This annotated bibliography lists alphabetically by author 146 books, journal articles, final reports, and conference reports from 1961 to 1965 concerning workshops for the handicapped. Also included is an article, "The Professionally Trained Counselor in the Rehabilitation Workshop," in which George W. Duncan, Jr. discusses the role of the rehabilitation counselor in the workshop. The counselor's major concern is the modification of the vocational behavior of the workshop clients. Individual counseling, caseworking, screening of prospective clients, vocational evaluation, job placement and follow-up, and in-service training are some of the varied duties of the rehabilitation counselor. A list of 25 references follows the article. (RS)
Workshops for the Handicapped

AN ANNOTATED BIBLIOGRAPHY

NO. 2

Compiled by
Joseph Stubbins, Ph.D.

with the assistance of

GEORGE W. DUNCAN, JR.  MARY M. McCULLOCH  JOHN D. SEE

1965
WORKSHOPS FOR THE HANDICAPPED

AN ANNOTATED BIBLIOGRAPHY - No. 2

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
OFFICE OF EDUCATION

THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE
PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS
STATED DO NOT NECESSARILY REPRESENT OFFICIAL OFFICE OF EDUCATION
POSITION OR POLICY.

The preparation and publication of this bibliography was made possible
by a grant from the

Vocational Rehabilitation Administration
Department of Health, Education and Welfare

REHABILITATION COUNSELING PROGRAM
CALIFORNIA STATE COLLEGE AT LOS ANGELES
5151 State College Drive
Los Angeles, California 90032
September 1965
PREFACE

The second issue of WORKSHOPS FOR THE HANDICAPPED: AN ANNOTATED BIBLIOGRAPHY carries the search of the literature through another year ending in May 1965. Bibliographic items missed in the first issue were also included.

The first issue included an article on the uses of consultation in the rehabilitation workshop. In this one, we have included a special article on THE PROFESSIONALLY TRAINED COUNSELOR IN THE REHABILITATION WORKSHOP. We have tried to exploit the literature in writing this, partly to enlarge our own thinking, partly as an exercise to illustrate the gems to be found in the literature. In future issues, other aspects of workshop functioning will be reviewed with the similar purpose of reflecting the state of the literature in that subject.

We gratefully acknowledge the following assistance:

To the VOCATIONAL REHABILITATION ADMINISTRATION, for a continuing grant that covers part of the cost of preparing and publishing this bibliography.

To REHABILITATION LITERATURE for permission to reprint abstracts of items not available to us.

To the NATIONAL ASSOCIATION OF SHELTERED WORKSHOPS AND HOMEBOUND PROGRAMS for assuming the distribution of both this and the first issue.

To the thoughtful persons who sent us unsolicited reports and reprints of research and demonstration projects thus lightening our work.

Due to my absence occasioned by a Fulbright lectureship, much of the editorial work was done by my colleague, Dr. Dorothy Cantrell Perkins. Thanks to her help, the manuscript was readied for the printer more quickly than it might have been otherwise. I am writing this from Lima, Peru. Among other matters of vocational rehabilitation, I am consulting with some Peruvians interested in establishing a first workshop here. I must say that my work here is proceeding under circumstances very different from and more challenging than anything I have met before.

The last word must be reserved for those who use this bibliography; to discover what is percolating among the innovators, to ascertain the tried and proven, or to find some colleagues of similar interests. Their encouragement has carried us through some of the dreary and frustrating aspects of this compilation.

Joseph Stubbins, Ph.D.
Coordinator
Rehabilitation Counseling Program
California State College at Los Angeles
September 1, 1965
CONTENTS

Preface  iv

Annotated Bibliography  1

The Professionally Trained Counselor in the Rehabilitation Workshop
Joseph Stubbins and George W. Duncan, Jr.  53
WORKSHOPS FOR THE HANDICAPPED
AN ANNOTATED BIBLIOGRAPHY


The purpose of the project, patterned after Abilities Inc., Albertson, N. Y., is to develop a demonstration center for the employment of severely disabled and older workers in competitive industrial environment for the purposes of:
1) providing on a continuing basis employment of severely disabled and aged workers;
2) providing vocational training and work adjustment training for severely disabled and aged workers who may enter competitive employment following such training;
3) providing clinical training for rehabilitation counselors and other professional rehabilitation personnel; and
4) stimulating the employment of severely disabled and older workers through demonstration techniques. The discussion of activities and accomplishments covered by the report indicate the overall success of the program.


Based on their personal experience with The Shelter for Handicapped, Inc., Eau Claire, Wisconsin, the authors state that even the smallest communities possess adequate resources to support a workshop for the handicapped. To illustrate, they describe their own workshop's development and operation in terms of community support and leadership, financing, staffing, types of contracts, the rehabilitation program, and the employee population.


A survey of provincial facilities for retarded persons--their type, population, staff, per diem costs, and sources of funds as well as staff parent relations, activity programs, and research. A reading list on residential care is given. (Abstracted from Rehabilit. Lit., 1964, 25 (9), 283.)

This is the report of a study of the characteristics which differentiate successful and unsuccessful retardates in competitive employment. Results indicate that those achieving success spend less time in the workshop and more time in outside employment. No differences were found in intelligence or educational level.


"The goal of the present study was to exploit the strength of the job sample technique by securing more and better job samples from industry, to measure client job sample performance quantitatively, and to demonstrate a method of job sample development (p. 1)." Findings demonstrated that the use of this method was mechanically feasible, and from observation the client seemed to be motivated by the realistic nature of the tasks. To secure a definite knowledge of the existing status of job sample technique, a questionnaire was developed and sent out to 346 hospitals, rehabilitation centers, and workshops. The survey disclosed a wide variation in procedures of work evaluation and further showed a lack of standardized training programs wherein skills and competencies of appraisal techniques are taught to professionals. A preliminary manual on work evaluation was issued in June, 1964, under the title, "Evaluation for work by Job Sample Tasks."


The purpose of this study was to identify the critical requirements of effective rehabilitation workshop floor supervision in terms of required personal attributes, background qualifications, and special training in order to recommend supervisory selection criteria and special training courses to those responsible for recruiting and training workshop supervisors. Also, this study would lay the methodological foundation for a national survey of workshop supervisor requirements if such an extended study
were deemed necessary. To help determine the generalizability of the study's findings, the similarity of observations and judgements of workshop staff respondents from markedly different workshop settings was assessed. The sample consisted of 322 workshop participants--110 administrative staff, 38 professional staff, and 174 floor supervisors. These participants worked in 28 workshops on the West Coast, representing primarily multiple-disability, community-wide, free-standing, self-supporting workshops with either renovative or sub-contract types of operations. During field trips to the 28 workshops in the sample, the investigators administered a 76-item questionnaire which allowed the respondent to rate the degree of desirability of various personal characteristics, background qualifications, and training courses for supervisors. The investigators also employed the Critical Incident technique, interviewing individual workshop participants to collect descriptions of effective and ineffective supervisory behavior. Analysis of the critical incidents and questionnaires is discussed in detail in the results. The following general conclusions and recommendations were made. (1) There exists a high degree of agreement among workshop personnel on the West Coast regarding the requirements of effective workshop supervision. However, specific differences in viewpoints identified between workshop personnel from renovation workshops and sub-contract workshops indicate a need to modify certain selection criteria and training course content for supervisors entering these two types of settings. Differences in viewpoints were also identified between workshop personnel from terminal workshops and highly transitional workshops. Because of the small number of respondents involved in workshops with a greater emphasis upon long term sheltered employment, caution must be exercised with regard to applying these differences to supervisory selection and training practice. (2) To upgrade the quality of supervision in rehabilitation workshops, greater emphasis must be placed upon selecting supervisors with the appropriate personality characteristics than upon developing supervisor training programs which impart special information only. What the floor supervisor is as a person appears more important than what he knows about supervision or rehabilitation; although, knowledge of basic principles and practices of supervision and rehabilitation helps the supervisor perform his role effectively. (3) To compete in the open labor market for persons meeting the personal requirements and qualifications identified in this study, recruiters of workshop supervisory personnel must offer a competitive wage. The floor supervisor that a workshop can hire cheaply may be expensive in terms of ineffective and inefficient work performance in the shop. Fine physical facilities and good equipment alone do not produce an effective rehabilitation workshop program. Competent workshop supervisory personnel supported by well qualified
management and professional staff supply the essential ingredient for success. (Abstract of authors' summary.)


Report on a cooperative pilot project between Hillside Hospital, Glen Oaks, New York and Altro Health and Rehabilitation Services, Inc., New York City, in which a sheltered workshop environment was used as a therapeutic tool in the psychological treatment of mental patients.


A description of the program of Altro Health and Rehabilitation Services of New York City and its workshop which serves cardiac patients. The report includes an outline of its program, purpose of the workshop, and psychosocial factors influencing cardiac patient rehabilitation. (Summary of abstract in *Rehabilit. Lit.*, 1965, 26 (1), 27.)


"A four year demonstration project attempting to strengthen vocational rehabilitation services for severely disabled and to improve working relationships between private and public health and welfare agencies. The project demonstrated the feasibility and value of working with the age group forty-five years or older, and provided future guidelines for workshop programs aimed at rehabilitating older disabled persons." (Rehabilit. Lit., 1964, 25 (12), 378.)


The publication of this report marks the culmination of six years of work by the National Institute on Workshop Standards. It is the first large scale attempt to develop comprehensive workshop standards, and as such represents a major contribution to the literature and philosophy of the workshop movement. It also provides a practical measure-
ment instrument whereby individual workshop people can evaluate their own programs.

The end product of this lengthy study is two evaluative instruments, one labeled "For Extended Employment Workshops Only," and the other "For Transitional Workshops Only." They offer criteria and standards in the following major areas: organization and administration, services, facilities, staff, and community relations. The formal report records in detail the research and development of these two instruments and includes the forms, questionnaires, letters, statistics, etc., that were a part of this study. Instructions are also given for the use and scoring of the two evaluative instruments.


Review of the first seven years' operation of Altro Health and Rehabilitation Services, Inc. The author discusses the importance to the mental patient of having an intermediary work experience between that of the hospital and the real world. Also noted is the importance of recognizing that the workshop is a transitional and therapeutic experience for the patient, and not a permanent sheltered employment.


The author details the experiences of a pilot project at the Chicago Jewish Vocational Center concerned with the use of role-playing as a means of providing practice for skill in meeting situational demands, of dealing with deficiencies in social experience and awareness, and of conditioning experience in establishing self-confidence. This training device proved highly practical in helping the handicapped overcome personal and social deficits, and in helping them obtain and maintain employment.


Brennan, chief of counseling psychology, Veterans Administration Hospital, Bedford, Massachusetts, explains the development, operation, and experiences of the Modified Community Employment at Bedford. Job contracts
are brought into the hospital where mental patients perform the work and receive payment in a similar manner to outside industrial paid-work programs. This program has resulted in shorter hospitalization and reduced readmissions. In addition to the increased patient rehabilitation, the author cites the improvement of employer and community attitudes toward the mental patient and his reintegration into society.


A report consisting of three parts: a study of the characteristics and vocational success of a group of 1,730 psychiatric patients released to the community; intensive treatment and research of 169 severely disabled patients, including psychometric findings and a description of the program; and, lastly, a discussion of the results and conclusions of the study. The authors suggest that greater stress be laid on more cognitive factors in rehabilitation rather than upon personality factors; that more treatment be given the less seriously disabled rather than concentrating intensive vocational and casework services on the most chronic patients; and that more thorough follow-up be given the moderately involved patient.


The author, an architect who specializes in the design of buildings for the handicapped, discusses the design elements of the Shore School and Training Center for Retarded Children in Evanston, Illinois. Control of such factors as light, heat, noise, ventilation, and odors and the provision of special toilet and hygienic facilities are necessary.


"The paper examines the work sample approach, client performances in sheltered workshops and psychometric evaluative techniques that are included in many existing prevocational programs for the mentally retarded adolescent. In addition, comments pertaining to some of the objectives and methods utilized by these assessment tools in predicting work potential are included." (Author's summary.)

Accident prevention goals and safety precautions to be observed in designing, arranging, and managing a workshop program for the blind are discussed. Included is a checklist for planning, analysis, and hazard elimination in new and existing facilities. The author states that accidents can be kept to a minimum by proper engineering of physical facilities and a proper psychological atmosphere.


The Scale of Employability for Handicapped Persons was constructed at the Chicago Jewish Vocational Service (CJVS) as an instrument for predicting employment outcomes for handicapped persons seeking rehabilitation. It is composed of three separate rating scales, each of which consists of a number of subscales and items therein. Each rating scale has its own total score and each scale was analyzed separately. Except for two special populations, all subjects were persons handicapped by some emotional, mental, or physical disability, who were participating in a rehabilitation workshop program. Major conclusions of the study were: (1) The percentage of persons with high scores who had successful work experiences subsequent to the workshop program remained stable for a three-year period. There were few switches from one category to the other, but only a few. (2) Over a two-to three-year period the employment pattern of clients who achieved high scores tended to stabilize. They either became employed on a regular basis or reverted to their original workless status. (3) When successful high score clients were compared with unsuccessful high score clients, no statistically significant differences were found in level of education, I.Q., or diagnosis. Some trend, although not a significant difference, was found for amount of pre-workshop experience, age at entry into the program, and sex. The outstanding differentiation was that of race, non-whites having significantly less success than white clients.


The authors describe and evaluate a program of industrial therapy as it was set-up and carried out at Pilgrim State Hospital in New York state. The aim of their program is
rehabilitation "...particularly in the area of preparing patients to meet the demands of private industry upon hospital release (p. 631)." Through a voluntary work program attempts were made to place the patient in a job situation according to his physical and psychological needs and to correlate the job assignment with the individual's total treatment objective. The industrial supervisors and the doctors coordinated their efforts and kept close follow-up to determine placement success. It was concluded that close cooperation of the hospital administration and all disciplines involved as well as the personal attention given each patient are factors in the success of such a program.


In this study of 85 secondary school age retarded students, the authors found retarded girl students to have the same occupational values as normal girls, but the retarded boy students differed from normal. They appeared to assign less importance to relations with others and less interest in the intrinsic nature of the job.


The purpose of this ongoing program at Medfield State Hospital, Massachusetts, is to prepare patients for employment in the community. In order to accomplish this, patients are assigned to jobs in the hospital that are specific, varied, and individual. Patients are evaluated by the work supervisors bi-weekly and are gradually moved to day work placements outside the hospital. A half-way house on the hospital grounds also helps in preparing for community living. Results indicate that such a work program has greater potential than traditional programs for treating chronic schizophrenics. With its focus on meaningful work experiences, the rehabilitation program is designed to use resources available in any state mental hospital. Emphasized in particular is the use of the rehabilitation counselor as a core member of the rehabilitation team which, through a structured program, prepares patients for work in the community.

This study was designed to provide some information about the hiring practices of the business world. A series of questions were presented to 67 employers. "Given job applicants who display various types of personal difficulties, which ones will probably be hired and which will not? Which ones will be identified as mentally ill? Are there significant inter-relationships between such identification and hiring judgments? And what is mental illness as far as the businessman is concerned? (p. 25)." A general conclusion was that work opportunities for mental patients have a poor prognosis. This is attributed largely to the social prejudice toward mental illness and misinformation about mental illness on the part of the employers.


There is a need to develop new methods for predicting the successful rehabilitation of clients. The study attempted to demonstrate whether relationships exist between ego-strength, motivation level, degree of disability, rehabilitation activity, and rehabilitation potential. The degree of disability appears to account for much of the variance that was observed. The study pointed out a fundamental problem—that no realistic work-related criterion measure amenable to interval scaling has been found.


This project was designed to develop a work adjustment center for older disabled persons and individuals with emotional problems. Procedures and techniques were developed and tested, using as models projects of the Jewish Vocational Service, Chicago, Illinois. During the second project year the number of older disabled persons receiving services increased and placement of these clients grew more than fifty per cent.
Davis Memorial Goodwill Industries. To demonstrate that a larger number of severely disabled persons can be rehabilitated through establishing physical medicine and rehabilitation services as a part of a program of a sheltered workshop. (Project no 71). Washington, D.C.: Davis Memorial Goodwill Industries, 1961. 91 pp. Mimeo.

A description of comprehensive rehabilitation services in a sheltered workshop setting. The center offered an integration of medical, psychological, social and vocational services under professional supervision, primarily emphasizing evaluation. As the project developed, greater stress was placed on treatment, such as: psychological counseling, improvement of work tolerance, improvement of work adjustment, and training. In conclusion it was felt that the community at large did not take full advantage of the rehabilitation services because of the fees charged.


The purpose of the project is to study the employment problems of young adults with epilepsy in order to isolate some of the significant variables determining "employability" or "employment readiness," and ultimately determining vocational success or failure.


This publication is a directory to fifty-four California workshops doing subcontract work. The workshops are identified as to the type of subcontracts they are set up to handle. A quick reference index allows the reader to find a workshop with certain job capabilities in any part of the state. This type of publication should be of special interest to business and manufacturing firms with work to contract.

A cooperative endeavor between a state employment office and a division of vocational rehabilitation to place disabled persons presenting special problems. Through the use of personal adjustment training sessions, work placement, workshop placement, and counselor follow-up many new employer contacts have resulted. Fifty years was the mean age of clients placed on jobs, a fact which gave this placement project geriatric implications not foreseen when the project was planned.


The overall purpose of this study is to determine the efficiency of the existing Tower System for the vocational evaluation of the disabled. The primary objectives are: (1) to ascertain the current use and applicability of Tower in the numerous rehabilitation centers throughout the country employing the system; (2) to study the predictive validity of the Tower System, and/or vocational recommendations made on the basis of the Tower System, at a representative number of rehabilitation centers that currently employ Tower for vocational evaluation; and (3) on the basis of the results to be obtained from (1) and (2), to specify which Tower areas should be modified, improved and/or extended. The accomplishments to date are summarized.


The project is an exploratory appraisal of factors affecting employability of the paraplegic--his self-concept, stereotyped beliefs about employment of the paraplegic, and employers' attitudes, expectations, and hiring practices. It was concluded that paraplegics are discriminated against in employment as a member of a disabled stereotype, yet they differ in their capabilities, social class, education, and
former occupational status. Findings support the hypothesis proposed by the study". . . traditional beliefs which underestimate the abilities of the handicapped workers create a block to their employment, and that these beliefs are subject to change, through education of employers, and through extending their personal acquaintance with the paraplegic, thus increasing employment opportunities for these workers (p. 87)."


The project proposed to test in a competitive work situation the hypothesis that the concept a physically limited person has of himself as a work affects his adjustment to employment. An investigation of the vocational adjustment of employed handicapped persons was carried out in four areas: vocational adjustment; individual motivational-perceptual pattern; development of motivational-perceptual pattern; and current position. The report stressed the idea of the self-concept as a developmental process and provided detailed analyses of the handicapped by type of disability, skill level, career fields, attitudes, work history, vocational needs, illness rates, work injury rates, and comparisons of socio-economic data. The conclusions demonstrated that vocational self-concepts, attitudes and values are influential variables in the work adjustment of the handicapped. It was recommended that a therapeutic facility offering counseling, guidance, and psychotherapy in addition to vocational training and work experience would hasten the vocational adjustment of disabled persons.


An outline of the determination of the need for a sheltered workshop and development of a working plan, including discussions on workshop program, location and size of shop, examples of work, equipment, staff, legal requirements, and source of income.

"The information provided in this article is meant to be helpful to both lay and professional persons interested in starting a sheltered workshop that will provide physically, mentally, and socially handicapped individuals with remunerative employment and one or more rehabilitative activities of an educational, psychosocial, therapeutic, vocational or spiritual nature (p. 25)." Discussed in detail are the following three areas of concern: (1) determining that a need really exists for a new sheltered workshop; (2) determining the availability of adequate community resources to start the sheltered workshop; and (3) determining the availability of additional support factors once the workshop is started.


The purpose of this study was to provide effective evaluation facilities for the cerebral palsied using a technique that considered the physical, mental, and emotional aspects of the cerebral palsied individual with regard to industrial demands in order to determine their suitability for workshop or competitive employment. The procedure used the work sample technique to assess vocational performance and predict successful adjustment. Findings showed that about 20 per cent were trainable and placeable, 20 per cent were unemployable, and the remaining 60 per cent were in need of the services of a terminal sheltered workshop. It was also found that higher intelligence was usually accompanied by greater physical incapacity. The client's ability to achieve a satisfactory work adjustment was dependent on his family relationships, emotional involvement, life experiences, attitudes and motivation. In conclusion the limitations of the job sample technique were recognized and specific shortcomings of the method were outlined in detail.
workshops are becoming more like vocational adjustment centers. The Vocational Adjustment Center (VAC) of the Chicago Jewish Vocational Service is cited as an example, and there is an informative discussion of the components and practices essential for this type of workshop. One of the ultimate developments will be to have professionally trained counselors acting as line foremen who will modify and manipulate the work environment to meet the developmental needs of the individual client.


This report is based on responses to a questionnaire that was sent to sixty-five countries, thirty-seven of which replied. The questionnaire dealt with basic facts related to sheltered employment, and used structured questions such as check list and multiple choice. Analysis and discussion cover the following areas: size and composition of programs, goals of sheltered employment, ownership and control, medical and social functions and organizations, production and sales, management, labor, and homebound work.


The purpose of this project is to provide "socialization experiences prior to and in conjunction with vocational placement" and to use "transitional employment experience within a realistic work situation carried out under the supervision of agency staff and in cooperation with an employer (p.1)."


The purposes of the study are to analyze the effectiveness of present curricula, training and counseling, to determine the extent of vocational realism in mentally retarded adolescents, and to assist school districts to evaluate their existing programs. Continuation of the project is recommended in order to initiate a demonstration project and an experimental center.

Experts in the mental illness and rehabilitation field discuss the use of paid employment as a therapeutic technique in the fight against mental illness and deficiency. While the discussion focused primarily on the hospital setting, this report should be of interest to anyone working with the mentally ill. It was generally concluded that patients are capable of reaching vocational goals far beyond their own concepts and the expectations of many experienced rehabilitation specialists.


The two major purposes of the project are: (1) To demonstrate that a special interagency program which (a) starts in early adolescence and (b) focuses on providing a positive sheltered work experience, can be built and can make an effective contribution to the vocational habilitation of emotionally disturbed adolescents residing in residential treatment centers, group foster homes, and individual foster homes. (2) To study the process of vocational development for these emotionally disturbed adolescents and to study factors associated with their vocational growth and their degree of vocational success. It is hypothesized that work-focused vocational programming initiated in early adolescence will be more effective in promoting ultimate success in competitive employment for emotionally disturbed youngsters than similar programming started in later adolescence. It is expected that emotionally disturbed children who begin receiving concrete vocational services at the age of 14 or 15 are most likely to be successful in their vocational adjustment than similar children whose vocational programming begins at ages 16-18. Experimental and control groups are set up to test this hypothesis.


The author, who is executive director of the Chicago Jewish Vocational Service, offers a conceptualization of the current evolutionary trend in the workshop movement. Gellman notes a two stage process: first, terminal workshops are becoming more rehabilitation oriented; and second, the transitional

This guide discusses three major areas involved in the administration of a workshop, general policies and procedures, manual for shop workers, and health policies and procedures.

Greater Providence Chapter Rhode Island Association for Retarded Children. Request for continuation grant and first annual progress report. Providence, Rhode Island: The Occupational Training Center for the Mentally Retarded Young Adults of Rhode Island, 1960. 61 pp. Ditto.

The Occupational Training Center is a research demonstration project to test and implement procedures and processes of vocational rehabilitation of severely retarded young adults through utilization and adaptation of insights and experiences gained by similarly sponsored federal projects elsewhere; to engage in such research as may be deemed necessary to further the refinement of said procedures and processes; to train a number of severely retarded persons for remunerative employment; to give impetus to private and voluntary agencies to offer services of vocational rehabilitation to mentally retarded persons who heretofore had been deemed unfeasible as candidates for existing training and adjustment programs; to provide evaluation and training programs and other ancillary services both for retarded individuals capable of eventual placement in industry, and for those requiring sheltered employment on a long term basis; to offer specialized counseling services for families of retarded individuals so as to assist them in ameliorating the family and the community living situation.


Demonstrates the use of a private non-sectarian occupational training center to provide community-wide services to the mentally retarded by working with public schools, social agencies and the Department of Vocational Rehabilitation.

"Discusses accommodative patterns toward self-sustaining employment of 40 ex-mental patients who resided at Conrad House, a psychiatric halfway house in San Francisco, from August, 1961, through July, 1962. From analysis of the accommodative patterns of residents who were selected on an experimental basis, indicators have been developed for further identifying and properly selecting the type of patient who can benefit most from this halfway house approach to rehabilitation. The material presented is part of a 3 year demonstration research project which intends to reveal to what extent employable or trainable psychiatric and mentally retarded post-hospitalized patients can be rehabilitated in a living situation which integrates patients with non-patients. Specifically, the importance of job pursuit and normal peer associations in getting established in the community is presented and stressed to ex-mental patients (p. 244)."


Behavioral changes of 27 chronic schizophrenics were compared for exposure to workshop activity versus occupational therapy, flat rate pay versus piece work pay; and group work versus individual work. Data are provided consistent with previous study. The author found workshop activity tended to produce greater psychological improvement than did occupational therapy. Due to the size and nature of the group studied the author cautions against generalizations.


The purpose of the project was to develop means of classifying and evaluating cerebral palsied adults in order to determine their vocational potential and to thereby increase the number of cerebral palsied persons in remunerative employment. The new knowledge and techniques of a prototype research project conducted by the Institute for the Crippled and Disabled, New York, provided the methods used in the study. The most significant prognostic factors for the employability are good hand usage with at least one hand, adequate level of intelligence,
and motivation. Simulated on-the-job training may upgrade the level of employability. The project did have difficulty finding sufficient numbers of clients to justify the cost of the program.


Based on a prototype project conducted in New York by the Institute for the Crippled and Disabled in 1955, this project appears to have been successful in serving the one per cent of the population they claimed needed their services. In discussing the prototype project, the authors point out three advantages of the evaluation process as it was carried out in both projects (work samples). The advantages are: (1) by ascertaining the type of work the individual can adequately perform, he can frequently be placed immediately; (2) the process can point out types of training that would be beneficial to the individual; and (3) the process itself, which resembles a working situation, can help boost the morale of the individual. The benefits of the project are discussed.


Higgins, president of the National Association of Sheltered Workshops and Homebound Programs, gives a brief historical sketch of the workshop movement, as well as the major issues facing workshops today; integration into the community, development of standards and accreditation and definitions of the roles and functions.


The author states that the purpose of the project was "...to assess the vocational assets and liabilities of the retarded young adult, to provide personal adjustment training as needed, to introduce the client to the demands of the working world by providing work experience in the sheltered setting, and to aid the client in finding and holding competitive employment (p. 8)." Findings indicate that the clients that are most amenable to
counseling in the workshop make the best adjustment when placed outside. Directive counseling rather than non-directive is more successful with retardates. The program furnished work adjustment training concurrent with secondary school education and through close cooperation with the public school system, specific vocational objectives can be better attained.


This project established an occupational training center for mental retardates to demonstrate that with proper selection, evaluation, training, and placement procedures the mentally retarded are employable. Predictive measures established in other projects are being used and evaluated, with new methods being developed as the needs arise. It is hoped that the number of clients receiving services at the Center will warrant the hiring of a full time vocational rehabilitation counselor to work only with the mentally retarded. Findings to date show that few retardates have a realistic view of their abilities and, in most cases, have a negative self-concept. The report also notes that a residential center for adult retardates would enable them to remain in the community rather than in state institutions or in inadequate boarding houses.


Presents history, problems, mechanics, administration and results of a paid employment program in the Sheltered Workshop at Metropolitan State Hospital in Waltham, Massachusetts. It is uniquely sponsored: a community voluntary agency, a state hospital and state rehabilitation commission. The role of the voluntary health agency in the paid employment program within a state institution is discussed. The goals of the project were to: (1) provide a supportive atmosphere for the development of healthier social relationships; (2) enable patients to learn to work productively with each other and under supervision; (3) provide a meaningful work experience which would teach skills and prepare the patients for employment outside the hospital; and (4) enable patients to earn a wage for work produced and thus provide an opportunity for them to have established savings prior to leaving the hospital. The
results, with discussion, statistics and tables, as well as conclusions, give an indication of the degree of success achieved in the program. Suggestions for improvement to others contemplating similar programs are made.


"This study suggests objective methods for selecting clients in workshop programs. The MMPI may prove to be a valuable screening instrument. However, the present Personnel Application Form eliciting educational, social, psychological and physical information was able to predict success or failure in four items: married or never married; had children or childless; previous vocational training or none; and extent of work experience. The study also included definitions of the various types of workshops, a chart comparing programs of sheltered and rehabilitation workshops, job descriptions, and employment record forms." (Rehabilit. Lit., 1964, 25 (12), 365.)


The purposes of this project are: (1) to identify some of the major psychological and physiological variables related to the vocational and non-vocational adjustment of physically disabled persons; (2) to develop psychological and physiological measures of these variables; and (3) to study the complex intercorrelations of these two types of measures and develop multi-variate predictors where possible. Physiological measures were obtained using specially developed electronic telemetering techniques, and making biochemical studies where appropriate. Psychological measures were obtained through the use of specially constructed or modified psychological tests and the application of previously standardized instruments.


The special workshop is for both terminal and transitional clients. Ninety-five per cent of the clients fall in the first category, five per cent in the latter. In addition to providing remunerative employment, the workshop plays a role in the prevocational and vocational training. Workshop philosophy, how the workshop is organized and functions are discussed.

A manual dealing with the issues involved in the vocational rehabilitation of the mentally retarded, which includes information on the kinds of client services offered, as well as suggestions on the organization and operation of a sheltered workshop.


The objective of the program was to demonstrate the effectiveness of the team approach in promoting successful rehabilitation of mentally ill clients in general hospitals through intensive evaluation and treatment services before and after discharge. Inclusion of the vocational rehabilitation counselor as a team member from the time treatment was begun through follow-up was based on the thesis that vocational planning should accompany therapy. The importance of the supportive effect of remunerative employment was recognized. The study further attempted to ascertain the counselor's major difficulties in effecting the rehabilitation of the mentally ill. These problem areas appeared to be: (1) inadequate treatment and hurried referrals, resulting in the client's being unpredictable, unmotivated and negative in self-concept; (2) inadequate out-patient facilities, with too few halfway houses and no local psychiatric consultation; and (3) the overall social stigma connected with mental illness.


In order to meet the needs of the older disabled unemployed person in St. Louis, Missouri, and demonstrate the feasibility of their vocational rehabilitation, the project is designed as a prototype of Project no. 177 of Federation Employment and Guidance Service, New York City, entitled "A Project to Demonstrate the Feasibility
of Vocational Rehabilitation for Disabled, Vocationally Handicapped Persons 60 Years of Age and Over."* The report discusses the method, development and evaluation of the program. Data seem to indicate the success of the program to date.


Ditto.

This project is a selected demonstration based on project RD-404, "An Evaluation Study and Demonstration Work Experience Program for the Mentally Retarded During Their Last Year in Public School," conducted by the Jewish Vocational Service of Milwaukee, Wisconsin 1959-1962. In the Milwaukee program, the prototype was developed for rehabilitation service to mentally retarded school youth based on cooperative activity of a public school system, a state vocational rehabilitation agency, and a private rehabilitation agency. The main purpose of this project is to further demonstrate, develop, and extend the cooperative rehabilitation plan established by the Milwaukee prototype. Additional subsidiary purposes are: (1) to extend rehabilitation services, including preparation for employment to a lower range of retardates, having I.Q.s of 40-65; (2) to further test the cooperative school workshop technique as a means to prepare this group of retarded adolescents for employment; (3) to further test the prototype method in another geographical area and different kind of school district organization; (4) to develop guidelines for the retarded for more effective education in the schools, more effective rehabilitation agency services, and more effective coordination of community facilities toward achieving gainful employment and vocational adjustment; and (5) to further explore specific techniques for vocational training, placement, and on-the-job adjustment of this I.Q. group. No statistics to indicate how many clients have been placed, etc., are given.

*A study reported elsewhere in this bibliography under: Jewish Vocational Service Milwaukee, Wisconsin. An evaluation study and demonstration work experience for the mentally retarded during their last year in public school. (Final report of VRA project no 404). Milwaukee, Wisconsin: Jewish Vocational Service, 1964.

The Vocational Adjustment Center (VAC), a demonstration project, is modeled after a prototype program conducted by the Jewish Vocational Service of Chicago.* The parent project provided the VAC with its basic tenet: Psychiatrically disabled persons require and can respond to guided work experience which takes into consideration their special vocational needs and handicaps. The main tasks of both programs, therefore, was to diagnose correctly the nature of such vocational handicaps and to provide the assistance necessary to overcome them. Following the results, which indicate success of the program, is an extensive discussion of the project itself in terms of clients served, limitations they were under, and how they overcame these limitations.


The purpose of this research project was to extend vocational rehabilitation services to mental patients soon to be returned into the community and to determine what the workshop experience contributed to the vocational rehabilitation of schizophrenic patients in the areas of client selection, client adjustment, and the prediction of successful vocational rehabilitation. Side issues influenced were those of interagency and community relationships, where better understanding of each other's function and more effective use of community resources resulted. It brought about the assignment of rehabilitation counselors to state hospitals and introduced the techniques of group counseling,
temporary jobs used to develop confidence, and daily work in the community with return to the hospital at night. "It was recognized that a person's self-perception, his view of work and his total adjustment were factors that appeared more significant than skills, aptitudes, or physical ability in determining the effectiveness of his vocational adjustment (p. 2)." The study demonstrated that the successful rehabilitation of schizophrenics may result with the use of pre-release vocational rehabilitation services in the hospital and extensive after-care services for the post-hospital patient.


This was a demonstration program, designed to offer one type of solution to the vocational problems of 40 selected problem youths, school dropouts from disadvantaged backgrounds, aged 16-19, who were entering the job market with severe handicaps. The final objective was to enable these young people to make an adjustment on jobs in business and industry. To secure these objectives, the following techniques were utilized: (1) evaluation of vocational potential; (2) vocational counseling; (3) training in work habits and work attitudes; (4) on-the-job training in business and industry; and (5) post-placement counseling. The authors state that results show it is possible to assist 4 out of 5 school dropouts of this age to the point of working, half of which obtain some stability on a job which provides real occupational training.


The objectives of this program were to demonstrate and evaluate cooperative services between public schools and rehabilitation agencies serving mentally retarded adolescents; to provide diagnostic materials and educational and social records that may enable the prediction of successful vocational adjustment and placement; and to develop guides for curriculum planning and work experience programs for mentally retarded persons. A general conclusion was that to correlate work experience with school activities of the retardates is essential to their vocational adjustment.

A program was designed for four severely handicapped adults in a community workshop. Development of the program, the workshop setting, characteristics of the adults, and the aims and results of the project are presented. Conclusions were that workshop programs should be expanded to include the vocationally productive, those in terminal work programs, and those in adult development programs; that the severely handicapped can fit into a productive setting without loss to the shop; and that providing supervised employment may be less expensive than institutionalizing persons who cannot support themselves.


"The author concludes that vocational rehabilitation agencies find it difficult to predict the schizophrenic's potential for successful rehabilitation, and suggests a method of sorting patients by degree of assumed rehabilitation potential through the use of the Social Maturity Index. In this way services are concentrated on the patients most likely to succeed." *(Rehabilit. Lit.*, 1965, 26 (2), 57.)*


The purpose of the study was to compare ratings by staff members of the Independent Living Rehabilitation Program (ILRP, a project of San Francisco Aid to Retarded Children, Inc.) of the social competency of a group of enrollees characterized as "lower vocational potential." The ILRP was a demonstration project for rehabilitating seriously handicapped mentally retarded young adults, 18 to 35 years of age, so that they could take their places as productive citizens in the community. Part of the program involved working in a sheltered workshop. The ILRP Social Competency Ratings are ratings of enrollees by staff members on items associated with each enrollee's general and specific activities in the program. There were two types of ratings: (1) those made by the staff as a whole on a consensus basis, on relatively general aspects of social competency; and (2) those made by individual staff members assigned to specific aspects of the program, on items associated with specific
aspects of performance or behavior in that phase of the program. Of the conclusions listed, the following has most relevance for sheltered workshops: "Staff ratings on the ILRP Social Competency Ratings offer promise for a clearer definition of individual differences in vocational potential among enrollees for planning programs, and for evaluating the effectiveness of the ILRP. (p. 122)."


The purpose of the Opportunity Training Center is to demonstrate the feasibility of providing prevocational training through workshop programs for mentally retarded young adults: (1) from rural communities, largely agricultural; (2) from cities with population less than 40,000; and (3) for retardates having an institutional background.


Residents of New Jersey facilities for the retarded may be included in one of two wage programs if it is determined that: (1) their status is no longer that of a trainee, they cannot be released from the institution, and they contribute to its economy; or (2) because of past training they are ready for a sheltered work program prior to anticipated release from the facility. The advantages of these programs concern residents' status considerations, specialized training in relations with supervisors and training in social activities to be assumed in the community, clarification of the institutions' personnel needs, and the development of potential employees.


Korn, representing the U.S. Department of Labor, explains the provisions of the Fair Labor Standards Act affecting workshop wage rates.

Kramer, Planning Consultant for the San Francisco Community Rehabilitation Workshop, describes the first year of existence of a workshop whose objectives were to: (1) plan an administrative structure that can work effectively with the supporting agencies, efficient in its own operation, so that maximum services can be provided to both long term and transient clients on a sustaining basis; (2) develop a fee structure and a budget which recognizes the realities of both cost and income; and (3) continue the development of current activities in unifying diagnostic and vocational rehabilitation workshop services under one administrative structure. He discusses recommendations for the future existence of the workshop and how original objectives can be further developed.


A coordinated demonstration project with the following objectives: (1) the modification and application of techniques of work-evaluation which have been used with persons of other disabilities; (2) to demonstrate that mental patients who are often considered "not feasible" for rehabilitation can be rehabilitated; (3) to demonstrate the effectiveness of the cooperation of three existing agencies in providing a comprehensive team approach in the rehabilitation of mental patients; (4) to demonstrate the contributions of work adjustment experience in a non-hospital setting to the eventual rehabilitation of mental patients; and (5) to study the problem and methods of placement for post-hospitalized patients. In discussing the implications of the program, the author concludes that the following factors are outstanding in successful rehabilitation: (1) motivation to work; (2) positive attitudes toward work; and (3) the desire to leave the hospital and the willingness to assume the responsibilities of normal living.


The purpose of the study is to increase the employment opportunities for retarded persons and to demonstrate to the community the effectiveness of vocational rehabilitation.
services. An attempt is also being made to develop an occupational success predictive battery. Belief is that even though personality factors may be of real importance in job success, an important intellectual dimension exists that is not adequately measured by most commonly used intelligence tests. It is expected that findings will demonstrate that personality improvement will be a result of improved aptitude functioning.


"A discussion of the therapeutic values of industrial work in an occupational therapy department of a hospital, criteria qualifying work as therapeutic, and some suggestions on the administration of such a project. Types of work currently being used, data from the operation of the industrial therapy project over a two and a half year period, and case histories illustrating benefits of the program are discussed." (Rehabilit. Lit., 1965, 26 (4), 124.)


Data from a sample of 899 severely disabled persons were analyzed to determine factors most predictive of work success. Age, extent of education, length of time from onset of disability to resumption of employment, and return to pre-disability employment were variables which correlated with vocational recovery.


In this study a program of selection, evaluation, and training of the mentally retarded was developed through the application of new rehabilitative techniques and knowledge. Its purpose was to define and solve problems peculiar to sheltered workshops for the mentally retarded, and to strengthen and increase community resources for the rehabilitation of these clients. A brief summary of the program is provided.

A description of the successful vocational rehabilitation of a group of cerebral palsied clients, which entailed training in job activities and intensive counseling sessions to overcome client resistance to a vocation having menial tasks.


The study disclosed that the majority of persons admitted to mental hospitals for the first time are semi-skilled or unskilled, and that those with lower skill levels remain in the hospital longer. It was further found that most persons released from mental hospitals do not have secure jobs to return to and usually will receive a lower salary. The high rate of recidivism and unemployment all demonstrate the need for intensive after-care programs. Descriptions were given of evaluation, placement, and inter-agency cooperation. The importance of work as a therapeutic rehabilitative measure was stressed.


The purpose of the two institutes was to assist secondary schools in the establishment of work-education programs. The first institute was planned for administrators and supervisors within the secondary school to assist them in establishing guidelines for effective programs. Major presentations were: Morton A. Seidenfeld, "The National Challenge: Mental Retardation;" Julius S. Cohen, "The Retarded in the Work World;" Evelyn Deno, "Work Assessment of Secondary Youth in the Minneapolis School Project;" and Charles S. Eskridge, "An Approach through Special Education and Vocational Rehabilitation in Preparing Educable Retarded Youth for Work." These presentations formed the focus of the discussion in the two panel sessions. The role of rehabilitation counseling in readying the retarded youth for work was given major attention.

The author, who is executive secretary of Indianapolis Goodwill Industries, makes the point that professionally trained managers are better suited for coordinating and directing workshop operations than persons representing any of the helping disciplines. This permits the special discipline people to concentrate on what they do best, rather than get bogged down with administrative duties and details.


"The relationship between success of outside work placements of mental defectives and 34 variables classified from patients' records was investigated. Family characteristics, medical history, behavior problems, education and training were not significant. For psychometric data, only classification into middle-grade versus high-grade borderline was significant. Professional staff agreement concerning suitability for work placement, as well as family contact during the work placement were significant. Duration of work placement was highly significant, indicating that if failure is to occur it will occur rapidly (p. 50)."


The most basic problem faced by workshops today is how to get their story across to those businessmen who can assist them in their day-to-day efforts. In order to solve this problem some suggestions on how to reach the business community and some pointers from the business community itself are presented.


Proceedings of an institute designed to increase understanding between vocational rehabilitation personnel and managers of sheltered workshops. Topics for discussion were client evaluation, personal adjustment training, placement, financing, legislation, and cooperative efforts with other agencies.

This article by the editor of the Journal of Rehabilitation stresses the importance to the workshop of having an effective public relations program. "Most people like to help a worthy cause but they first have to know it exists (p. 28)." A number of ideas on how to reach the public with your workshop message are suggested.


Included in this report of the annual meeting held in Philadelphia, Pennsylvania in November, 1964, are twenty addresses delivered by experts in the workshop field. Some of the topics covered were: workshops as therapy; workshops in small and large communities; in hospital settings; public control and operation of workshops; administration, accounting and budgeting of workshops; pricing for sub-contracts; securing government contracts; serving the culturally deprived; the importance of Manpower, Development and Training Act, etc. These timely thought provoking statements by recognized authorities should be of interest to many people in the workshop field. Of particular interest are two groupings of addresses: the first concerned with public control and operation of workshops, and the second with management and business practices.

Joseph T. Weingold in discussing "The Implication of the Publicly Operated Workshop," states that there can be no objection to this trend if they meet the standards set by the privately controlled workshops, i.e., standards set forth by the NASWHP, and do not duplicate services. He goes on to examine standards relating to the client, and to operation using examples of public and private workshops to illustrate how the public workshop, because of several reasons, does not come up to the standards of the NASWHP. He feels that the publicly operated shops as described in his address are a threat to the voluntary operated agency as well as the best interests of the clients served.

Jayne Shover in discussing "The Impact of Publicly Operated Programs on Motivated Workshops," brings to
light many of the differences between public and private workshops that stem from certain advantages that the public workshops have such as not having to comply with wage and hour regulations. This can lead to the private workshop's using the client as cheap labor rather than serving the client's best interests. Her address closes with the following statements, "Maybe these differences—these misunderstandings—these concerns—are due to ineffective communication. Perhaps as we listen today to speakers on this program we shall hear some of the answers which will enable us to move forward with greater assurance in meeting the needs of disabled workers, remembering that no agency can exist alone (p. 42)."

In "A Publicly Operated Workshop: Purposes and Implications," A. N. Landa discusses the purposes and implications of a public assistance workshop. Using the Welfare Rehabilitation Service in Illinois as an example, he illustrates how public assistance workshops and privately operated workshops are similar. He pointed out that, "Remarks by the previous speakers indicate that a public assistance workshop possesses the same problems and has identical objectives as the public institution workshop. The only similarity between these two undertakings is that they are both exempt from regulations under the Fair Labor Standards Act. Otherwise, our tasks, goals, successes and failures are just like those of any workshop in a community. Our points of emphasis, intake policy and agency affiliations may be different but these are differences of degree, not kind (p. 46)."

R. R. Kovner, Controller of Kenny Rehabilitation in Minneapolis, Minnesota, discusses "Budgeting and Accounting Bookkeeping Practice," in relation to the sheltered workshop. He stresses the need for good financial information about workshop operations. Five major elements are listed to be remembered in designing an accounting system for a workshop: (1) the accounting system should reflect the organization; (2) income and cost to produce that income are related; (3) the manufacturing function should not subsidize industry; (4) accounting and estimating procedures for manufacturing are related; and (5) the cost of a unit of rehabilitation services is a major factor, but not the only factor in setting prices for these services.

"Pricing for Subcontracts" is discussed by William O. McGill, executive director of Chicago Lighthouse for the Blind. He briefly discusses wage and hour regulations in relation to the workshop and goes on to discuss in detail how costs are computed, what the costs are, where the labor dollars come from and actual costs that cause estimates to be out of line.

William F. Donlin, Jr., regional director of Business Affairs for General Services Administration, offers some advice on "Securing Government Contracts through GSA." He discusses
major locations where it is possible to get information about
the type of products that the government purchases, suggests
publications that give similar information and encouraged all
workshop people to visit their local Business Affairs Office
and discuss the possibility of procuring some government contacts.

Maryland Division of Vocational Rehabilitation. A project to demonstrate
the effectiveness of unstructured group counseling in developing in
disabled persons insights and positive attitudes. (Progress report).
Baltimore, Maryland: Maryland Division of Vocational Rehabilitation,
1963. 3 pp. Ditto.

The purpose of this project is to demonstrate an effective method
of rendering more employable certain disabled persons whose failure
to obtain or hold satisfactory employment seems to be due in part
to factors other than their disabling condition. Two results are
anticipated from this project: (l) that as a result of the
project an increased number of these handicapped persons will achieve
suitable and stable employment; and (2) that certain attitudes and
behavioral patterns which are obstacles to vocational and social
adjustment may be modified by means of unstructured employment-
oriented group counseling.

Massie, W. A. Sheltered workshops--yesterday and today. In DuBrow,
A. L., Proceedings of the first New England regional institution on
sheltered workshops and industrial homebound programs, April 17, 1961 -
Offset.

The author, rehabilitation facilities consultant in the Vocational
Rehabilitation Administration, presents a brief historical overview
of workshops and then directs his attention to current issues.
He discusses the wide diversity found among workshops, their
financial problems, casefinding and public relations, the need
for improved services, and professional staff.

Nameika, J. A. & Tamkin, A. S. The day treatment center in the
rehabilitation of the schizophrenic patient. Soc. Casework., 1964,
45 (6), 337-340.

Day treatment centers are being developed to help in the
rehabilitation of chronic psychotic patients. The approach
is through the use of an interdisciplinary team providing
services in group psychotherapy, recreation, social casework,
vocational counseling and placement, work therapy, occupational
therapy, incentive workshop, individual psychotherapy, and
pharmacotherapy. The center's role is to help the patient
progress from extreme dependency to economic self-sufficiency.
The National Association of Sheltered Workshops and Homebound Programs has published an accounting manual which should be of value to any workshop interested in learning the basics of accounting. There are examples of balance sheets, statements of income, cost and expense, an illustrated overhead and administrative expense and allocations example, and suggested account titles of uniform chart of accounts. The appendix provides examples of a sheltered workshop's typical transactions and sample ledger sheets.

The National Association of Sheltered Workshops and Homebound Programs (NASWHP) is a non-profit national organization whose ultimate purpose is to insure, through guidance and leadership, that maximum work-oriented rehabilitation services are provided for disabled persons throughout the United States. Publications are available from NASWHP periodically, for example: "NASWHP Policy Statements," "NASWHP Bulletin," "NASWHP Memorandum," and other releases of pertinent information on workshops.

A list of publications pertinent to the counseling and placement of handicapped workers. Brief descriptive paragraphs are given for each listing.

In an answer to the problem of shortages in trained help for workshops, Neff offers some suggestions on kinds of staff different workshops should have and the various training programs which can be used as a source for professionally trained personnel.

A survey of California workshops for the mentally retarded demonstrates their recent, rapid growth. Information is presented on their organization, function, admission techniques, use by the community, referrals, placements and types of clients served.


The author, workshop consultant for the California Department of Rehabilitation, describes the consultative services which are provided on a group basis to California workshops. He discusses methods used to solve major problems in contract procurement, increasing production, improving accounting and recordkeeping, and doing a better job for handicapped people.


A survey of salary rates of workshop employees, classified by workshop size, number of workers, earned income and budget expense. *(Rehabilit. Lit., 1965, 26 (1), 27.)*


The author feels that in order to be successful a workshop must have a budget and stick to it. It should separate the two major aspects of its program, business and business income from rehabilitation and rehabilitation income. Nelson presents three categories for classifying expenses: (1) administration expense; (2) rehabilitation expense; and (3) contract or manufacturing expense. Only in a realistic setting, where the workshop is conducted in a business-like manner, can the disabled become productive and self-reliant workers.


This article stresses the importance of maintaining a real industrial work atmosphere in the workshop. The position
is taken that work per se is a rehabilitative tool and an efficient business enterprise will by its very nature provide rehabilitation for its disabled workers. The author offers a number of ideas on how to improve the efficiency of the workshop. Bidding, cost accounting, quality control, pricing, shop layout and workflow charts are some of the items considered.


The purpose of this project was to introduce and evaluate a new technique in rehabilitation: vocationally oriented group therapy. The major hypothesis was that vocationally oriented group therapy plus the therapeutic effects of a controlled sheltered work program make for a more effective rehabilitation program for emotionally disturbed clients than does workshop placement alone. Experimental and control groups were set up to test this hypothesis. Vocationally oriented group therapy is defined as essentially group psychotherapy in which the focus of discussion centers upon the unique and common adjustment problems of the group members. Over the three-year period of the project, a definite pattern of therapy evolved. Several conclusions based upon the differences between the experimental and control groups are discussed. The most significant and unexpected was the manner in which vocational group therapy appears to facilitate the intellectual functioning of the participants as shown by test differences.


Describes the roles of workshop coordinator as he currently functions, and describes some additional roles and duties that he could undertake to maintain closer liaison and increase communication between the workshops.


This conference was convened for the purpose of bringing together practitioners in prevocational evaluation units and supervisors from state vocational rehabilitation agencies to share mutual problems and possible solutions. Topics covered were: definition of the prevocational evaluation unit; methods used in prevocational evaluation;
clients served; time involved in prevocational evaluation; reporting the evaluation; and the nature of the relationship between prevocational units and other agencies.


The article concerns physical features of workshops, types of work, hours, wages, number of workers, admission requirements, guidance and counseling practices, administration, community support, transportation and recreational facilities. Recommendations included are for the planning, establishment, and organization of such workshops.


The project was concerned with the training of the mentally retarded by providing a period of evaluation and sheltered work experience to enable the client to achieve work adjustment and develop his capacities to the fullest. A secondary goal was to increase community understanding of the problems of the mentally retarded and recognition of the value of rehabilitative services. It was concluded that parental attitudes toward the retardate's job and overprotection of the child were the main causes of job failure.


The purposes of this project are: (1) to develop an orderly systematic approach to a method of originating, establishing, and promoting a coordinated statewide system of combined sheltered workshops and home industry programs, operated by private non-profit agencies, in certain "key" areas and communities in Arkansas. (2) To determine whether or not state rehabilitation agencies (nationwide) can stimulate, through organization, general supervision, basic personnel instruction and limited grants to local non-profit organizations or agencies a satisfactory system of sheltered workshop-home industry operation able to provide remunerative employment for marginable and sub-marginable potential workers. At the same time, to serve as an intermediate step between dependency and competitive employment for others who, after workshop or home industry work experience and instruction,
can either enter or return to regular competitive employment.
(3) To determine, insofar as possible, the simplest, most
economical and most efficient method of establishing such
a system. The operations of each of the six workshops
participating are discussed. It appears that the program
has been well received in each of the communities and that
the objectives are being met.

O'Rourke, J. V. & Roberts, C. L. An industrial cooperative training
plan for rehabilitation center trainees. (Progress report on
project no. 796). Harrisburg, Pennsylvania: Pennsylvania Bureau

A joint effort of a rehabilitation center and participating
employers to train selected handicapped persons through a
program of alternate classroom study and on-the-job
experience. There is a discussion of the purpose and
policies as well as an outline of areas of training.
Procedure, organization and client-selection methods
are included.

Patterson, C. H. Methods of assessing the vocational adjustment
potential of the mentally handicapped. Train. Sch. Bull., 1964,
61 (3), 129-152.

"The increasing attention and concern being directed toward
the vocational rehabilitation of the mentally handicapped
has led to study of methods of evaluating their vocational
potential. In addition to the use of standardized tests
of aptitudes, the work sample and work evaluation methods
have been applied in a number of studies. The general
attitude has been that standardized tests are inadequate,
and that the work sample approach is a better method of
assessing aptitudes. It is questioned whether the brief
work sample is useful. Ratings based on prolonged observa-
tion in a work setting appear to hold promise for the
evaluation of personal-social factors in work adjustment (p. 129)."

Patterson, M. & Speck, Miriam P. The vocational rehabilitation
of retarded brain-injured youth in a rural regional center.
(Project no. 417). Springfield, Virginia: The George Everett

A description of the program at the Partridge Schools for
the trainable and educable mentally retarded. Subject
matter covered such items as the rural community as a
source of job opportunities; vocational competence as related to other individual differences; parental and community acceptance; abilities and vocational competence of the brain-injured; evaluation of rural regional center as it relates to vocational rehabilitation; and expectation as to opportunities and difficulties in the adjustment of the brain-injured.


The purpose of the research is to originate and discover techniques in order to improve assessment of the capacities of the handicapped to perform manual manipulative tasks of a sedentary nature in a competitive work situation. The purpose implies three ancillary tasks: (1) to develop an appropriate research facility; (2) to conduct specific studies of both existing and new variables; and (3) to demonstrate the predictive utility of the such variables in an applied setting. This last task would appear to be related to evaluation in the workshop as well as prediction of a client's success on the job. The method involved a well-equipped miniature manufacturing and assembly plant, "stocked" with a number of jobs, selected for their ability to permit comprehensive measurement of a variety of manual manipulations classified under the Methods-Time-Measurement (MTM) system of industrial engineering. Each job is electronically coupled to an IBM card punch which automatically records the lapsed time for a series of motions embedded in the assembly operation. Each assembly cycle is thus recorded for future analysis. The following three families of variables were discussed in relation to the purpose: (1) sensory-motor capacities; (2) psychological functioning; and (3) work performance characteristics.


The subject of this conference was "Programming of Sheltered Workshops for the Mentally Retarded." Addresses were made assessing existing relationships between the family and the community with recommendations for community interaction with workshops; a description was given of the New York Association for Help of Retarded Children's Training Center and Workshop; a report was made of the growth and development of sheltered workshops, as well as a prediction of the future trends. It was suggested that a critical look should be given
workshop programs to determine deficiencies and to provide for improvement of conditions.


Random survey of 257 service employers in West Virginia by attitudinal questionnaire revealed that they differed significantly in their feelings about hiring the mentally retarded, according to the type of enterprise they represented. Personnel managers of restaurants and nursing homes were generally more reluctant to hire the mentally retarded than were the managers of hotels, hospitals, and laundry-dry cleaning establishments.


A study concerned with the relationships of the unrealistic vocational choices to emotional factors in physically handicapped patients. Results indicate that such a relationship exists and that use of the Minnesota Multiphasic Personality Inventory may prove useful in detecting patients in need of vocational counseling.


Pruitt reports a study in which the purpose is to determine if there might be an optimum period for the duration of group therapy. Ss were emotionally disturbed and vocationally handicapped rehabilitation clients of the Utility Workshop of Denver. The Palo Alto Group Psychotherapy Scale was the instrument used to measure the effects of therapy. Twenty-four sessions appeared to be the optimum on the basis of statistical results.

This is part of a larger research project reported elsewhere in the bibliography: Neuman, Alfred M. Vocational group therapy with the emotionally disturbed. (Final report). Denver, Colorado: Jewish Family and Child Service--Utility Workshop, 1963. 44 pp. Mimeo.

This study attempted to determine contributing factors of dropouts from vocational services. The following criteria were used: primary referral source, disability, age, educational level, marital status, prior work history, psychometric intelligence, and evaluated response to the services. Workshop dropouts were compared to persons completing workshop services, to persons still using workshop services and to non-workshop dropouts. Results did not confirm the hypothesis that vocational program dropouts are demonstrably inferior to persons completing the program.


Gains are being demonstrated in the study on how a rural workshop can assist the rehabilitation of mentally retarded and physically handicapped adults. Methodology and relevant accomplishments are reported. Work projects are: can salvage, nursery (gardening) project, woodworking project, office practice, and arts and crafts.


Using the Vocational Rehabilitation Administration as an example, Redkey reviews the amount of money spent by the government on programs of service, research, and training as well as number of clients served. Suggestions for setting up standards and forming an accrediting agency are presented. The development of such an agency is strongly urged.


"A report of the value of a sheltered workshop in a home for the aged. There is a discussion of the initial testing of applicants for the workshop, physical facilities of the shop, administration of the project, and trends among workers." (*Rehabilit. Lit.*, 1964, 25 (12), 381.)

"Presents findings on the use of volunteers with the retarded in workshops. Specific job skills did not appear to be a major concern in the training needs of the volunteers." (Rehabilit. Lit., 1964, 25 (11), 351.)

Richert, H. E. Modifying an existing hospital industry. Presented at a symposium entitled "Work Therapy as a Rehabilitation Technique for N. P. Hospital Patients" at the Western Psychological Association, Portland, Oregon, April 18, 1964. 10 pp. Ditto.

The author describes how the bakery of a large state hospital in California was modified to provide hospitalized schizophrenics who were participating in a program that coordinated hospital and community work adjustment services with a specially programmed industrial therapy assignment.* The modification process is described from its inception as an idea to the point at which it actually began and how it fit into the larger project. The various problems and solutions in such a modification are discussed.


The authors have developed a scale to measure prejudice toward disabled applicants for employment. The hypothesis that employers are prejudiced toward disabled applicants was confirmed. Results also showed that strength of prejudice varies with the disability.


The rehabilitation of Montana Indians from seven Federal Reservations is a VRA supported research and demonstration five-year project begun in 1961. Services include interviews, counseling, testing, case conferences, relocation of Indians and their families, and professional training and education at Northern Montana College. They receive regular support,
continuous guidance and tutoring as well as placement as trainees in certain occupations. It is felt that when the project is finished, some valuable guidelines will have been established to help others who work with disadvantaged clients.


A VRA supported project for Navajos was begun 2 years ago at Arizona State College in Flagstaff, Arizona. The project is developing methods of overcoming language and cultural barriers in evaluating and training disabled Navajo Indians and placing them in appropriate employment on their reservation.


The author, director of Vocational Rehabilitation Service at the Institute for the Crippled and Disabled in New York, describes a study which compares 22 clients who progressed to outside employment with a similar group of terminal clients. The most significant differences between the two groups appeared to be their level of productivity, dexterity and ability to stand and ambulate over an extended period of time. No differences were noted in intelligence quotient, education and age factors between the two groups.


Rothman, staff representative of the AFL-CIO Community Services Activities presents organized labor's view of some problems in the workshop movement. Labor would like to see the implementation of minimum wage levels comparable to those in private industry, extension of collective bargaining privileges to workshop employees, avoidance of unfair competition with labor, and union representatives on the policy making boards of workshops.

This project demonstrated that a comprehensive medically-oriented rehabilitation center using intensive and individualized placement services is requisite for the successful vocational rehabilitation of the quadriplegic. It found that there is a dearth of sheltered workshop facilities for the quadriplegic, and the tasks provided are usually inappropriate for such patients.


A study to demonstrate the practical application of knowledge and techniques of work adjustment developed by a prototype research project, and "...to determine the effectiveness of industrial supervisors without high level educational backgrounds in contrast to the supervisors of the prototype program, who were trained counselors with college degrees (p. V)." A description was given of the intake process and the techniques of treatment, evaluation, placement, and follow-up.


The author describes the function of the psychiatric halfway house as a new treatment concept for mental hospital patients. The halfway house provides for the more rapid reintegration of the patient into the community by narrowing the gap between the hospital and the community.


Reviewed and evaluated is a work-experience program that focused on educable mentally handicapped youth (ages 17-21 and I.Q.s 50-75) in New York. Discussed are types of jobs used; reimbursement; on-the-job problems; the role of the Department of Vocational Rehabilitation; importance of work-experience programs; and need for counseling services for these youth.


The article presents the goals of the training program at Orient State Institute in Oriet, Ohio. The core of the program is presented and evaluated. A need for
training all occupational personnel in an institutional setting for the mentally retarded is pointed out.


This project was designed to determine methods and techniques that could be used to successfully place visually handicapped individuals in competitive employment. In order to carry out this purpose, a need was recognized for facilities which would provide specialized training for the visually handicapped, in order to prepare them for competitive employment, and to evaluate the effectiveness of these tools of rehabilitation. In order to obtain this goal it was necessary to evaluate the relationship between type of training and rehabilitation. A second objective of the study was to examine the role of selected personal characteristics in the relationship between training and rehabilitation. A final aim of the study was to assess the importance of aspiration in rehabilitation. The results are summarized and conclusions based on each of the objectives are offered.


In discussing the pitfalls of the sheltered workshop idea, Stubbins compares the workshop movement with that of state mental hospitals. We are cautioned to consider the sheltered workshop for what it is—a service for some unemployed handicapped persons—not a panacea for all unemployed handicapped persons. Transitional and custodial work programs are compared. The need for professional identification, avoidance of the self-supporting facade, use of consultants and financing the workshop are also mentioned.


An annotated bibliography of publications pertinent to workshops for the handicapped, covering the period 1955 to June 1964. Two hundred and thirty-four items were included from almost 100 different publication sources. Also included is a discussion of "The Literature on


The report describes a program designed to vocationally rehabilitate mentally retarded young adults. It attempts to gain knowledge necessary to better serve the handicapped person's needs and to establish a sheltered workshop to meet these needs. The program began with five clients in 1961 and by the end of the project had provided services to one hundred and forty-six persons. The indifference of the parents and the transportation problem presented the greatest difficulty in acquiring clients.


This research is "an exploratory study, designed to find new and more adequate ways of assessing ability among the intellectually disabled (p. 4)." Also described is the predictive value of social class and parental attitudes. Findings which contradicted expectations included: personality factors were found to influence work performance as much as did intellectual factors; clients from broken homes and institutions did better on the job than persons who lived with relatives or who came from intact homes; supervisors' ratings correlated with results of attitude scales suggesting that attitudes of warm acceptance are positively related to work ability in the offspring; two personality trait variables found to be closely related to work performance were "strong, hostile, rebellious drives and pronounced anxiety and psychopathology (p. 80)."

The authors have developed a system by which the physiological work potential of the handicapped individual can be compared to the requirements of the job. Using the Methods-Time-Measurement system and electronic instrumentation, the individual's work potential is assessed in terms of basic manual motions, e.g., reaches, grasps, turns. It is then possible to match these measurements with industrial job requirements to determine probable vocational success.


This study of retarded adults who took part in the training program at the Occupational Day Center, New York City, indicated that productivity and efficiency were significantly related to intelligence, and the amount of practice at the task. Monetary incentives did not result in higher productivity over extended periods of time. Mongoloid retardates were less productive than other types of retardates of the same intellectual level.


The project was designed to meet the needs of the emotionally disabled, the largest single group in need of rehabilitation services in El Paso. The main objective is to investigate the methods of work adjustment in a controlled work situation, to attempt placement after the initial work adjustment period, and to do follow-up studies on the individuals after they have left the program. Also investigated was the feasibility of establishing such a work adjustment center as an integral part of the Goodwill Industries of El Paso on a permanent basis. The program supported the hypothesis that a period of work evaluation and adjustment could aid individuals in gaining employment who, without such a period, stood a very poor chance of employment, and demonstrated that at least 50 per cent of the individuals who completed two months in such a program could expect to be placed in steady employment.

"Evaluation of a work program is a lengthy and difficult task requiring exploration of social, psychological, cultural, and medical factors. Treatment must be a team effort. In the medical setting the physician and the social worker alone cannot help the patient whose work problems result from a variety of psychological and societal factors. There is room for the examination of the case work techniques that are used in treating patients with work problems. The eventual development of new methods of intervention may be called for. In order to deal with patients' problems, the worker must examine his own social values carefully in relation to the patient in an effort to understand and evaluate the patient's motivation (p. 195)."


This statistical report by the Bureau of Labor Standards explores in depth the attitudes of employees regarding the employment of handicapped workers. Special attention is given to the importance that a correct understanding of workmen's compensation laws has in alleviating employer's fears of hiring the handicapped.


This pamphlet presents recommended standards and principles of workshop services which grew out of an original edition issued in 1944. In the preamble, the following topics are discussed: the growing number of workshops, goals and purposes, acceptance of sheltered workshops, responsibility to clients and community, need for a statement of policy, and results of policy observance. The characteristics of sheltered workshops, physically handicapped, mentally handicapped, and socially handicapped are presented next. Policies with regard to the following areas are set forth: incorporation, directing board, qualified leadership,
program of service, primary purpose, placement, service records, working relations, building and equipment, wages and hours, working conditions, wage payments, ethical business practices, trusteeship, accounting and records, handling cash, balances and resources, credit, insurance, employee benefits, use of earned operating income, and operating deficit. Lastly, homebound persons and homebound programs are discussed in light of additional policies that concern them.


Circumstances under which the Fair Labor Standards Act applies to workshops as well as the law itself are discussed. The Walsh-Healy Public Contracts Act which applies to production workers employed on Federal Government supply contracts which may exceed $10,000 provides similar standards as well as health and safety standards and is administered by the same regulations applicable under the Fair Labor Standards Act. "Certificates permitting payment of lower than legal minimum wages to disabled persons in workshops may be issued to non-profit sheltered workshops that perform covered work. While 33 of the 50 states and the District of Columbia and Puerto Rico have laws regulating minimum wages and maximum hours, in only a few states are these laws applicable to clients of sheltered workshops (p. 1)." The remainder of the paper discusses certified shops in relation to: size of workshop movement; growth of workshops; location of workshops; size of shop; types of work programs; workshop earned income; certificate rates; average hourly wages; benefits in addition to wages; and funds which supplement client wages.


A workshop held at Old Point Comfort, Virginia stressed the need for aggressive leadership in rehabilitation facilities. The following addresses were made: "Setting the Stage," Henry Redkey; "Planning for Facilities," Corbett Reedy; "Organized Labor Standards and Workshops," Arthur Korn; "Wages and Productivity," Henry Redkey; "Utilization of Facilities," Dill D. Beckman. Support was given to the continued use of terminal workshops, and considerable discussion centered around wage levels for sheltered workers and the use of fair competitive practices with private industry. Teamwork, referral, and the extensive use of specialized rehabilitation facilities were stressed.

This report covers the second meeting of the Institute for Sheltered Workshop Management held May, 1961, at the University of Alabama. Participants representing both private and public rehabilitation agencies covered a wide range of workshop issues, including services provided by workshops, scientific organization of workshops, workshop operations, workshop standards, and legislation affecting workshops.

Vocational Rehabilitation Centre of Metropolitan Toronto. The role of a special vocational rehabilitation program in re-establishing chronic welfare dependents. (Progress report). Toronto Ontario: Vocational Rehabilitation Centre of Metropolitan Toronto, 1964. 11 pp. Ditto.

The purpose of the program is to explore and evaluate the role of a special vocational rehabilitation program in preparing chronic dependents of health and welfare agencies for independent or semi-independent living. The special program uses a controlled work situation in combination with counseling and job placement services. The following tentative conclusions are offered on the basis of the findings thus far: (1) the program is an effective agent in the rehabilitation of chronic welfare dependents--nearly 40 per cent of those served have been able to take jobs or enter vocational training classes after work conditioning in the Special Services Rehabilitation Program (SSP); (2) the chronic welfare dependent has many attributes in common with the convalescent mental patient; (3) the typical chronic welfare client, as seen in the SSP, is not "lazy;" he is a socially inadequate, psychologically maladjusted person; (4) community agencies serving the chronic dependents are not well informed regarding vocational rehabilitation facilities and have had little experience in using such resources; and (5) the technique of vocational rehabilitation, as used in the SSP, has potentials for controlling certain public welfare expenditures.


The article reports on the industrial applicability of Wagner's projective Hand Test. The test was administered to workers at Goodwill Industries in Akron, Ohio. An analysis of the scores seemed to indicate "...at least to some extent people may be psychologically ill and yet still
work productively and be rated as a satisfactory worker (p. 355)."


The authors report on the first 20 months of their experiences with Edgemont House, a halfway house affiliated with Edgemont Hospital in Los Angeles. Sample case histories from among the 79 persons who were guests during that period are presented. Also some tentative conclusions about the role of the halfway house and the circumstances under which it exerts a favorable influence during recovery from mental illness are discussed. The topics covered in this discussion are: need for psychiatric supervision, criteria for guests, responsiveness to environment, degree of permissiveness, and evaluation of the individual's experience.


The purpose of this institute was to attempt to determine the problems faced by the psychologist in a rehabilitation center and the current techniques for coping with them. A representative group of psychologists were invited to pool their thinking regarding the activities in which they participate and the nature of their approaches. A description of how the institute was conducted is presented. The report is in two main parts: "Part I. Results of pooling an outline of the ideas that were written on slips;" and "Part II. Addresses: Abstracts of lectures and panel presentations." The accomplishments of the study were primarily exploratory and served to define broad problem areas, to assemble information useful for curriculum planning for the training of rehabilitation psychologists, and to define future topics for study.


One hundred employers of ex-mental patients were designated as short-term or long-term employers depending on whether they kept ex-patients on the job for 8 months or more. The employers were then surveyed by questionnaire to determine their attitudes toward hiring mental patients, and if, in fact,
they were aware that their employee was an ex-mental patient. Analysis of the data suggested that the short-term employers were less favorable to the hiring of ex-patients, tended to hire them for lower level jobs, and more frequently knew that the employee was an ex-patient.


The author, director of a workshop himself, identifies the major ailments of workshops and suggests solutions. Basic management factors and training of workshop managers are discussed.


The scope of the existing work experience programs for mildly retarded training school residents was discussed as to administration, staff, soliciting off-campus job opportunities, employer screening, wage scales, teaching residents the wise use of money earned, types of employment secured, transportation arrangements and plans for future expansion of the program. (*Rehabilit. Lit.*, 1964, 25 (10), 314.)
Advances in the number of workshops and the quality of their rehabilitation programs are posing new issues. These stem from an increasingly close association of workshops with professions and scientific disciplines contributing to vocational rehabilitation. One of these issues is the role of the rehabilitation counselor in the workshop. This paper deals with this question and gives some illustrations from actual agency practice.

The trained counselor mentioned in this paper refers to those who have completed a two-year graduate program of the type supported partially by the Vocational Rehabilitation Administration of the Department of Health, Education and Welfare. There are now more than forty of these university and college training programs and some of the graduates have found their way to positions of responsibility in workshops throughout the country. There are, of course, many other types of psycho-social workers participating in the professional activities of workshops but they will not be our concern here.

The time seems appropriate to pull together the various notions regarding the place of the counselor in the workshop and perhaps through this, set in motion some consensus about the scope of his functions. The interests in training of the rehabilitation counselor makes the workshop a rather congenial place for him. His training in the behavioral sciences takes place in the context of rehabilitation and typically the workshop is only one of a number of settings in which he has observed the handicapped.

The Bedford Conference (Thompson, 1958) suggested eight services needed for rehabilitation in the sheltered workshop. It is noteworthy that the professionally trained counselor is well trained in all but one of these, viz., physical restoration. Even in this area, he is familiar enough with medicine that he can understand and communicate with physicians concerning work limitations and the potential of the physically disabled. His knowledge of personality dynamics enables him to make sense of the nature and movement of the client's behavior. If he happens to be one of a team of professionals in the workshop, he is the expert in the psychology of work. He requires little orientation to the philosophy of the rehabilitation workshop. He believes in the integrative value of work both as a direct satisfaction and as a means of making one an independent and contributing member of society.
The Bedford Conference defined counseling in 1958 as a method to "assist the handicapped individual to understand himself and his needs, his potentials and limitations; to help him to determine realistic rehabilitation objectives and utilize available services in attaining them; to aid him in the removal of barriers that stand between him and maximum adjustment (Thompson, 1958, p. 12)." This definition remains a useful one. Since then, many more counselors have entered rehabilitation workshops. This paper draws on the experiences of many of them in an attempt to delineate the place of the counselor in the developing workshop.

Using a critical incident technique, Barton and Barton (1965) sought to determine the kind of education and experience most desirable for workshop supervisors. They obtained the opinions of 322 workshop staff personnel in 28 workshops operating on the West Coast. The requirements for effective supervision in sheltered workshops were summarized as follows:

**The Workshop's Role in Rehabilitation:** The history, types, objectives, and services of sheltered workshops.

**Disability Information:** Basic facts of the nature, cause, treatment, and limitations of the major physical, emotional, and mental disabilities.

**Basic Psychology:** Understanding human behavior, principles of effective learning and remembering, creative thinking, problem solving, mental health and basic human needs.

**The Rehabilitation Team:** Who belongs on the rehabilitation team? What is a psychologist, social worker, rehabilitation counselor, occupational therapist, and other professional rehabilitation personnel? What is the supervisor responsible for as a team member? What are the benefits of team cooperation to the supervisor?

**Community and Social Service Resources:** Survey of local agencies and their services and a discussion of interagency relationships.

**Occupational Information:** Discussion of the basic requirements of the world of work and a survey of local employment opportunities and job placement resources.

**Training Principles and Methods:** Discussion of effective vocational and job training practices and techniques.

**Performance Evaluations:** Review of common performance appraisal techniques and instruments with discussion and practice in observing and rating work behavior accurately (Barton and Barton, 1965, pp. 112-113).
The workshop supervisor and counselor, of course, have different roles. However, to anyone familiar with the present training of rehabilitation counselors, it is apparent that all of these knowledges and skills are included. The counseling curriculum apparently contains much of special value in the management of workshop clients. If there are too few counselors in workshops today, it is not because they lack the proper orientation for these tasks. More probably, it reflects the uncertain employment status associated with workshops and better salaries available elsewhere.

The remainder of this paper will be concerned with the various services performed by rehabilitation counselors in workshop settings. References from the literature and from actual workshop practice will be used to point up application of the counselor's knowledges and skills.

COUNSELING

The major concern of the rehabilitation counselor is the modification of the vocational behavior of workshop clients within the limitations of the setting. To carry out this task, he has the resources of the whole system of the workshop and his knowledge and skill as a counselor. By the system of the workshop we mean its philosophy, its methods of motivating desirable behavior, the types of work available, and its relations to the business and professional community. If the counselor does not see the foregoing as facilitating his concerns with the client, then he is probably better off working in some other setting.

The methods and processes of counseling have been discussed in numerous publications. In the workshop, the counselor seeks to focus on those attitudes and feelings that are more or less immediately relevant to client's behavior in the workshop. The special characteristics of the counseling relationship enable the client to realize aspects of himself of which he may have been previously unaware. They restore to him a realization that at least he can partially control his own destiny and that any activity he initiates can be as meaningful as he chooses to make it. Hopefully, this type of interchange with a counselor and the insights that it engenders influence the client's perception of the workshop and what it can do for him.

The institutional purposes of the rehabilitation workshop set up explicit aims for counseling. In the workshop, the counselor is committed to the ideal of work as the mainstay of a healthy, wholesome personality. He believes, too, that the feeling of self-respect and worth that comes from a satisfactory vocational adjustment tends to spread to other spheres of the client's life. Regardless of the personality theory to which he may subscribe, he believes with Freud, "Work has a greater effect than any other technique in the direction of binding the individual more closely
to reality; in his work at least, he is securely attached to a part of reality, the human community."

In other settings, such as a mental hygiene center, the counselor may very well operate on the assumption that the immediate improvement of the client's self-concept or the resolution of certain intra-psychic conflicts have first priority. The initiation of work may then be delayed until these aims are achieved. In some instances, the client's vocational adjustment may not be of concern at all as may be the case with the housewife. In other instances, work may be precluded by reason of advanced age, severe disability, or some other overwhelming obstacle to even sheltered employment.

In the workshop, the counselor will encounter clients with a wide range of readiness to engage in productive activity. Such degrees of readiness may be posed by the reactions to physical disabilities, by mental illness, by mental retardation, etc. Similarly, the counselor must be able to accept a wide spectrum of achievement for his clients, ranging from regular employment in business and industry, to long-term sheltered employment in a workshop, to homebound programs. Since the workshop attracts the most difficult and complex cases, the counselor will find many, perhaps the majority of clients, do not flatter his psychological skills and personal resources. Therefore, he must learn to live with a certain percentage of successes as normal to his working conditions. The practical consequences of this point of view are that they enable the counselor to admit that the workshop cannot, in fact, help certain clients, and their referral to a non-work environment possessing other resources is indicated. A failure on this score is a serious matter since it means no less than a failure of the workshop to use its resources most effectively, and in accordance with its distinctive aims. It is precisely this failure that has caused some workshops to become transformed into costly custodial facilities with equipment and type of staff ill suited to their clients.

This pragmatic attitude of recognizing success and failure with clients can be consistent with exploration and gambling with new ways and unlikely odds. Few trained counselors would be content without the opportunity to use at least a portion of their weekly hours in exploration.

Data on the actual functions carried out by rehabilitation counselors were gathered by Jaques (1959). Basing her findings on a survey of 404 rehabilitation counselors and supervisors of counselors throughout the United States, she found the following critical roles were being played by effective counselors:

a. The creation of a therapeutic climate in which the counselor is calm and composed, listens to the client, provides motivation and acceptance in a non-punitive atmosphere where the client feels understood and safe to explore his problems and plans.
b. The interaction between counselor and client which involves working together as a team, collaborating in a mutually shared counseling experience while neither dominating or controlling, trying to arrive at some solution to the problem at hand.

c. The evaluation of the client's problems by getting a clear and thorough picture through drawing out the client's ideas as well as through observation of the physical, social and psychological condition of the client and relating the influence of these factors to the vocational potential of the client.

d. The giving of information and factual data to the client which offers authoritative explanations in the nature of professional knowledge but with no immediate pressure for action, thereby permitting the client to decide his own course of action.

e. The definition of the limits within which counseling takes place in terms of time, the nature of counseling, and the responsibilities of both counselor and client.

f. The gathering of information about the client from himself and others who have evaluated or worked with him so that there will be a comprehensive understanding of the client and his present situation.

g. The arrangements made for the client in an administrative manner including appointments, referrals, and plans for future contacts (Jaques, 1959, pp. 79-80).

These activities are also descriptive of what counselors are doing in the workshops, though Jaques' data was gathered in the State-Federal programs of rehabilitation. Some of these functions are discussed in detail in the remaining part of this paper thus giving the characteristic emphasis practiced by workshop counselors.

Individual counseling can be described as being of three types: Spot counseling which consists of immediate problem solving on the workshop floor, usually in the form of a single interview or discussion to clear up any number of small crises. Short-term counseling will usually amount to a short series of weekly interviews with a limited objective such as getting additional diagnostic information on the client, or helping him to overcome some adjustment problem in the shop. Long-term counseling is designed to handle problems of a more complex nature which involve attitude change, and would require contacts over a three-month period or longer.

The question of the duration of counseling is a knotty problem, and useful guidelines are hard to come by. Probably by training and by preference, most counselors perceive long-term contacts as being more helpful to clients and as requiring more professional skill. These value attitudes may make it difficult to impose limits in the duration
of counseling, or at times to firmly conclude that--however helpful the counseling might be--it is not resulting in desired changes in vocational behavior. The paramount concern of the workshop counselor is to help the client realize himself through productive activities. When the fundamental needs and direction of the client are different and there is an fairly imminent prospect of his using the workshop resources, then the client should be referred to another counseling agency.

Individual counseling seems to be the preferred mode but there is a growing interest in the value of group counseling. In discussing and working through many practical and situational problems, it has advantages over individual counseling. For example, role playing of how to handle a job interview, how to fill out job applications, or how to discuss one's own disability are all areas where the pooled resources and insights of the group help to promote a positive learning experience. It seems reasonable to expect, also, that the understanding and mutual respect of group members could generalize to the activity on the workshop floor thereby providing a sense of solidarity and togetherness with fellow workers. In the same vein, the social interaction provided in the group session could be quite beneficial to the disabled individual with limited social experience and contacts.

Handcraft Industries of Los Angeles is an example of a realistic workshop milieu. The director operates as he would in private industry, and the foremen are essentially oriented to efficient production. In this workshop, the counselor interprets "reality" to the clients. Clients are expected to adjust to the demands of the shop, because the shop represents the type of situation they will face in business and industry (Moes, 1962).

The Vocational Adjustment Center of the Chicago Jewish Vocational Service operates under quite a different set of tenets. Here the manipulation of the variables affecting the work atmosphere is seen as the major tool of therapeutic change. The output expected, the demands made by supervisors, the level of concentration, etc., are varied according to the needs of the individual. The entire staff, including foremen, is professionally trained. Counselors are available to clients for individual counseling and for group counseling (Gellman & Friedman, 1965).

Although counseling is, of course, the counselor's main function, he has several other roles he fulfills as part of the counseling process. Beginning with casefinding, we will discuss the major roles of the rehabilitation counselor in the workshop.

CASEFINDING

To increase the flow of clients, workshops use the technique of casefinding to supplement the number of clients admitted through existing
referral sources. There are many handicapped, especially the 
homebound, who are not aware of rehabilitation services available 
to them through workshops (Allen, 1958). Many of these individuals 
could make use of workshops. Some disability groups such as the 
mentally retarded are very well organized and have effective public 
relations and community education programs. There are others, such 
as multiple sclerosis, who do not have as well organized groups to 
inform them of available rehabilitation services. In addition, there 
are persons with all types of disabilities on various public assistance 
or welfare programs who do not take advantage of workshop services.

Most clients come to workshops on a referral from another agency or 
professional person. However, research has shown that even some 
professional persons are ill-informed of available rehabilitation 
services. Meyerson, et al (1959) investigated some sources of delay 
in the medical referral of rehabilitation clients and conclude that 
physicians have relatively little knowledge about vocational 
rehabilitation. They designate this as a major cause in the delay 
in medical referrals of their clients to rehabilitation services.

The counselor can be particularly helpful in disseminating information 
about workshops. Nussear (1964) and other writers have reported 
various techniques which served to increase the number of referrals 
from other agencies and professionals as well as self referrals. 
Brochures describing the program and services offered by the workshop 
can be distributed to other agencies, professionals, and groups for 
the disabled. Through his varied contacts with his professional 
colleagues and community agencies, the rehabilitation counselor 
informally spreads the word about his workshop. Referral sources 
can be kept posted as to the progress of the patient by the counselor 
who can send them frequent summaries of the client's progress.

The counselor may increase the number of clients by directly helping 
another agency to identify suitable referrals. He can look through 
the case folders of an agency or institution checking clients who 
might profit from the services of the workshop. A list of the 
criteria for admission to the workshop could be sent to agencies 
asking them to look through their files for likely candidates (Hardy 
& McAllister, 1961). If the counselor is well qualified to assess 
a candidate's prospects of benefiting from the various workshop 
services, then his responsibility for casefinding is clear.

INTAKE

"Intake is conducted by a rehabilitation counselor at the Work 
Adjustment Center to assure client understanding and acceptance of 
the program. The interview is used to help the client understand his 
need for rehabilitation service and explain how the Center's services 
will enable him to resolve his vocational problems (Jewish Employment 
and Vocational Service, 1965, p. 4)." This quotation is from 
a discussion of intake procedures at the Jewish Employment and 
Vocational Service' (Philadelphia), a work adjustment center for older 
disabled persons. It is typical of many workshops to place their
The best qualified employee at the point of intake. When the candidate is denied admission, he should be referred to some other agency that might better serve his needs.

The Philadelphia Jewish Employment and Vocational Service further delineates the counselor's role in intake by discussing the mechanics of intake. "Intake consists of gathering case summaries, medical reports and the administration of psychological tests of intelligence (Jewish Employment and Vocational Service, 1965, p.4)." Hobbs and Layser (1964) in discussing the selection procedure at the Occupational Training Center for the Mentally Retarded in San Jose, California, state, "The applicant is usually seen first by the rehabilitation counselor who gathers a vocational and academic history, a picture of the client's background, and arranges for medical examination and psychological testing (Hobbs and Layser, 1964, p. 4)."

During the intake procedure, the counselor must keep in mind the program and services that the workshop has to offer and the client's reason for applying for admission to the workshop. Let us assume the client is a young cerebral palsy who is mentally retarded and whose parents expect personal adjustment training and terminal sheltered employment. If such a client applied to a transitional workshop which retained trainees for only six months, he would likely be referred to another agency. On the other hand, if he had applied to one of the United Cerebral Palsy Association Workshops, he would likely be accepted since their program includes personality adjustment training and transitional as well as long-term work opportunities (Freidman, 1962).

Varied intake policies reflect differences in the historical origins, sources of support, and types of disability groups served. A knowledge of such factors would help the counselor to be more understanding of the policies which he is expected to carry out and help him to be more tactful in trying to modify them. Some workshops started simply as places for a particular disability group to pass the time. Later, this was combined with opportunities for work and remuneration. Sponsors of the workshop may have added rehabilitation services only recently, perhaps with some skepticism as to their value.

The counselor's conceptual scheme of a workshop may not quite fit what he finds on the scene. The shop may be purely oriented to work and production whereas the counselor may be attentive to how the shop can help the client improve his interpersonal relations and to the question of his ultimate progress toward competitive employment. In the present period of rapid development of professional workshops, it is well for the counselor to retain a flexible attitude about intake and some optimism regarding his ability to influence intake procedures in a desirable direction.
VOCATIONAL EVALUATION

Concurrent with intake and extending beyond it is the process of evaluation. Techniques of evaluating the residual abilities of clients have received more attention than any other professional matter. This function is closely related to the skills of the rehabilitation counselor, though in some shops the responsibility may belong to a counseling or clinical psychologist.

The vocational appraisal is an attempt to analyze the current vocational adjustment difficulties of the client, to provide guidelines for his management in the workshop, and to help the client establish a vocational objective for himself. A well conceived appraisal includes psychological, vocational and economic factors that bear upon the client's capacities for productive work.

Wendland and Crawford (1963) break down the rehabilitation counselor's responsibility as follows: (1) vocational exploration and testing; (2) evaluation of physical potential; (3) evaluation of work performance; (4) evaluation of intellectual potential; (5) evaluation of work motivation; (6) evaluation of vocational personality potential; and (7) evaluation by means of simulated work tasks.

The counselor interprets his data in writing a vocational diagnosis and appraisal as well as recommendations for a plan or program which would utilize the services of the workshop to the fullest. He communicates to his clients and fellow staff members the above information. He describes the client's condition, makes predictions about his probable progress, and makes suggestions to all those involved in the rehabilitation of the client.

In order to accomplish all of the various tasks involved in vocational evaluation, the counselor makes use of certain knowledges and skills. Knowledge of the world of work, skill in vocational diagnosis, and skill in interpersonal relations are particularly helpful in vocational evaluation. Knowledge of the world of work includes such things as familiarity with the labor market conditions and with the qualifications and demands of different occupations. To be skilled in the vocational diagnosis of clients is to be able to determine the type of work the client is best suited for, the degree of vocational adjustment he has achieved, and his readiness for training.

The importance of vocational evaluation in the various phases of the workshop program has been stressed in the literature. (See Banister, et al., 1964; Davis Memorial Goodwill Industries, 1961; Jarrell, 1962; Lipton, 1963; Rabinowitz, 1964.) It contributes to the program as a whole as well as to specific aspects of the workshop program. Special use of vocational evaluation is made in
assigning clients to work, in supervising the rehabilitation work program, in understanding their vocational adjustment problems, in job placement, and in implementing follow-up. Evaluation has an important role in determining which services clients are currently best suited for. Raising the client's morale, and promoting motivation for rehabilitation is enhanced through vocational evaluation. The following examples from the literature illustrate how the counselor and his colleagues make special use of vocational evaluation in different phases of the workshop operation.

Appell, Williams, and Fishell (1962) while investigating the characteristics which differentiate successful and unsuccessful retardates in competitive employment, found that neither intelligence nor educational level were related to productivity in the workshop. Levenson (1965) investigated the factors most predictive of work success of the severely disabled and found that age, extent of education, length of time from onset of disability to resumption of employment, and return to pre-disability employment were variables which correlated with vocational recovery. Both studies have implications for job placement and training.

In describing a program which prepares mental patients for employment in the community, Cohen and Lafave (1965) state that patients are evaluated by the work supervisor bi-weekly and are gradually moved to day work placements outside the hospital. Barton and Barton (1965), in discussing the requirements of effective sheltered workshop supervision, stress the importance of evaluation in supervision.

While developing means of classifying and evaluating cerebral palsied adults in order to determine their vocational potential, Hardy and McAllister (1961) found that the following were significant prognostic factors for employability: good hand usage with one hand; adequate level of intelligence; and motivation. On the basis of their evaluation of cerebral palsied adults in a study which was attempting to develop facilities for such evaluations, Freidman (1962) made predictions about vocational adjustment. In discussing the placement of the cerebral palsied and others through evaluation and training, Harris, Millar, and Merritt (1965) point out three advantages of the evaluation process as it was carried out in this project: (1) by ascertaining the type of work the individual can adequately perform, he can frequently be placed immediately; (2) the process can point out types of training that would be beneficial to the individual; and (3) the process itself, which resembles a working situation can help boost the morale of the individual.

A particular type of vocational evaluation which has been called "prevocational testing" deserves special mention. Also designated as the "work sample" or "job sample" technique, it is much discussed
Typically, the client is moved through a series of pre-determined job tasks in the course of which precise observations are made and recorded. The result is a detailed inventory of the client's skills in each of a series of operations which were more or less arbitrarily selected. These evaluation methods seem to have been influenced by an attempt to copy the precision and validational techniques of psychological test construction.

Existing tests of aptitudes and vocational and intellectual characteristics should be used where indicated. By transforming the integrity of a workshop environment with its reality features into a testing situation, the job sample technique gives up the unique potentialities of the workshop, viz., the possibility of observing the client under conditions closely paralleling those prevailing in the world of work.

It is possible to exploit valuable aspects of the work sample technique while retaining conditions of substantial reality. A client might be placed wrapping packages for one week, then switched to deburring and so on without having him feel that he is an object of scientific curiosity.

We would like to believe that the counselor has a role in helping the workshop realize that a special feature of vocational evaluation in the workshop is that the client is there for a sustained period of time—not for two or three hours. The workshop may expose directly the universe of the client's vocational behavior about which the psychometrician is straining to make some sensible inferences. Since the counselor is sophisticated about vocational testing, he can do his observational best in the natural habitat of the workshop.

**JOB PLACEMENT AND FOLLOW-UP**

Successful placement in employment is the last step in the rehabilitation process. Ideally, the client would be motivated to find his own job. However, there are situations where the counselor's help is needed. The counselor may assist in placement when the client is multiply handicapped, or has some special disability requiring unusual conditions for work. For instance, long term mental patients and clients with skills sparsely represented in the labor market usually require special placement efforts. At times, he recommends that his client accept a job of related skills when it is the best available.

Creating employment opportunities for the handicapped is a continuing project in which he would participate together with business and civic leaders. The counselor might encourage the sponsorship of a "man marketing clinic" to promote the hiring of his own clients. He may regard this phase of his work as drudgery,
or he may accept it as a challenge to put his personal and professional skills to work in a wider world where the chances for ingenuity are endless.

The undergirding for a successful placement program is manifold: to know the current local labor market; to know employment and placement resources; to have a broad knowledge of various occupations and their physical demands, skills and tasks required; to be aware of the physical limitations of the work setting; and to be able to relate the client's work behavior to the expressed and unexpressed job requirements.

Follow-up is the often neglected practice of keeping in touch with clients after they have left the workshop for outside employment. The client and his new employer would both be reassured to know that continuing professional help is available. When the employer engages a marginal worker, he is more likely to retain him when he has professional consultation in managing him, particularly in the initial period of adaptation. The counselor may find that there is an immediate need for supportive counseling to help the client deal with new problems he did not face in the workshop. If the worker has had previous unsuccessful placements, he may be unduly apprehensive and require special counseling sessions to bolster his confidence and help him adjust to the routine of a new job.

Follow-up is vital for its data. It provides statistics indicative of the efficacy of the workshop program. It permits the testing of theories and practices, and encourages experimentation and ingenuity in searching for alternate approaches.

The findings of follow-up research might require modification in the thinking of the staff. One study (Schmidt, Arnholter, and Warner, 1962) revealed that while the staff rated 48 percent of the mentally retarded clients employable, actually 70 percent were employed in either full-time or part-time employment. Presumably the staff was overly cautious in its predictions of employability. The information obtained through follow-up is also the basis of progress reports, justification for budget proposals, a basis for determining counselor proficiency, and general administrative control.

IN-SERVICE TRAINING

Most rehabilitation counselors have some training in research, and usually keep a weather eye open for fresh ideas, and some even have a playful experimental attitude that challenges routine and seeks out innovation. Graduate programs in counselor training throughout the country typically pride themselves on developing
such attitudes in their students. More recently, workshops have started to accept the mentally retarded, the mentally ill, epileptics and alcoholics and other difficult-to-rehabilitate persons. Some well designed studies are beginning to appear illustrating the point that workshops can serve a wider variety of handicapped persons than previously considered possible. (See Appell, Williams and Fishell, 1962; Feintuch, 1959; Wright, 1962). If the workshop is to cope effectively with these newer responsibilities, it will need the help of a variety of professionally trained persons.

The counselor in the workshop probably likes to think of himself as one who is ever ready to discover new tasks for the workshop and new ways of carrying out old responsibilities. He has a certain commitment to social science as a strong ally in man's effort to become more than he is now. He belongs to the rehabilitation movement and he often has the missionary zeal that this implies. If the counselor happens to be the only one in the workshop trained in the social sciences, he carries the main responsibility for investigation and program development. He may become the professional conscience of the workshop by assuming the responsibility that his agency keep pace with developments in vocational rehabilitation and its related social sciences.

The way in which the counselor uses his knowledge and experience to help other staff members with their duties is an important aspect of his personal skill. If his insights into human behavior are confined to a one-to-one relationship with a client, then his value to the workshop is thereby limited. In order to carry out the in-service training function, however, he must first become an industrious student of the workshop and its personnel. No matter how successful he may have been in counseling in some other setting, it is probable that he has much to learn about the special conditions of rehabilitation in a workshop. Each workshop is a distinctive reality with special budgeting problems, special relations to the community, and its own notions of its proper destiny. Some aspects of this reality are readily apparent; others need to be sought; and still other can only be sensed.

Rarely will the counselor be asked to make didactic presentations to the staff. Typically, in-service training takes place in the context of case conferences, brief consultations, and lunch-hour conversations. New ideas and possibilities are conveyed regarding ways of motivating and supervising trainees, interpretations of the personal meanings of disabilities, and the re-examination of stereotypes of human behavior. For example, a foreman may have some uncertainty about how to supervise a given client because he lacks experience with the mentally ill. Here, a dialogue is begun and some simple guidelines are suggested. Possibly, at a later time the same foreman could be consulted for his advice on how to adapt an industrial operation for a person confined to a wheel
Barton and Barton (1965) in discussing a project sponsored by the Goodwill Industries of Santa Clara County (California) in which they investigated the requirements of effective sheltered workshop supervision, conclude that there is a great need to expand and develop a workshop training program to supply better trained supervisory personnel. They noted, however, that more emphasis should be placed on selecting supervisors with suitable personality characteristics rather than stressing only training programs providing knowledge of basic principles and practices of rehabilitation. As a vocational psychologist, the counselor can contribute to the selection of personnel possessing the required personality attributes.

Since he has developed the habit of keeping up with the literature in psychology and rehabilitation, and relevant social legislation, the counselor becomes the purveyor of this information for the workshop. Hopefully, because of training, he is familiar with the importance of this information and how it can be assimilated to the operation of the workshop. Sometimes, such information can enable the workshop to tap additional sources of financial assistance under various Federal and state regulations as well as private foundations.

TEAMWORK AND OTHER PROFESSIONAL RELATIONSHIPS

As a member of the workshop staff, the counselor assumes some responsibility for advancing the general objectives of the workshop in his social service, business, and general community relationships. His verbal skills, and professional status make it likely that he would be frequently called upon to interpret workshops in all these areas. He might represent his workshop (or the workshop movement) at professional meetings, service clubs, or wherever the cause of the handicapped may be advanced.

Since he is familiar with various community agencies, the counselor makes use of their services to either seek advice or refer a client for additional services. For example, he may ask a Bureau of Public Assistance worker how a client can increase his monthly allowance so he may have money for transportation to a new job. Another client may be referred to a marriage counselor for help with a marital problem. When the counselor deals with clients referred to the workshop from institutions such as hospitals and prisons, he can help to maintain continuity in service or point up gaps in needed services.

An example of such a program is reported by Goertzel and Richert (1964) in their discussion of a continuing program at Camarillo
State Hospital in California which coordinates hospital and community work adjustment services. Mental patients are released in groups of ten and are provided with living quarters. The authors state that the patients lend support to each other in their joint venture of finding work and re-establishing themselves in the community. They receive individual and group counseling during the adjustment period.

The counselor may serve in the role of vocational adjustment specialist. This is a broader concept than the work of counseling interpreted as working with clients. In this role, he is using his knowledge of job analysis, motivation, morale, and personnel administration to improve the general management of the workshop.

In the newer and smaller workshops, the counselor will find that he has a wide latitude in defining his professional tasks and is expected to give leadership in establishing workshop policies. In the well established shops, he will find a policy and philosophy to which he would be expected to adapt.

In certain roles, the counselor will also find psychologists, social workers, and other professionals who claim equal or greater competence. Neither the counselor nor anyone else has any special right to this or that function except that based on demonstrated competence. As in the search for peace in the world today, the counselor will find ample scope for tact, compromise, firmness, and biding one's time as well as the opportunity to practice the art of using each in its right place.

REFERENCES


Davis Memorial Goodwill Industries. To demonstrate that a larger number of severely disabled persons can be rehabilitated through establishing physical medicine and rehabilitation services as a part of a program of a sheltered workshop. (Project no. 71). Washington, D.C.: Davis Memorial Goodwill Industries, 1961. 91 p. Mimeo.


