCE.)

WHAT KIND OF STUDIES? (PRIMARY, "HEDER", SECONDARY, UNIVERSITY, YESHIVA, TECHNICAL, COURSE, ULPAN, ETC.)	FOR HOW LONG? (YEARS)	WHEN?		WHERE?		FULL- TIME OR PART- TIME	IF PART- TIME, HOW MANY HOURS WEEKLY?	ARE YOU STILL CONTINUING THIS STUDY? YES - V NO - X	IF NOT CONTINUING, HOW DID IT END? (CERTIFICATE, ETC.) OR GIVE THE REASON FOR STOPPING
		FROM	TO	ISRAEL	ABROAD				
		(YEAR)	(YEAR)	(PLACE)	(COUNTRY)				
1.									
2.									
3.									
4.									
5.									

AFTER YOU BECAME HANDICAPPED, DID YOU STUDY? YES - V NO - X (DATE OF THE CRISIS

1.									
2.									
3.									
4.									
5.									

14. HEALTH APPLIANCES

DO YOU POSSESS	HEARING AID	CRUTCHES	PROSTHESIS	WHEEL CHAIR	(OTHERS)
(+) = YES. (-) = NO.					
DO YOU USE IT DAILY(A), OCCASIONALLY(B), NEVER(C)?					
THE APPLIANCE IS: IN ORDER = (+), NOT IN ORDER = (-)					
(IF NOT IN ORDER) WHAT IS WRONG? WHY DON'T YOU USE IT?					
DO YOU NEED ANY APPLIANCE YOU DO NOT HAVE? IF SO, WHICH? WHY DON'T YOU HAVE IT?					

15. HEALTH - FUNCTIONAL CAPACITY

NO.	DO YOU AS A RULE HAVE ANY DIFFICULTY IN: (MARK X WHERE APPROPRIATE)	NO DIFFICULTY	SLIGHT DIFFICULTY	MUCH DIFFICULTY	COMPLETELY UNABLE
		0	1	2	3
A	DOING WORK				
B	SCHOOLWORK				
C	HOUSEWORK				
D	GETTING AROUND OUTSIDE THE HOME (MARK "MUCH DIFFICULTY" IF NEED HELP)				
E	HOLDING THINGS FIRMLY } IN YOUR } (INDICATE IF LEFT-HANDED)				
F		RIGHT HAND LEFT HAND			
G	WRITING				
H	USING SCISSORS				
I	SITTING UP (FROM LYING DOWN)				
J	SITTING FOR LONG TIME (HOUR)				
K	STANDING FOR A LONG TIME				
L	BENDING DOWN				
M	WALKING				
N	WALKING FAST				
O	WALKING DOWN STEPS				
P	CLIMBING STEPS				
Q	TRAVELLING IN A CAR				
R	WASHING YOURSELF				
S	DRESSING YOURSELF				
T	(MEN ONLY) SHAVING				
U	COMBING YOUR HAIR				
V	(WOMEN ONLY) MAKEUP				

NO.	DO YOU AS A RULE HAVE ANY DIFFICULTY IN: (MARK X WHERE APPLICABLE)	NO DIFFICULTY	SLIGHT DIFFICULTY	MUCH DIFFICULTY	COMPLETELY UNABLE
		0	1	2	3
A	PUTTING ON AND TAKING OFF YOUR PROSTHESIS/BRACES (TO BE ASKED ONLY IF PROSTHESIS OR BRACE IS USED)				
B	PICKING UP HEAVY OBJECTS				
C	CARRYING HEAVY OBJECTS				
D	DOING THINGS QUICKLY				
E	READING				
F	CONCENTRATING				
G	REMEMBERING THINGS				
H	GOING TO BUY FOOD				
I	PREPARING MEALS				
J	TURNING TAP ON AND OFF				
K	WASHING DISHES				
L	SWEEPING FLOORS				
M	WASHING FLOORS				
N	MAKING BEDS				
O	WASHING CLOTHES				
P	IRONING				
Q	SEWING				
R	LIFTING AND CARRYING BABIES				
S	WASHING AND DRESSING YOUR CHILDREN				
T	IS THERE ANYTHING ELSE YOU HAVE DIFFICULTY IN DOING?				
U					
V					

THESE QUESTIONS ARE APPLICABLE TO RESPONDENTS WHOSE PRINCIPAL ACTIVITY IS HOUSEWORK OR SIMILAR WORK

16. INTERVIEWER'S IMPRESSIONS

S U B J E C T	A N S W E R	D E T A I L
STATE OBVIOUS PROMINENT DEFECTS OF INTERVIEWEE, E.G. 1	1. UGLY BLEMISH OR DEFORMITY 2. UNUSUALLY NEGLECTED APPEARANCE 3. SEVERE STUTTER 4. NERVOUS FACIAL GRIMACES 5. EXAGGERATED PERSPIRATION 6. BITING OF FINGERNAILS 7.	
ESTIMATE THE INTERVIEWEE'S COMPREHENSION OF INTERVIEW (TAKE NO ACCOUNT OF LANGUAGE DIFFICULTIES)	1. GENERALLY FINDS IT VERY DIFFICULT TO UNDERSTAND THE QUESTIONS. 2. FINOS DIFFICULTY WITH COMPLICATED SENTENCES. 3. GENERALLY UNDERSTANDS ALL QUESTIONS.	1. ASKS QUESTIONS WHICH INDICATE MISUNDERSTANDING. DOES NOT ANSWER TO THE POINT. REQUIRES LOT OF EXPLANATION. 2. REACTIONS SHOW UNDERSTANDING OF SIMPLE FACTS ONLY. 3. UNDERSTANDS THE MAIN POINT OF COMPLICATED QUESTIONS; ASKS POINTED QUESTIONS AND PROVES THAT HE UNDERSTANDS SUBJECT WELL.
ESTIMATE INTERVIEWEE'S COOPERATION DURING INTERVIEW	1. GREAT RESISTANCE 2. UNWILLING 3. INDIFFERENT 4. SLIGHT INTEREST 5. MUCH INTEREST	
DESCRIBE YOUR GENERAL IMPRESSION OF INTERVIEWEE, FAMILY'S LIVING CONDITIONS, AND ANY GENERAL REMARKS THAT YOU CONSIDER IMPORTANT.		
<u>INTERVIEWED:</u> DATE: _____ SIGNATURE: _____	<u>REVIEWED:</u> DATE: _____ SIGNATURE: _____	

QUESTIONS POSED TO SERVICE AGENCIES

Following is the type of information requested concerning each interviewee from the service agencies:

- a. Date and reason for the first application; any existing medical data; medical certificate; any other information concerning state of health in the past and previous years.
- b. Diagnostic work-up for vocational rehabilitation purposes undergone by interviewee; aptitude testing, date and results; testing in observation center or diagnostic clinic, date and results; any rehabilitation plans, their date and nature.
- c. Experience of vocational training if any: date; duration; nature; auspices (i. e. courses offered by the Ministry of Labour, apprenticeship, full time schooling etc.); graduation results; date and reason for dropping out before graduation; recurrence.
- d. Work placements: dates; nature of work; duration and reason if terminated.
- e. Placement in sheltered workshops: reason for placement; date; nature of work; date and reason for termination of work if terminated.
- f. Attempts at rehabilitation by setting up independent business: their nature; financial assistance offered if any; results.
- g. Work placement of other members of family of interviewee due directly to his own handicap.

- h. Financial assistance given to the family of the interviewee on a permanent basis due to his handicap: date of commencement.
- i. Responsibility of agency for medical insurance of interviewee: payment of medical expenses of interviewee other than, or in addition to his medical insurance by agency.
- j. Any services received by interviewee from agency concerned prior to his work handicap, and reasons for such.

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