

DOCUMENT RESUME

ED 461 188

EC 304 943

AUTHOR Marshall, Catherine A.; Longie, Bryan J.; Miller, Janneli F.; Cerveney, Lee K.; Monongye, Dushon

TITLE A National Survey of Indian Health Service Employees and the Development of a Model Job Training Demonstration Project: Identifying Work Opportunities for American Indians and Alaska Natives with Disabilities. Executive Summary.

INSTITUTION Northern Arizona Univ., Flagstaff. American Indian Rehabilitation Research and Training Center.

SPONS AGENCY National Inst. on Disability and Rehabilitation Research (ED/OSERS), Washington, DC.

PUB DATE 1994-00-00

NOTE 20p.

CONTRACT H133B80066

PUB TYPE Numerical/Quantitative Data (110) -- Reports - Research (143)

EDRS PRICE MF01/PC01 Plus Postage.

DESCRIPTORS Alaska Natives; *American Indians; Demonstration Programs; *Disabilities; Employee Attitudes; Employer Attitudes; *Employment Opportunities; Employment Potential; Federal Government; *Job Training; Models; National Surveys; On the Job Training; Severe Disabilities; *Supported Employment; *Work Environment

IDENTIFIERS *Indian Health Service

ABSTRACT

This project involved a national survey of Indian Health Service (IHS) agencies to assess the working environment, the extent to which IHS agencies employ and provide support services for persons with disabilities, and the need for program and consumer services to enhance the employability of American Indians with disabilities. A total of 676 interviews with IHS employees (62 percent American Indian) with disabilities, supervisors, co-workers of employees with disabilities, and other employees was conducted. The survey found that employees believed their work sites were accessible but needed to learn more about disability issues. Employees with disabilities believed that IHS needs to take specific steps to recruit persons with disabilities. The project also developed and pilot tested a supported employment job training model to demonstrate effective practices in hiring and providing support services to American Indians with disabilities. Supervisors and a job coach worked with nine trainees (six of whom had severe disabilities) to provide on-the-job training and solve work-related issues. An unanticipated outcome of the pilot project was the amount of emotional support the trainees needed to sustain their involvement. Recommendations focus on training costs, provision of psychological counseling to trainees, and staff requirements. (DB)

**A National Survey of Indian Health Service Employees
and the Development of a
Model Job Training Demonstration Project:
Identifying Work Opportunities for American Indians and
Alaska Natives with Disabilities**

**Executive Summary
1994**

U.S. DEPARTMENT OF EDUCATION
Office of Educational Research and Improvement
EDUCATIONAL RESOURCES INFORMATION
CENTER (ERIC)
 This document has been reproduced as
received from the person or organization
originating it.
 Minor changes have been made to
improve reproduction quality.

• Points of view or opinions stated in this
document do not necessarily represent
official OERI position or policy.

Catherine A. Marshall, Ph.D., C.R.C.

Bryan J. Longie

Janneli F. Miller, M.A.

Lee K. Cerveney, M.A.

Dushon Monongye

**American Indian Rehabilitation
Research and Training Center
Institute for Human Development
Arizona University Affiliated Program
 Northern Arizona University
P.O. Box 5630
Flagstaff, AZ 86011**

Funded by the National Institute on Disability and Rehabilitation Research
Office of Special Education and Rehabilitative Services
U.S. Department of Education, Washington, DC
Grant No. H133B80066

The content of this report is the responsibility of the American Indian Rehabilitation
Research and Training Center and no official endorsement by the U.S. Department of Education should be inferred.

Northern Arizona University is an Equal Opportunity/Affirmative Action Institution

304943

ACKNOWLEDGEMENTS

Project Advisory Committee

Dr. George Blue Spruce, Jr.

Katie Botone

John Carney

Van Chase

Julie Clay

Stephen Clincher

Dr. Gene Gerber

Cecelia Heftel

Barbara Iba

Quintin Kingfisher

Bryan Longie

Barry Pokrass

Dr. Bill Richards

Jim Sozoff

Art Zamora

Hospital Advisory Committee

Anna Albert

Gabriel Alvarez

Skip Bingham

Richard M. Bryan

Doreen Chaca

George Hanney, R.N.

Larry Lanier

Bryan Longie

Ron Willis

Ed Yava

Ad Hoc

Ruhama Charles

Myrna Pavatea

Ted Troseth

Emory Webb

A National Survey of Indian Health Service Employees and the Development of a Model Job Training Demonstration Project: Identifying Work Opportunities for American Indians and Alaska Natives with Disabilities

This *Executive Summary* consists of: (a) a brief overview of the project, (b) a summary of the results of the study, and (c) recommendations for subsequent projects. The *Final Report* (Marshall, Longie, Miller, Cerveny, & Monongye, 1994) of this study is available from the American Indian Rehabilitation Research and Training Center and describes the study in detail.

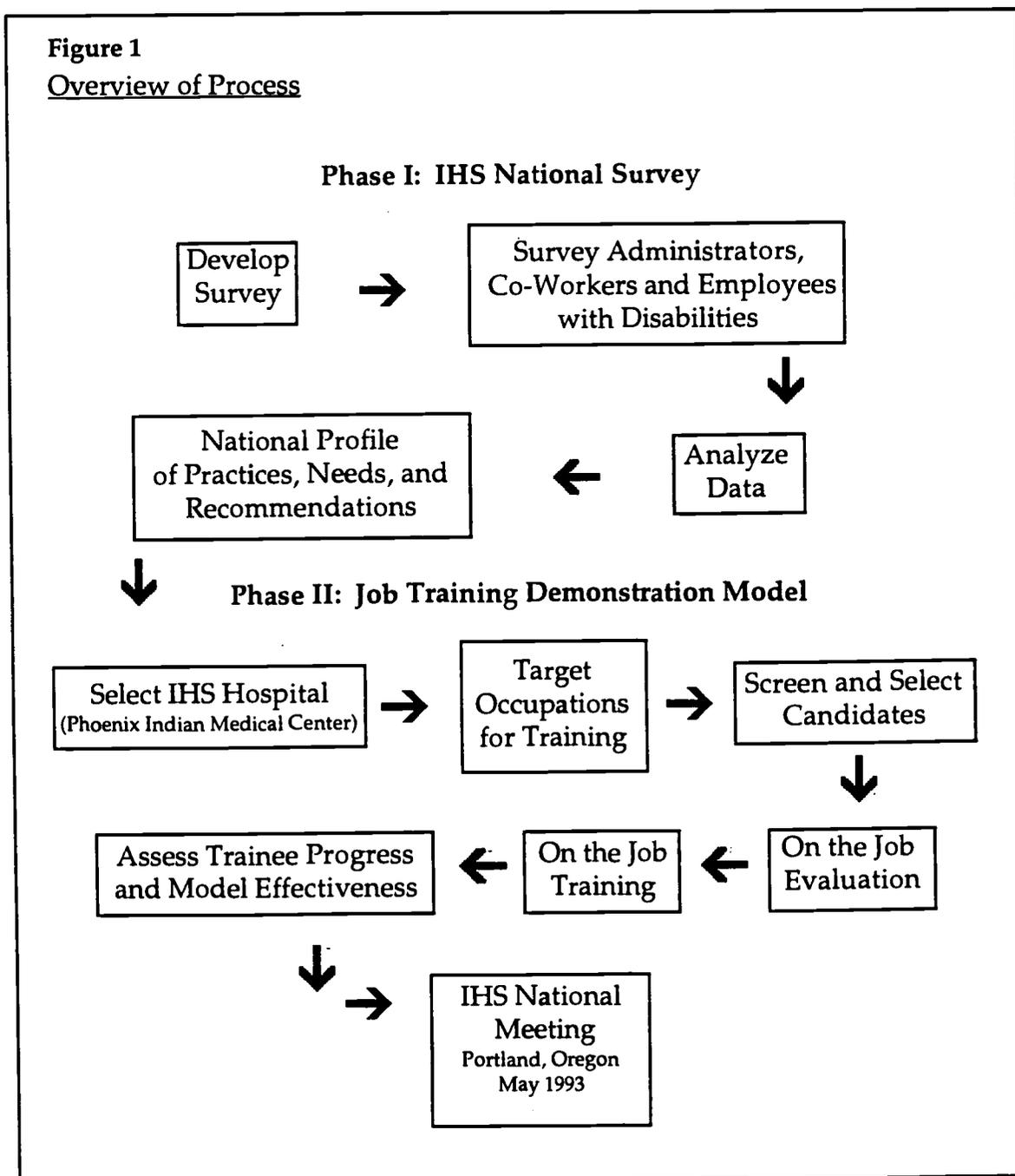
On September 20, 1993, two new IHS employees and one trainee were honored at a reception at the Phoenix Indian Medical Center (PIMC) in Phoenix, Arizona. The individuals were participants in a job demonstration model project sponsored by the Indian Health Service (IHS) and the American Indian Rehabilitation Research and Training Center (AIRRTC); assistance with the project was provided by the Arizona Rehabilitation Services Administration (ARSA). In surveying the needs of 17 American Indian Vocational Rehabilitation (VR) Projects (tribally-administered rehabilitation services programs), Lonetree (1990) found that "two of the 10 major industrial classifications providing the most employment on the reservations were public administration and services. The three main providers of employment within public administration were tribal government, Bureau of Indian Affairs, and Indian Health Services" (p. 14). Among Lonetree's recommendations: "Steps should be taken to develop relationships between American Indian vocational rehabilitation projects and prospective employers" (p. 28).

In August 1989, the AIRRTC sought to collaborate in an action research project with IHS, a major employer of American Indians. The goal of the action research was to increase the number of American Indians with disabilities who are employed. IHS employs a work force of approximately 15,000 people across the United States; the majority of employees are American Indian, yet, at the time the study began, the IHS had record of less than 1% being American Indians with disabilities. Specifically, according to IHS statistics, the total number of ethnic minorities with "targeted disabilities" employed by IHS as of September 23, 1989, was 32. IHS had no data indicating how many of the 32 were American Indians, or how many persons with disabling conditions other than the targeted disabilities worked for IHS. Further, IHS representatives in Rockville were unaware of the tribal vocational rehabilitation programs and expressed the desire

to have a "direct pipeline" opened between the tribal VR programs and IHS employment opportunities.

Two phases of the collaborative project have been completed (see Figure 1). The first phase of the project entailed conducting a national survey of IHS administrators, employees with disabilities, and staff whose co-workers included a person with a disability. The purpose of the survey was to assess the working environment of IHS facilities, as well as the extent to which IHS employed and provided support services for persons with disabilities. The survey also sought to identify program and consumer service needs in order to enhance the employability of American Indians with disabilities. The survey, completed in

Figure 1
Overview of Process



Spring 1992, indicated that while more American Indians with disabilities are employed by IHS than previously believed or documented by the IHS, these employees do not have severe disabilities and have required minimal, if any, accommodation to their disabilities. However, it should be noted that, according to Ellner and Bender, (1985), "in-house requests by firms asking employees to identify themselves voluntarily as handicapped overwhelmingly draw poor responses. The reasons for these poor returns vary, but they indicate that the handicapped themselves differ in their self-definitions and opinions of who is or is not handicapped" (p. 6).

Following completion of the national survey, the second phase, pilot-testing a job training demonstration model, was begun at PIMC. The purpose of the model project was to demonstrate effective practices in hiring and providing support services to American Indians with disabilities. Supervisors from PIMC, as well as a job coach provided by ARSA, worked with nine trainees identified through ARSA, to provide on-the-job training and to solve any work-related issues that posed barriers to the success of the trainees and the project in general. Involvement of the AIRRTC in the model project at PIMC was terminated in September 1993, as funding for the pilot effort came to a close. However, continuation of the project beyond its pilot stage has been strongly supported by the director of PIMC, Ms. Anna Albert, who requested the continued involvement of ARSA as well.

The results of the national survey, as well as a presentation involving participants of the model project, were given at joint AIRRTC and IHS national conferences held in Portland, Oregon, during May 1993. Directors of the IHS EEO and personnel offices, as well as directors of tribal vocational rehabilitation programs, attended the conferences. The conferences provided both formal and informal opportunities for IHS administrators to begin networking with directors of the tribal VR programs.

A third phase of the AIRRTC and IHS collaboration effort, to begin Fall 1994, will involve the selection of a second IHS service unit in order to replicate the job training demonstration model on a larger scale and systematically evaluate its effectiveness in providing employment opportunities for American Indians with *severe* disabilities. Carbine, Schwartz, and Watson (1989) have reported that the "biggest barrier" people with disabilities face in securing employment "is not physical. . . . It is attitudinal--their own attitudes, the attitudes of employers, and the attitudes of managers, supervisors, and co-workers" (p. 3). Thus one critical aspect of the evaluation will be to assess whether or not the model project: (a) improves or maintains employee/coworker attitudes toward persons with disabilities and (b) improves or maintains supervisor attitudes toward persons with disabilities. Steps toward this third phase are currently underway with the

RESULTS
Phase I:
The National Survey

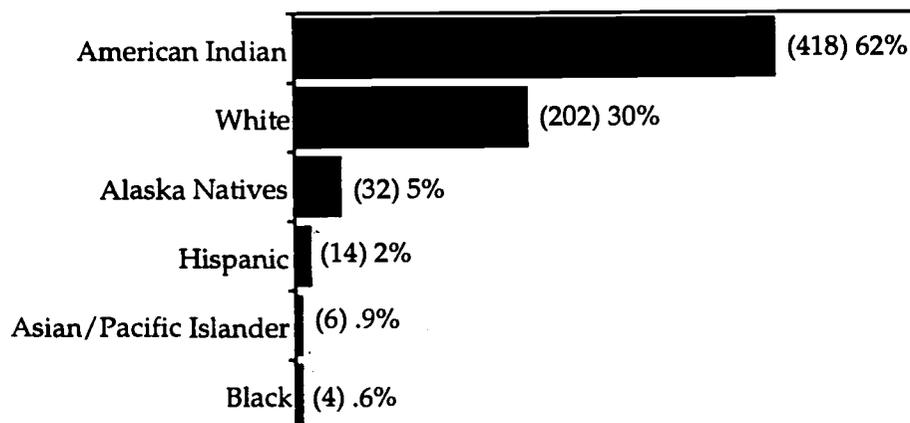
development of an instrument to measure attitudes toward people with disabilities based on American Indian and Alaska Native standards.

The first year of the collaborative project between the AIRRTC and the IHS involved a national telephone survey of IHS employees who had a disabling condition or who worked with persons who had disabling conditions. The purpose of the survey was to assess the conditions of the working environment of IHS employees, as well as, for example, the level of recruitment and support services for persons with disabilities within the IHS. It was hoped that the results of the survey would assist program planners and personnel officers in hiring more American Indians with disabilities and to effectively provide needed support services.

The survey was conducted through telephone interviews of approximately 15 minutes in duration. The interviews were conducted throughout a three-month period, from September to December 1991. The survey primarily consisted of statements to which respondents agreed or disagreed using a 5-point scale (1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree). The statements were categorized according to issues related to "Assessment of IHS Working Environment," "Assessment of Individual Needs," "IHS Recruitment Efforts," and "Disability Specific Issues." [A copy of the survey instrument is available from the AIRRTC upon request.]

A total of 676 interviews were included in the following analyses. The majority of the respondents were American Indian (see Figure 2); when combined with Alaska Natives, the total number of

Figure 2
Ethnicity of Interviewees (N=676)



Native people interviewed was 450, or 67% of the respondent population. The majority (64%) of persons interviewed were female. The largest proportion of respondents reported a high school diploma as being the highest degree they had obtained (see Figure 3). A large majority (82%) of the persons interviewed were civil service employees and held full-time, permanent positions (92%).

For the purpose of comparative analyses, interviewees were placed in discrete categories according to respondent status; for example, while some persons may have belonged to more than one category, that is, *Employees with Disabilities* and *Supervisors*, all persons with disabilities were initially categorized as *Employees with Disabilities* (see Table 1).

Figure 3
Educational Level of Interviewees (N=676)

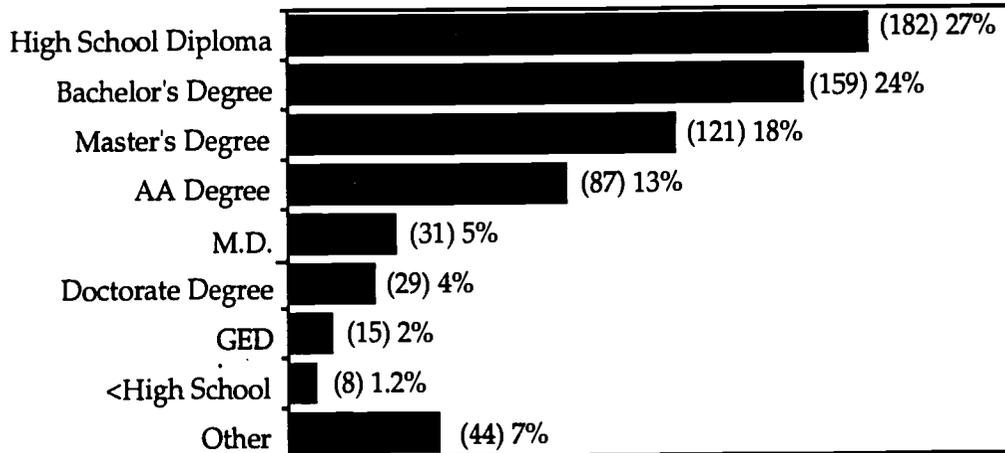


Table 1
Respondent Classification (N=676)

Classification	n
Employees with Disabilities ^a	187
Co-workers	105
Supervisors	58
Other Employees	326

^a13% (n=25) of *Employees with Disabilities* were also *Supervisors*

For the total respondent population, the average age of the interviewees was 43. Interviewees had worked for IHS an average of 10.1 years and earned an average (mean) income of \$37,299. Using the respondent classifications identified earlier, *Supervisors* were older, had worked longer for IHS, and earned more money than any other group (see Table 2). A one-way analysis of variance was used to compare income means among the four groups ($F=17.5, df=3/657, p=.000$). Post hoc comparisons using Fisher's LSD multiple range test indicated that all income means were significantly different from one another except *Employees with Disabilities* and *Other Employees* (see Table 2).

Table 2

Age, Mean Years at IHS, and Mean Income of Interviewees (N=676)

Employee Status	Age	Mean Years at IHS	Mean Income
Employees with Disabilities	45	10.5	\$32,600 ^a
Co-workers	44	10.0	\$41,882 ^b
Supervisors	46	11.4	\$50,319 ^c
Other Employees	41	9.4	\$36,196 ^d

^aSignificantly different from *Co-workers* and *Supervisors* incomes, $p<.01$.

^bSignificantly different from *Employees with Disabilities*, *Supervisors*, and *Other Employees* incomes, $p<.01$.

^cSignificantly different from *Employees with Disabilities*, *Co-workers*, and *Other Employees* incomes, $p<.01$.

^dSignificantly different from *Co-workers* and *Supervisors* incomes, $p<.01$.

An analysis of covariance (ANCOVA) was used to compare income differences among the four groups, while controlling statistically for any differences in income due to education, years worked at IHS, and the current GS level of civil service employees. The ANCOVA was significant ($F=5.85, df=3/484, p=.001$). Post hoc analyses showed that when controlling for these variables, significant differences were found between *Employees with Disabilities* and all other classifications, as well as between *Supervisors* and *Other Employees* (See Table 3).

Employees with Disabilities

In order to determine if the category of respondents, *Employees with Disabilities*, could be considered a single group for the purpose of analyses, the nonparametric Kruskal-Wallis test was used. No significant differences were found among subgroupings of this category, that is, employees with disabilities ($n=112$), employees with disabilities who were also co-workers of persons with disabilities ($n=50$), and employees with disabilities who were also supervisors ($n=25$), when the variables of age, sex, ethnicity, education level, position status, and employment status were considered.

Table 3

Significant Differences in Mean Income after Controlling for Differences due to Education, Years Worked at IHS, and Current GS Level

Employee Classification	Employee Classification			
	Employees w/ Disabilities	Co-workers	Supervisors	Other Employees
Employees with Disabilities	—	Significant Difference	Significant Difference	Significant Difference
Co-workers	Significant ^a Difference	—	—	—
Supervisors	Significant ^b Difference	—	—	Significant Difference
Other Employees	Significant ^c Difference	—	Significant ^d Difference	—

^aF=12.04, *df*=1/237, *p*=.001

^bF=17.71, *df*=1/272, *p*=.000

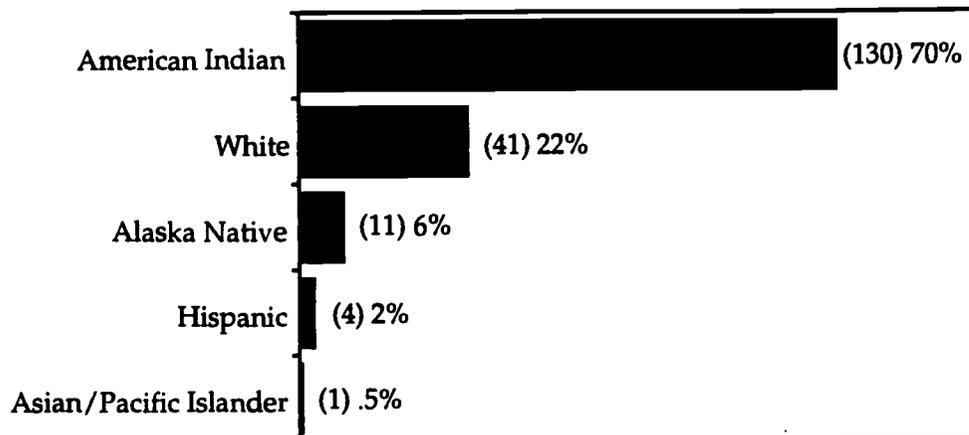
^cF= 5.52, *df*=1/451, *p*=.019

^dF= 5.66, *df*=1/244, *p*=.018

As with the total population of interviewees, the majority of *Employees with Disabilities* were American Indian (see Figure 4) and female (63%). Within ethnic/racial categories, the largest proportion of employees who reported having a disabling

Figure 4

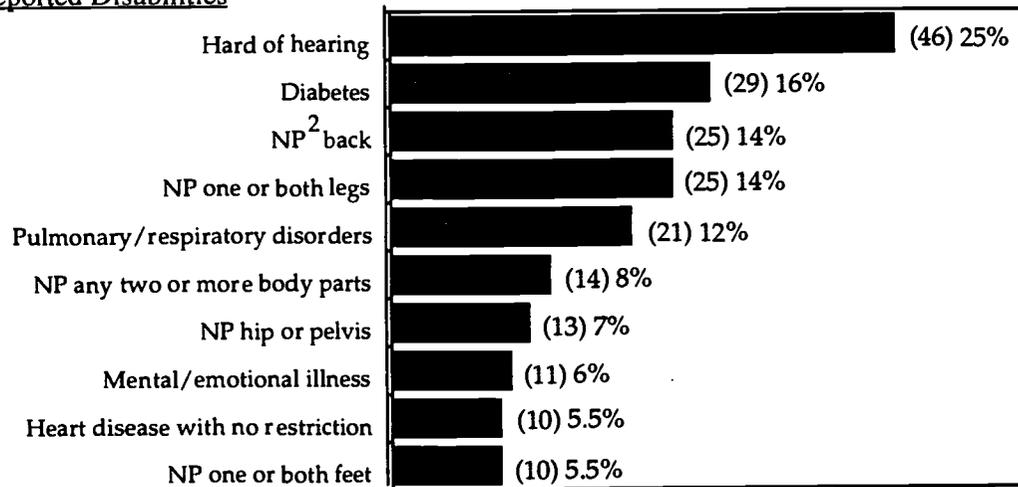
Ethnicity of Employees with Disabilities (n=187)



condition was American Indian (combined with Alaska Native). Specifically, over a third (34%) of these persons reported having a disability, compared to 20% of the white respondents and 29% of the Hispanic respondents. The most frequently reported disabling condition was hard of hearing, followed by diabetes (see Figure 5). As with the total sample of interviewees, the plurality (28%) of *Employees with Disabilities* reported a high school diploma as being the highest degree they had obtained. A large majority (96%) were civil service employees and held full-time, permanent positions (91%).

Figure 5

Top Ten Reported Disabilities ¹



¹Multiple-response item %>100%. A total of 303 disabling conditions were reported, for an average of 1.7 among *Employees with Disabilities*. ²NP refers to *nonparalytic*.

Summary of Environment Statements

In addition to demographic items, the survey instrument consisted of 48 Likert-type statements, with five response choices ranging from "Strongly Agree" to "Strongly Disagree." Results based on responses to these statements have been ranked in terms of the proportion of respondents in each category that agreed with the item; these rankings, also presented as a comparison to the ranked proportions of *Employees with Disabilities*, are summarized on Table 4.

For example, as regards the "IHS Working Environment," across all categories of respondents, interviewees tended to agree that their work sites, including restrooms, were accessible (see Table 4). Interviewees were least satisfied with the IHS affirmative action recruitment program for persons with disabilities, as well as the type of IHS sponsored recreational activities available. In terms of "Individual Needs," interviewees agreed that their supervisor was pleased with their work, with all interviewees least satisfied with the

Table 4

Highest and Lowest Likert-type Items, Ranked According to % Agreeing with Statement

	Employees with Disabilities (n=187)			Co-Workers (n=105)			Supervisors (n=58)			Other Employees (n=326)		
	Ranked Percent	Ranked Mean	Median SD Rating	Ranked Percent	Ranked Mean	Median SD Rating	Ranked Percent	Ranked Mean	Median SD Rating	Ranked Percent	Ranked Mean	Median SD Rating
ASSESSMENT OF IHS WORKING ENVIRONMENT												
My work site is accessible.	1 77%	1 3.73	1.02 4	1 70%	1 3.63	1.11 4	1 79%	1 3.89	1.13 4	2 77%	2 3.76	1.10 4
The restrooms at my work site are accessible.	2 75%	2 3.70	1.13 4	1 70%	3 3.53	1.20 4	3 72%	3 3.73	1.15 4	1 79%	1 3.77	1.14 4
I am satisfied with the IHS affirmative action recruitment program for persons with disabilities.	8 28%	8 2.73	1.12 3	8 24%	7 2.90	.94 3	8 26%	6 3.01	.98 3	9 25%	6 2.97	.85 3
I am satisfied with the type of IHS sponsored recreational activities.	9 26%	9 2.69	1.09 3	9 22%	9 2.53	1.14 2	9 21%	7 2.64	1.11 3	8 26%	8 2.79	1.00 3
ASSESSMENT OF INDIVIDUAL NEEDS												
My supervisor is pleased with my work.	1 87%	1 4.03	.76 4	2 85%	2 4.07	.89 4	1 97%	2 4.34	.54 4	1 91%	1 4.18	.63 4
I am satisfied with my work schedule.	2 83%	2 3.92	.91 4	10 76%	11 3.81	.95 4	7 88%	13 4.10	.74 4	3 84%	5 4.00	.79 4
I am pleased with the degree of career advancement I have achieved at IHS.	17 56%	17 3.33	1.23 4	16 61%	16 3.50	1.14 4	13 83%	14 4.05	1.03 4	16 70%	16 3.73	1.04 4
My position has career potential for upward mobility.	18 51%	18 3.07	1.32 4	18 47%	18 3.00	1.35 3	18 62%	18 3.48	1.36 4	18 57%	18 3.30	1.25 4
IHS RECRUITMENT EFFORTS												
IHS employees need to learn more about disability issues.	1 93%	1 4.27	.60 4	1 88%	1 4.12	.66 4	2 81%	1 4.05	.84 4	1 84%	1 4.06	.70 4
Jobs need to be identified which can easily accommodate persons who have disabilities.	2 84%	2 4.07	.75 4	2 81%	2 3.94	.70 4	4 69%	3 3.79	.76 4	3 80%	2 3.98	.74 4
I am satisfied with IHS personnel procedures in assisting potential employees to secure employment.	8 32%	9 2.81	1.13 3	8 21%	9 2.71	.91 3	8 28%	9 2.74	1.06 3	8 34%	8 2.92	1.02 3
I am satisfied with IHS recruitment efforts as regards identifying American Indians with disabilities for employment within IHS.	9 26%	8 2.83	1.08 3	9 17%	8 2.85	.74 3	9 26%	8 2.98	.96 3	9 22%	9 2.84	.92 3
DISABILITY SPECIFIC ISSUES												
I am capable of describing my disability to co-workers.	1 89%	1 4.12	.66 4									
I feel comfortable in describing my disability to co-workers.	2 77%	2 3.84	.86 4									
I consider myself to be severely disabled.	10 7%	12 1.87	.92 2									
Access to my work site needs to be changed to accommodate my disability.	10 7%	11 2.08	.83 2									
Access to my work site was changed to accommodate my disability.	12 5%	8 2.21	.81 2									

Note. Percent. Ratings of "Agree" and "Strongly Agree" have been combined.
Rating Key: 1=Strongly Disagree, 2=Disagree, 3=Neutral, 4=Agree, 5=Strongly Agree

career potential of their positions. As regards "IHS Recruitment Efforts," all interviewees agreed that IHS employees needed to learn more about disability issues. Interviewees were least satisfied with IHS personnel procedures in assisting potential employees to secure employment and with recruitment efforts that identify American Indians with disabilities for employment with IHS. Finally, in terms of "Disability Specific Issues," 89% of *Employees with Disabilities* agreed that they were *capable* of describing their disability to co-workers, with fewer persons (77%), agreeing that they felt *comfortable* in describing their disability to co-workers. Seven percent (7%) of *Employees with Disabilities* agreed that they considered themselves to be severely disabled.

A one-way analysis of variance was used to compare the means of Likert-type items across the four respondent groups; statistically significant differences were found between several of the items. Specifically, among the nine items in the category "IHS Working Environment," 67% (6) had significant mean differences across respondent categories. For example, regarding the statement, "In general, there is acceptance of employees with disabilities by managers at IHS," a significant difference was found between the mean response of *Supervisors* (3.63) and that of *Employees with Disabilities* (3.11; $p=.01$). (A detailed presentation of significant differences among the respondent groups is given in the *Final Report*.)

Among the 18 items in the category "Individual Needs," 78% (14) had significant mean differences across respondent categories. Of these items, 93% (13) involved significant differences between *Supervisors* and *Employees with Disabilities*. As these items can also be discussed from the perspective of percentage of agreement versus mean differences, where mean differences were found to exist between the responses of *Supervisors* and *Employees with Disabilities*, an independent test of proportions was conducted in order to identify any statistically significant differences between the proportions of respondents in these two categories expressing agreement (combining responses of "Agree" and "Strongly Agree") with a given item. For example, 69% of *Supervisors* agreed with the statement regarding acceptance of employees with disabilities by managers at IHS and 44% of *Employees with Disabilities* agreed; there was a statistically significant difference between these two proportions (see Table 5).

Phase II: The Job Training Demonstration Model

As part of the IHS and AIRRTC collaborative agreement of July 26, 1991, IHS agreed to "designate one service unit for the conduct of a job training demonstration model, authorize designated service unit employees to work with the project, and provide an unpaid work experience to selected Indian persons with disabilities who have the potential for regular Federal employment." IHS also agreed to "place the successfully trained Indian candidates when appropriate vacancies occur."

Table 5
Significant Results of Independent Test of Proportions

Item	Z Score		
	EWD vs. S	CW vs. S	EWD vs. OE
Assessment of IHS Working Environment			
In general, there is acceptance of employees with disabilities at IHS by those persons receiving services.	2.46* (57% vs. 74%)		
In general, there is acceptance of employees with disabilities by managers of IHS.	3.54** (44% vs. 69%)		
Assessment of Individual Needs			
My supervisor is pleased with my work.	2.26* (87% vs. 97%)		
I feel competent in setting my long term career goals.	2.58** (79% vs. 93%)		
My job challenges my abilities.	2.39* (77% vs. 93%)		2.08* (77% vs. 85%)
I am satisfied with the opportunities I have to be creative, or do things differently, on my job.	2.52* (73% vs. 88%)	2.23* (72% vs. 88%)	
I am satisfied with the amount of control I have over my work assignments.	2.15* (73% vs. 86%)		
I feel comfortable in requesting reasonable accommodation for my individual needs from my supervisor.	3.80** (70% vs. 93%)		
My supervisor is supportive of my career development activities.	2.62** (66% vs. 83%)		2.70** (66% vs. 78%)
I am pleased with the degree of career advancement I have achieved at IHS.	3.93** (56% vs. 83%)	2.75** (61% vs. 83%)	2.94** (56% vs. 70%)
IHS Recruitment Efforts			
IHS needs to take specific steps to recruit for employment persons who have disabilities.	3.31** (80% vs. 60%)		

Note. EWD=Employers with Disabilities; S = Supervisors; CW = Co-workers; OE = Other Employees
 * $p \leq .05$ ** $p \leq .01$

The purpose of the job training demonstration model project was to demonstrate effective practices in hiring and providing support services to American Indians with disabilities. In August 1992, PIMC was chosen as the site for the model project, due, in large part, to the enthusiasm with which the director of the hospital, Ms. Anna Albert, responded to the challenge of hosting the pilot effort. Researchers from the AIRRTC were frank in their presentation of the support needed to ensure a successful pilot

experience; specifically, they came to PIMC with experience in vocational rehabilitation and working with American Indians who have disabilities, but with no experience in hospital-based training or the requirements of the IHS and the federal government as an employer. Thus at the outset of the project, a Hospital Advisory Committee (HAC) was formed to assist the research team in finalizing the design of the training effort. According to Gottlieb, Vandergoot, and Lutsky (1991), "the specific types of interaction and support . . . that will best meet an individual employer's needs and result in the establishment of a mutually beneficial relationship must be based on a careful assessment and understanding of the company and its workforce" (p. 27). The HAC met on a monthly basis to assist the research team with better understanding of the needs of PIMC and with project development activities such as trainee recruitment, evaluation, problem-solving, and dissemination planning.

On December 14, 1992, PIMC employees in areas that were most likely to receive trainees were invited to attend a workshop at PIMC, during which disability issues such as reasonable accommodation were presented and discussed. A presentation regarding services available through ARSA was given by the district program supervisor and by the rehabilitation counselor assigned to the project. In addition, Mr. Barry Pokrass, representing EEO from IHS Headquarters, addressed the PIMC employees and expressed the commitment of IHS regarding the hiring of American Indians with disabilities.

Trainees for the model project were identified through ARSA; specifically, the rehabilitation counselor initially screened clients from his caseload and confirmed the appropriateness of trainees with the PIMC personnel officer. Potential trainees were then approved by the HAC before being interviewed by the prospective supervisor. In order to be placed at PIMC, trainees were to: (a) be a client of ARSA, that is, the person's disability constituted a substantial handicap to employment; (b) have a GED; (c) be an enrolled member of an American Indian Nation; and (d) be accepted for placement by the supervisor in the training area.

Nine trainees were identified and approved for participation in the project. Of the nine trainees, six (67%) were considered by vocational rehabilitation to have disabling conditions which were severe. Typically, trainees had more than one disability. Disabling conditions included: Alcohol Abuse (2 persons), Anxiety Disorder, Arthritis, Back Problems, Brain Disorder, Cerebral Palsy, Depression (3 persons), Diabetes, Dysthymic Mental Condition, Epilepsy, Eye Impairment, Knee Impairment, Learning Disability, Mental Retardation (2 persons), and Paralysis of Left Arm. Tribal affiliations included: Navajo (2 persons), Pima (1 person), Tohono O'dham (1 person), and Yaqui (5 persons). Four of the trainees were female, with an average age of 41. Five of the trainees were male, with an average age of 27.

A primary component of the model project involved *supported employment*. Researchers have described supported employment as follows:

Supported employment consists of providing on-the-job supports for an extended period of time (sometimes for the duration of employment) in an integrated work setting where employees without disabilities perform similar or related work. Initially, supported employment services were usually provided by job coaches paid by an outside organization. More recently, there has been increasing emphasis placed on having extended supports provided by supervisors, co-workers, and relatives and friends (Rusch, Conley, & McCaughrin, 1993, p. 31).

In the case of the PIMC model project, the job coach, Mr. Bryan Longie, functioned also as a peer counselor, providing extensive support both during working hours as well as in the evenings to some of the trainees.

On-site job analyses were conducted by the ARSA job coach in conjunction with the ARSA rehabilitation counselor and the PIMC supervisors in whose areas the trainees would be placed. One month after trainees were placed in training, supervisors completed a standard employee evaluation assessing each trainee's performance. The evaluations were forwarded to the personnel officer and reviewed by the HAC. Training periods were established for each trainee, based on his or her experience, current performance, and vocational goal (see Table 6). The average length of time recommended for training was eight months.

Table 6
PIMC Trainee Training Summaries

Placement	Training Period	Duration	Reason for Exit	Status at End of Evaluation Period
Patient Business	9 months	3 months	Found job	Employed
Medical Records	6 months	3 months	Dropped out	Unemployed
Housekeeping	4 months	5 months	Completed training	Employed by PIMC
Housekeeping	4 months	1 month	Dropped out	Unemployed
Social Services	12 months	12 months	—	In training
Engineering	9 months	2 months	Found job	Employed
Medical Records	6 months	6 months	Completed training	Employed by PIMC
Housekeeping	4 months	4 months	Completed training	Resigned from IHS employment contract
Surgical Operations	6 months	5 months	—	In training

Note. Training Period refers to the prescribed length of training; Duration refers to the time the individual trainee actually spent training. All trainees began training in February 1993.

DISCUSSION

The national survey indicated that while employees generally agreed that their work sites are accessible, they also agreed that IHS employees need to learn more about disability issues. IHS employees generally agreed that they were satisfied with their work schedules, but a significantly greater proportion of supervisors than employees with disabilities felt competent in setting long-term career goals, reported having a challenging job, reported having the opportunity to be creative on the job, had control of their work assignments—including feeling comfortable in requesting reasonable accommodation, and expressed satisfaction regarding career development and career advancement. A significantly greater proportion of employees with disabilities, compared to supervisors, agreed that IHS needs to take specific steps to recruit persons who have disabilities for employment.

One important outcome of the national survey, Phase 1 of the collaborative effort, was the design and implementation of Phase 2, the pilot of a job training demonstration model. According to Patton (1980), "the most common causal question in evaluation research is: Does the implemented program lead to the desired outcome? . . ." (p. 276). Detailed accounts of the process evaluation are presented in the *Final Report*. However, in general, IHS personnel at PIMC reported being pleased with the outcome of the project; three trainees were hired by PIMC.

As the purpose of the model project was to demonstrate effective practices in hiring and providing support services to American Indians with disabilities, it is important to note that one unanticipated outcome was the amount of emotional support trainees would need to sustain their involvement, both while in training and after being hired. Supervisors from PIMC, as well as the job coach/peer counselor, worked closely with the trainees to provide on-the-job training and to solve any work-related issues that posed barriers to the success of the trainees and the project in general. However, it was generally believed that the trainees needed even more intensive and sustained support.

CONCLUSIONS AND RECOMMENDATIONS

In discussing corporate support of job advancement, Ellner and Bender (1985) have noted that "some employers feel that they have fulfilled their legal and moral obligations just by providing employment. This often results in jobs that require little skill, pay poorly, and lock the employee into permanent underachievement" (p. 7). The job training demonstration model project at PIMC was structured with full PIMC administrative support to ensure that trainees would have an excellent opportunity to succeed in obtaining well-paying positions with IHS. Trainees were required to have a GED, with training programs structured to meet their individual needs.

However, an unanswered question remains: to what extent should the employer be expected to provide emotional and social support to the trainees and subsequent employees? As reported earlier, research has indicated that attitudes may play a more powerful role in determining success on the job than do specific vocational skills. Specifically, in reviewing the literature related to supported employment, Olney and Salomone (1992) noted that "this body of literature clearly indicates that the most significant barriers to successful rehabilitation are not related to vocational training or skills" (p. 42). These authors reported the following factors as influencing rehabilitation outcomes: the personal characteristics of workers such as impulsivity, dependency, and social immaturity, as well as overdependency on service providers. Additionally, however, it should be noted that they also found factors such as the inappropriate training methods of rehabilitation professionals and the low expectations of rehabilitation professionals to be factors that influence rehabilitation outcomes.

Without a doubt, the problems experienced by trainees at PIMC included factors such as, impulsivity, dependency needs, and financial problems, which affected not only the individual, but also his or her family. Of the IHS employees with disabilities who responded to the national survey, only 7% considered themselves to have a severe disability. Given that two-thirds of the trainees had severe disabilities, and given the multiplicity of their needs, the following recommendations are made regarding future training efforts:

1. Given the extensive periods of training (4 - 12 months) that may be necessary in order for trainees to meet the minimum requirements for even entry-level positions with IHS, sufficient monies need to be available to pay trainees a stipend that would cover their basic costs of living during training.
2. Psychological counseling should be available on an as-needed basis to the trainees. The job coach at PIMC provided a great deal of psychological and emotional support to the trainee—both on and off the job. Supervisors specifically requested that they be assisted with the psychological needs of the trainees through, for example, working group meetings with a psychologist.
3. A staff person from the IHS service unit should be assigned to oversee the project on at least a half-time basis, or 20 hours per week. It is anticipated that the staff person would spend approximately 10 hours per week in activities related to the administration and evaluation of the project, with the remaining 10 hours per week devoted to providing support to the trainees on an as-needed basis. Ideally, a person who could function both as a

job coach and as a peer counselor should be selected for this position. If this is not possible, consideration should be given to hiring a peer counselor, in addition to the job coach.

4. A vocational rehabilitation counselor should be assigned to the project on at least a quarter-time basis, with full administrative support from the public or tribal vocational rehabilitation program associated with the project.

5. A staff person from the IHS research unit should be assigned to the project on at least a quarter-time basis to assist with process and outcome evaluation.

References

- Carbine, M. E., Schwartz, G. E., & Watson, S. D. (1989). *Disability intervention and cost management strategies for the 1990's*. (Available from the Washington Business Group on Health's Institute for Rehabilitation and Disability Management; 229 1/2 Pennsylvania Avenue S.E.; Washington, DC 20003).
- Ellner, J. R. & Bender, H. E. (1985). From passive compliance to creative initiative: Corporate choices for affirmative action. In H. McCarthy (Ed.), *Complete guide to employing persons with disabilities* (pp. 3-13). Albertson, NY: National Center on Employment of the Handicapped, Human Resources Center.
- Gottlieb, A., Vandergoot, D., & Lutsky, L. (1991). The role of the rehabilitation professional in corporate disability management. *Journal of Rehabilitation*, 57(2), 23-28.
- Lonetree, G. L. (1990). Service, resource and training needs of American Indian vocational rehabilitation projects. *American Rehabilitation*, 16(1), 11-15, 27-28.
- Marshall, C. A., Longie, B. J., Miller, J. F., Cerveney, L. K., & Monongye, D. (1994). *A national survey of Indian Health Service employees and the development of a model job training demonstration project: Identifying work opportunities for American Indians and Alaska Natives with disabilities. Final Report*. Flagstaff: Northern Arizona University, Institute for Human Development, Arizona University Affiliated Program, American Indian Rehabilitation Research and Training Center.
- Olney, M. F., & Salomone, P. R. (1992). Empowerment and choice in supported employment: Helping people to help themselves. *Journal of Applied Rehabilitation Counseling*, 23(3), 41-44.
- Patton, M. Q. (1980). *Qualitative evaluation methods*. Beverly Hills: Sage Publications.
- Rusch, F. R., Conley, R. W., & McCaughrin, W. B. (1993). Benefit-cost analysis of supported employment in Illinois. *Journal of Rehabilitation*, 59(2), 31-36.



NOTICE

REPRODUCTION BASIS

This document is covered by a signed "Reproduction Release (Blanket)" form (on file within the ERIC system), encompassing all or classes of documents from its source organization and, therefore, does not require a "Specific Document" Release form.

This document is Federally-funded, or carries its own permission to reproduce, or is otherwise in the public domain and, therefore, may be reproduced by ERIC without a signed Reproduction Release form (either "Specific Document" or "Blanket").