



Volume 10, Issue 3, 2015

reSearch

A collection of research reviews on rehabilitation topics from NARIC and other information resources.

Employment and Veterans with Disabilities

In this edition of *reSearch* we explore the topic of employment and veterans with disabilities. According to the 2013 American Community Survey there are 39,892,960 civilians with disabilities aged 18-64 and 314,746,745 individuals without disabilities living in the community nationwide. The number of civilian veterans aged 18+ living in the community nationwide is 19,344,883; of these, 5,522,589 (28.5%) have a disability (Retrieved from http://www.disabilitycompendium.org/docs/default-source/2014-compendium/2014_compendium.pdf). Veterans are defined as men and women who have previously served on active duty in the U.S. Armed Forces and consist of individuals who served during World War II, the Korean War, and Vietnam as well as individuals who served in the Gulf War-era's (I & II); and individuals who served on active duty during "other service periods" (Retrieved from: <http://www.bls.gov/news.release/pdf/vet.pdf>). Veterans with disabilities may or may not have a disability related to their service in the military. When a veteran has a disability related to his or her service it is referred to as a service-connected disability. Service-connected disability refers to a disease or injury incurred or aggravated during military service as well as post-service disabilities that are considered related to or secondary to disabilities in service, and for disabilities presumed to be related to circumstances of military service, even if they arise after service. Individuals with service-connected disabilities may be eligible for compensation based on a disability rating scale through the Veterans Administration.

Veterans with and without disabilities face a unique set of challenges when returning to work and/or obtaining gainful employment. It may be difficult for veterans to transition from military to civilian life especially for those who have served in conflict zones like Afghanistan and Iraq. In addition to underlying physical and mental disabilities other issues may include: (1) lack of preparation for finding a civilian job and unrealistic expectations on what type of employment and salary he or she qualifies for, (2) the gap between military job experience versus civilian job experience (i.e., position), (3) unaddressed mental health issues including post-traumatic stress disorder (PTSD),

depression, etc., and (4) difficulty relating to civilians and adapting to a civilian work culture (Retrieved from: <http://www.stripes.com/news/veterans/report-despite-hiring-efforts-veterans-face-employment-obstacles-and-civilian-disconnect-1.345755>).

Veterans with disabilities not only have to navigate the transition from the military to civilian job culture but they also have to determine whether to disclose or not disclose their conditions and/or disabilities if they are not obvious (i.e., invisible such as PTSD, etc.), whether to acquire accommodations through their employer in order to perform their previous job if returning to work from service, or whether to seek out a new position with the appropriate accommodations. Not all veterans with service-connected or other disabilities may need an accommodation. Each accommodation should be considered unique to the veteran and his or her work environment. Examples of accommodations may include: written materials in accessible formats, such as large print, Braille, or electronic format; modified equipment or devices (i.e., assistive technology to allow an individual to use a computer or a telephone, use a keyboard or mouse, etc.); physical modifications to the workspace space (e.g., reconfiguring a workspace, including adjusting the height of desk or shelves for an individual in a wheelchair); and flex schedule such as telework or leave for treatment, recuperation, or training related to their disability (Retrieved from: http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm).

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This edition of reSearch provides a “snapshot” of over 20 years of research on employment and veterans with disabilities. This “snapshot” presents a general overview of employment, vocational rehabilitation, and other work-related resources for veterans with disabilities. The combined search terms for this edition of reSearch included: veterans, employment, employers, employees, work, workers, and vocational rehabilitation. A listing of over 150 additional descriptor terms between the NARIC, ERIC, Cochrane, and PubMed databases can be found at the end of this document.

A search of the REHABDATA database resulted in 50 documents published between 1998 and 2015. The ERIC and Cochrane database searches resulted in 9 documents between 1996 and 2014, and 11 documents from 1990 and 2014; respectively. Finally, a search of the PubMed database resulted in 5 documents between 1993 and 2015. The complete citations are included in this research brief.

References:

Brucker, D.L., Houtenville, A.J., & Lauer, E.A. (2014). **2014 annual disability statistics compendium**. Retrieved from http://www.disabilitycompendium.org/docs/default-source/2014-compendium/2014_compendium.pdf.

Bureau of Labor Statistics, U.S. Department of Labor (2015). **Employment Situation of Veterans – 2014**. Retrieved from <http://www.bls.gov/news.release/pdf/vet.pdf>.

Druzin, H. (2015, May 12). **Report: Despite hiring efforts, veterans face employment obstacles and civilian disconnect**. *Stars and Stripes*. Retrieved from <http://www.stripes.com/news/veterans/report-despite-hiring-efforts-veterans-face-employment-obstacles-and-civilian-disconnect-1.345755>.

Office of Public Affairs, U.S. Department of Veteran Affairs (2015). **Federal Benefits for Veterans, Dependents and Survivors: Chapter 2 Service-connected Disabilities**. Retrieved from http://www.va.gov/opa/publications/benefits_book/benefits_chap02.asp.

U.S. Equal Employment Opportunity Commission, (2015). **Veterans and the Americans with Disabilities Act (ADA): A Guide for Employers**. Retrieved from http://www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm.

NIDILRR Funded Projects Related to Employment and Veterans with Disabilities

In addition to document searches, we searched our NIDILRR Program Database to locate grantees/projects related to employment and veterans with disabilities. The search resulted in 16 currently funded and 7 projects that are no longer active. Project information and their publications are offered as additional resources for our patrons.

ADA Network Knowledge Translation Center

Project Number: H133A110014

Phone: 206/543-3677

Email: adakt@uw.edu.

adata.org.

Advanced Rehabilitation Research Training Project (ARRT)

Project Number: H133P130009

Phone: 352/273-6883

Email: wmann@phhp.ufl.edu.

Cornell RRTC on Employer Practices Related to Employment Outcomes Among Individuals with Disabilities

Project Number: H133B100017

Phone: 607/255-9536 (V), 607/255-2891 (TTY)

Email: smb23@cornell.edu.

www.employerpracticesrrtc.org.

Creating Evidence-Based Vocational Rehabilitation Service Delivery Practices

Project Number: H133B100034

Phone: 608/262-2137

Email: chan@education.wisc.edu.

research2vrpractice.org.

Langston University Rehabilitation Research and Training Center on Research and Capacity Building for Minority Entities

Project Number: H133B130023

Phone: 405/530-7530

Email: clmoore@langston.edu.

www.langston.edu/capacitybuilding-rrtc.

Mid-Atlantic ADA National Network Regional Center - Region III

Project Number: H133A110017

Phone: 800/949-4232 (V/TTY, in DC, DE, MD, PA, VA, and WV), 301/217-0124 (V/TTY)

Email: adainfo@transcen.org.

www.adainfo.org.

Northeast ADA National Network Regional Center - Region II

Project Number: H133A110020
Phone: 800/949-4232 (V/TTY in NY, NJ, PR, and VI), 607/255-6751
Email: northeastada@cornell.edu.
www.northeastada.org.

Northwest ADA National Network Regional Center - Region X

Project Number: H133A110015
Phone: 800/949-4232 (V/TTY, AK, ID, OR, and WA), 425/248-2480 (V)
Email: nwadactr@uw.edu.
www.nwadacenter.org.

Project CAREER: Development of an Interprofessional Demonstration to Support the Transition of Students with Traumatic Brain Injuries from Post-secondary Education to Employment

Project Number: H133A130066
Phone: 330/672-2294
Email: prumrill@kent.edu.

Rocky Mountain ADA National Network Regional Center - Region VIII

Project Number: H133A110018
Phone: 800/949-4232 (V/TTY, in CO, MT, ND, SD, UT, and WY), 719/444-0268 (V/TTY)
Email: rstafford@mtc-inc.com.
www.adainformation.org.

Treating Hidden Barriers to Employment: Integrated Treatment for PTSD in Supported Employment

Project Number: H133G140147
Phone: 908/889-2453
Email: luwel@shrp.rutgers.edu.

Rehabilitation Engineering Research Center: Develop and Evaluate Technology for Low Vision, Blindness, and Multi-Sensory Loss

Project Number: H133E110004
Phone: 415/345-2000
Email: reec@ski.org.
www.ski.org/Rehab.

Rehabilitation Research and Training Center on Employment of Individuals with Physical Disabilities

Project Number: H133B130011
Phone: 804/828-1851
Email: kinge@vcu.edu.
www.vcurrtc.org.

Rehabilitation Research and Training Center on Employment Policy and Measurement

Project Number: 90RT5037
Phone: 603/862-2300
Email: andrew.houtenville@unh.edu.
researchondisability.org/epm-rrtc.

Rehabilitation Research and Training Center on Improving Employment Outcomes for Individuals with Psychiatric Disabilities

Project Number: H133B140028
Phone: 617/353-3549
Email: erogers@bu.edu, mfarkas@bu.edu.
cpr.bu.edu/research/current-research/rrtc-2014-2019.

Rehabilitation Research and Training Center: Individual-Level Characteristics Related to Employment Among Individuals with Disabilities

Project Number: H133B120005
Phone: 973/324-8387
Email: joneil@kesslerfoundation.org.
www.researchondisability.org/ic-rrtc.

These projects have completed their research activities and are now closed.

Advanced Psychiatric Rehabilitation Research on Employment and Community Integration

Project Number: H133P050006
Phone: 908/889-2438
Email: kgill@umdnj.edu.

The Assessment of Consciousness Following a Traumatic Brain Injury Among Veterans and Non-Veterans: Phase II

Project Number: H133F000013
Phone: 312/503-0429
Email: t-pape@northwestern.edu.

Demand-Side Employment Placement Models

Project Number: H133A060033
Phone: 315/443-1367
Email: wmyhill@syr.edu.
bbi.syr.edu/projects/Demand_Side_Models/index.html.

A Four-Year Research and Demonstration Project to Address Ways to Improve the Employment Practices Covered by Title I of the Americans with Disabilities Act (ADA)

Project Number: H133A970005
Phone: 607/255-3079 (V), 607/255-2891 (TTY)
Email: smb23@cornell.edu.
www.ilr.cornell.edu/ped.

Improving Money Management Skills in Veterans with Psychiatric Disabilities

Project Number: H133G100145

Phone: 919/972-7451, ext. 3

Email: eric.elbogen@unc.edu.

Rehabilitation Engineering Research Center on Workplace Accommodations

Project Number: H133E070026

Phone: 404/894-1414, 800/726-9119

Email: workrerc@coa.gatech.edu.

www.workrerc.gatech.edu.

Studying Treatments and Effectiveness of Prosthetic Systems (STEPS): Utilizing a Regional Collaborative Longitudinal Outcomes Database (CLOUD)

Project Number: H133G120262

Phone: 212/263-6547

Email: tamara.bushnik@nyumc.org.



Documents from NARIC's REHABDATA search listed are listed below:

2015

Barnett, S.D., Cotner, B.A., Njoh, E.N., O'Connor, D.R., Ottomanelli, L., & Trainor, J.K. (2015). **Facilitators and barriers to employment among veterans with spinal cord injury receiving 12 months of evidence-based supported employment services.** *Topics in Spinal Cord Injury Rehabilitation*, 21(1), 20-30.

NARIC Accession Number: J70705

ABSTRACT: Study examined the association between facilitators and barriers of employment and employment outcome among veterans with spinal cord injury (SCI) who participated in an evidence-based supported employment (EBSE) program. Data on facilitators and barriers to employment were extracted from qualitative interviews and quantitative measures administered in person to 34 veterans with SCI who completed 12 months of an EBSE program. Participants who did (case) and did not (control) obtain competitive employment were matched on time since SCI. Facilitators and barriers to employment were compared between the groups. Self-report measures administered at baseline

were examined; there were no statistically significant factors that predicted employment outcomes after 12 months of EBSE program participation. Qualitative interview data revealed program-specific facilitators and veteran characteristics that were associated with employment outcomes. The qualitative data illustrate how the integration of the vocational rehabilitation specialist on the medical team is helpful for addressing identified disability-specific barriers, including practical matters such as transportation and caregiving schedules, to facilitate employment outcomes.

Barnett, S.D., Goetz, L.L., Ottomanelli, L., & Toscano, R. (2015). **Vocational rehabilitation in spinal cord injury: What vocational service activities are associated with employment program outcome?.** *Topics in Spinal Cord Injury Rehabilitation*, 21(1), 31-39.

NARIC Accession Number: J70706

ABSTRACT: Study examined how the amount and the type of vocational activities delivered within a 12-month evidence-based supported employment program were related to employment outcomes for 81 veterans with spinal cord injury (SCI). The primary activities recorded were vocational counseling (23.9 percent) and vocational case management (23.8 percent). As expected, job development and employment supports were the most time-consuming activities per appointment. Though the amount of time spent in weekly appointments did not differ by employment outcome, participants obtaining competitive employment averaged significantly more individual activities per appointment. Further, for these participants, job development or placement and employment follow-along or supports were more likely to occur and vocational counseling was less likely to occur. Community-based employment services, including job development or placement and employment follow-along or supports as part of a supported employment model, were associated with competitive employment outcomes. Office-based vocational counseling services, which are common to general models of vocational rehabilitation, were associated with a lack of employment. The findings suggest that vocational services that actively engage veterans with SCI in job seeking and acquisition and that provide on-the-job support are more likely to lead to employment than general vocational counseling that involves only job preparation.

Bell, M.D., Fleming, M.F., Ginger, E.J., Humm, L.B., Jordan, N., Olsen, D., Smith, M.J., Wright, K., & Wright, M.A. (2015). **Virtual reality job interview training for veterans with posttraumatic stress disorder.** *Journal of Vocational Rehabilitation, 42*(3), 271-279. NARIC Accession Number: J71336

ABSTRACT: Study evaluated the acceptability and efficacy of virtual reality job interview training (VR-JIT) among veterans with posttraumatic stress disorder (PTSD) through a randomized controlled trial in which 23 veterans were VR-JIT trainees and 10 veterans served as waitlist treatment-as-usual (TAU) controls. VR-JIT trainees completed up to 10 hours of simulated job interviews and reviewed information and tips about job interviewing, while wait-list TAU controls received services as usual. Primary outcome measures included two pre-test and two post-test video-recorded role-play interviews scored by blinded human resource experts and self-reported interviewing self-confidence. Trainees attended 95 percent of lab-based VR-JIT sessions and found the intervention easy-to-use, helpful, and prepared them for future interviews. VR-JIT trainees demonstrated significantly greater improvement on role-play interviews compared with wait-list TAU controls and demonstrated a large effect for within-subject change. VR-JIT performance scores increased significantly over time. Although VR-JIT trainees showed a moderate effect for within-subject change on self-confidence, the observed difference between conditions did not reach significance. Results provide preliminary support that VR-JIT is acceptable to trainees and may be efficacious for improving job interview skills and self-confidence in veterans with PTSD.

2014

(2014). ***New rules: Vietnam era veterans' readjustment assistance act.***

NARIC Accession Number: O19800

Project Number: H133A110014; H133A110017

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=127776>.

ABSTRACT: Originally passed in 1974, the Vietnam Era Veterans' Readjustment Assistance Act (VEVRAA) aimed to provide assistance to returning Vietnam veterans and to protect them from employment discrimination. Despite these legal protections, veterans with disabilities have continued to face barriers and discrimination in employment. On March 24, 2014, new rules for VEVRAA took effect. These new rules aim to strengthen

affirmative action requirements so that federal contractors and subcontractors improve their efforts to recruit and hire protected veterans. This fact sheet explains which veterans have rights and which employers have obligations under the new VEVRAA rules.

Abraham, K.M., Ganoczy, D., Resnick, S.G., Yosef, M., & Zivin, K. (2014). **Receipt of employment services among veterans health administration users with psychiatric diagnoses.** *Journal of Rehabilitation Research and Development (JRRD) (formerly the Bulletin of Prosthetics Research), 51*(3), 401-414.

NARIC Accession Number: J69484

ABSTRACT: Study examined the population-based reach of Veterans Health Administration (VHA) employment services to VHA patients with psychiatric diagnoses. Reach of services includes the percentage and characteristics of people who accessed services compared with those who did not. Using clinical administrative data, patients with a psychiatric diagnosis were identified among a random sample of all patients who received VHA services during fiscal year 2010. Among the 52,542 VHA patients with psychiatric diagnoses, the likelihood of their receiving any VHA employment services and specific types of employment services, including supported employment, transitional work, incentive therapy, and vocational assistance, was determined. Clinical and demographic characteristics associated with receiving employment services were identified. The results indicated that 4.2 percent of VHA patients with a psychiatric diagnosis received employment services. After adjusting for clinical and demographic characteristics, VHA patients with schizophrenia and bipolar disorder were more likely to receive any employment services and to receive supported employment than were patients with depression, posttraumatic stress disorder (PTSD), or other anxiety disorders. VHA patients with depression and PTSD were more likely to receive transitional work and vocational assistance than patients with schizophrenia.

Armstrong, A.J., Darter, B., & Hawley, C. (2014). ***An exploration of employment barriers and employment skill enhancement of veterans with traumatic amputation.***

NARIC Accession Number: O19391

Project Number: H133B130011

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=124093>.

ABSTRACT: This research brief describes a study that

will examine barriers to employment for veterans and service members with physical disabilities resulting from traumatic extremity amputation(s). The goal is to develop a novel multi-component model that promotes quality competitive employment outcomes. This study will use a mixed methods methodology to gather information including an online survey, focus groups, ethnographic case studies, and a Delphi Study. Plans for how these strategies will be used in the research are summarized in this brief.

Armstrong, A., & Waterworth, T. (2014). *Community re-integration of Veterans: Resilience, well-being, and employment*.

NARIC Accession Number: O19699

Project Number: H133B130011

ABSTRACT: Presenters share information about three pilot exploratory studies and discuss the results learned from the focus groups. Discussion includes topic such as employment experience, transition, challenges, and stigma concerning the self-reported resilience, perceived well-being, and quality of life of Operation Enduring Freedom/Operation Iraqi Freedom (OEF/OIF) Veterans. Run time: 49 minutes 51 seconds.

Barnett, S.D., Goetz, L.L., & Ottomanelli, L. (2014). **Effectiveness of supported employment for veterans with spinal cord injury: 2-year results.** *Archives of Physical Medicine and Rehabilitation*, 95(4), 784-790.

NARIC Accession Number: J68586

ABSTRACT: Study examined competitive employment rates over a 2-year follow-up period for veterans with spinal cord injury (SCI) who received supported employment (SE) compared with those who received treatment as usual (TAU) for vocational issues. A total of 201 subjects were enrolled and completed baseline interviews. At interventional sites, 81 subjects were randomized to SE and 76 to TAU. At observational sites, 44 subjects were enrolled in a nonrandomized TAU condition. The intervention was a SE program called the SCI Vocational Integration Program, which followed the principles of the individual placement and support model of SE for people with mental illness. The primary outcome was competitive employment, defined as having a paying job in the community earning minimum wage or higher. For the entire 2-year follow-up period, SE subjects were significantly more likely to achieve employment (30.8 percent) than either the TAU subjects at the intervention sites (10.5 percent) or the TAU subjects at the observational sites (2.3 percent). Most

subjects who obtained competitive employment did so in year 1, and the average time to first employment was about 17 weeks. Results suggest that SE was better than usual practices in improving employment outcomes for veterans with SCI across a 2-year follow-up period.

Barnett, S.D., Toscano, R., & Ottomanelli, L. (2014). **Individual placement and support (IPS) in physical rehabilitation and medicine: The VA spinal cord injury experience.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 37(2), 110-112.

NARIC Accession Number: J69287

ABSTRACT: This report summarizes findings from the first studies on individual placement and support (IPS) in the field of physical medicine and rehabilitation and discusses adaptation of the IPS model. Published results from the Department of Veterans Affairs (VA) Spinal Cord Injury Vocational Integration Program study and clinical field observations are reviewed. Results suggest that IPS was more effective than traditional vocational rehabilitation. With physical disabilities, the model needs adaptation with respect to integration, disclosure, and job development while following the core principles. Special consideration is needed with respect to caseload size and transportation issues. The authors conclude that IPS can be successfully adapted to physical medicine and rehabilitation.

Blansett, C., Davis, L.L., Parker, P.E., Pilkinton, P., Poddar, S., & Toscano, R. (2014). **Impact of social challenges on gaining employment for veterans with posttraumatic stress disorder: An exploratory moderator analysis.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 37(2), 107-109.

NARIC Accession Number: J69286

ABSTRACT: Study explored whether psychosocial challenges impact the effects of vocational rehabilitation (VR) in veterans with posttraumatic stress disorder (PTSD). A post hoc analysis was conducted on the results of a pilot study in which 85 unemployed veterans with PTSD were randomized to either individual placement and support (IPS) or the usual care VR programs to explore possible moderators of treatment: transportation, housing, financial means, and family care burden. The treatment groups were compared to determine whether the proposed moderator had a differential effect of treatment outcome, defined as obtaining competitive employment. The two groups were analyzed within each

moderator, and the number needed to treat (NNT) was calculated. The closer the number needed to treat is to one, the better the treatment effect. When examining groups within each moderator, there was a greater IPS supportive employment benefit in gaining competitive employment for those with inadequate transportation (NNT = 1.5) and inadequate housing (NNT = 1.5) compared with the main finding of the pilot study (NNT = 2.07). Compared with the main finding of the pilot study, there was no greater advantage of IPS for those with adequate transportation (NNT = 2.4) or adequate housing (NNT = 2.4). Compared with the main finding in the pilot study, those without a family care burden had a greater benefit from IPS (NNT = 1.4) and those with family care burden had a reduced treatment effect (NNT = 3.3).

Cook, J.A., & Mueser, K.T. (Eds.). (2014). **Special issue on the individual placement and support (IPS) model of supported employment.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 37(2), 73-156.

NARIC Accession Number: R09279

ABSTRACT: Articles in this journal issue provide an update on individual placement and support (IPS), the evidence-base practice of supported employment for people with psychiatric disabilities. Topics include: the IPS supported employment learning collaborative; strategies for integrated employment and mental health services; work accommodations and natural supports for maintaining employment; the potential of technology for enhancing IPS supported employment; impact of social challenges on gaining employment for veterans with posttraumatic stress disorder; IPS in physical rehabilitation and medicine; the effects of supported employment in Latino consumers with severe mental illness; IPS in Europe; effectiveness of IPS for people with severe mental illness in The Netherlands; a randomized controlled trial of IPS in Japan; implementation of evidence-based supported employment in regional Australia; and accomplishments and challenges of the family advocacy for the IPS supported employment project. Individual articles may be available for document delivery under accession numbers J69282 through J69293.

Dixon, T., Goetz, L.L., Ho, C., Holmes, S.A., Ottomanelli, L., Sanford, P., Smith, S., & Thomas, F.P. (2014). **Optimizing medical care to facilitate and sustain employment after spinal cord injury.** *Journal of Rehabilitation Research and Development (JRRD)*

(formerly the *Bulletin of Prosthetics Research*), 51(6), xi-xxi.

NARIC Accession Number: J70756

ABSTRACT: This editorial discusses the vocational implications of medical, neuromusculoskeletal, and neuropsychological conditions typical of spinal cord injury (SCI) and strategies for managing these impairments so as to improve return-to-work (RTW) outcomes for veterans with SCI. Regardless of the specific medical challenges or the type of employment, a partnership between the healthcare team and the person with SCI who wants to work may help resolve obstacles to RTW and may constitute the most likely path to optimal care as well as successful employment.

Goetz, L.L., Joyce, V., Ottomanelli, L., Sinnott, P.L., Su, P., & Wagner, T.H. (2014). **Cost-effectiveness of supported employment for veterans with spinal cord injuries.** *Archives of Physical Medicine and Rehabilitation*, 95(7), 1254-1261.

NARIC Accession Number: J69141

ABSTRACT: Study estimated the cost-effectiveness of a supported employment (SE) intervention that had previously been found effective in veterans with spinal cord injuries (SCI). The Spinal Cord Injury Vocational Integration Program (SCI-VIP) was based on a model of evidence-based SE that includes standardized practices focusing on the interests and abilities of the patient and involving high levels of integration within the clinical treatment team. This cost-effectiveness analysis was conducted using cost and quality-of-life data gathered from 157 subjects who completed a study of the SCI-VIP for veterans with SCI in 6 Veterans Health Administration SCI centers. Subjects were randomly assigned to the intervention of SE or treatment as usual. The main outcome measures were costs and quality-adjusted life years (QALYs), which were estimated from the Veterans Rand 36-Item Health Survey, extrapolated to Veterans Rand 6 Dimension utilities. Average cost for the SE intervention was \$1,821. In 1 year of follow-up, estimated total costs, including health care utilization and travel expenses, and average QALYs were not significantly different between groups, suggesting that the SCI-VIP intervention was not cost-effective compared with usual care. These findings indicate that an intensive program of SE for veterans with SCI, which is more effective in achieving competitive employment, is not cost effective after 1 year of follow-up. Longer follow-up and a larger study sample will be necessary to determine whether SE yields benefits and is cost-effective in the long run for a population with SCI.

Hazler, R.J., & Tamez, M.A. (2014). **Expanding Frain, Bishop, and Bethel's rehabilitation model to address needs of female veterans.** *Journal of Rehabilitation*, 80(4), 50-57.

NARIC Accession Number: J70262

ABSTRACT: Frain, Bishop, and Bethel created a five-point rehabilitation model intended to guide rehabilitation counselors working with veterans of the Iraq and Afghanistan wars during the rehabilitation process by highlighting common areas of concern that could serve as external impediments to employment. The concerns outlined in this model are general to veterans of the wars in Iraq and Afghanistan as a whole, but lack consideration for the specific issues faced by the women who also served in these conflicts. This article suggests ways to expand the Frain et al. rehabilitation model to include concerns of female veterans to better equip rehabilitation counselors who may be assisting this particular population in reaching their goals of securing successful employment. These issues of concern include military sexual trauma, issues with body image (particularly following an acquired visible disability such as limb amputation), parenting concerns, barriers to accessing and receiving benefits through the Veterans Administration, and growing rates of homelessness.

2013

(2013). **Ten tips for employers: Tapping into the talents of veterans with disabilities.**

NARIC Accession Number: O19517

Project Number: H133A110014; H133A110020

Available in full-text at: [http://adata.org/sites/adata.org/files/files/Tapping Talents Veterans 2013.pdf](http://adata.org/sites/adata.org/files/files/Tapping_Talents_Veterans_2013.pdf).

ABSTRACT: Factsheet presents ten points employers can use to consider their readiness to employ veterans with disabilities. These ten points are based on research at Cornell University about barriers faced by veterans with disabilities in the workplace.

(2013). **Ten tips for families: Supporting a veteran with a disability returning to work.**

NARIC Accession Number: O19079

Project Number: H133A110015

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=122418>.

ABSTRACT: This fact sheet highlights some of the things families of veterans with disabilities should keep in mind as the veteran re-enters the workforce. It discusses the benefits of work, use of the Family and

Medical Leave Act, if and when a job applicant should disclose a disability, requesting workplace accommodations, and how working may affect disability payments.

Erickson, W., & Rudstam, H. (2013). **Employment of veterans with service-connected disabilities.**

NARIC Accession Number: O18877

Project Number: H133A060088; H133A110020

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=121572>.

ABSTRACT: Fact sheet provides information and key statistics on the employment rate of civilian veterans with disabilities and service-connected disabilities in the workplace.

Sims, M. (Ed.). (2013). **Rocky mountain access, October 2013.**

NARIC Accession Number: O19428

Project Number: H133A110018

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=124438>.

ABSTRACT: This online newsletter provides information to assist individuals covered by the Americans with Disabilities Act (ADA) in the Rocky Mountain region that includes Wyoming, Utah, Montana, North Dakota, South Dakota, and Colorado. Topics in this issue include: (1) October is National Disability Employment Awareness Month; (2) the 2014 National ADA Symposium; (3) training sessions cancelled due to shutdown of the federal government; (4) Air Travel Accessibility Conference; (5) landmark agreement will dramatically improve access to movies; (6) the Citizens' Police Academy for the deaf and hard of hearing communities; (7) webcast on interacting with individuals with disabilities in law enforcement; (8) emergency management and the ADA webpage; (9) Equal Employment Opportunity Commission sues Kmart for disability discrimination; (10) the 50+ workforce; (11) final rules for hiring and employment of veterans and people with disabilities; (12) new public service announcement challenges traditional views of disability; (13) current disability employment statistics; (14) Department of Justice announces an agreement with the South Carolina Department of Corrections to integrate inmates with HIV into the general population; (15) United States Access Board issues final guidelines for federal outdoor recreation sites; and (16) ADA Live!, a free monthly radio show broadcast on the Internet.

2012

Barnett, S.D., Ciper, D.J., Dixon, T.M., Goetz, L.L., Holmes, S.A., Kerrigan, A.J., Lind, L.M., McGeough, C., Ottomanelli, L., Sinnott, P.L., Suris, A., Thomas, F.P., & Toscano, R. (2012). **Effectiveness of supported employment for veterans with spinal cord injuries: Results from a randomized multisite study.** *Archives of Physical Medicine and Rehabilitation*, 93(5), 740-747. NARIC Accession Number: J63603

ABSTRACT: Study examined whether supported employment (SE) is more effective than treatment as usual (TAU) in returning veterans to competitive employment after spinal cord injury (SCI). A total of 201 subjects completed baseline and quarterly follow-up interviews for 12 months. In interventional sites, subjects were randomly assigned to the SE condition or the TAU condition, treatment as usual—interventional site (TAU-IS). In observational sites where the SE program was not available, subjects were enrolled in a nonrandomized TAU condition, treatment as usual—observational site (TAU-OS). Subjects in the SE condition received a vocational rehabilitation program which adhered as closely as possible to principles developed and described in the individual placement and support model of SE for people with mental illness. The primary study outcome measurement was competitive employment in the community. Results indicated that subjects in the SE group were 2.5 times more likely than the TAU-IS group and 11.4 times more likely than the TAU-OS group to obtain competitive employment. The findings suggest that SE, a well-prescribed method of integrated vocational care, was superior to usual practices in improving employment outcomes for veterans with SCI.

Cook, L-W., Gower, W.S., & Rudstam, H. (2012). **Beyond yellow ribbons: Are employers prepared to hire, accommodate, and retain returning veterans with disabilities?.** *Journal of Vocational Rehabilitation*, 36(2), 87-95.

NARIC Accession Number: J63915

Project Number: H133A060088; H133A110020

ABSTRACT: Study examined employers' readiness to recruit, hire, retain and accommodate veterans with disabilities (VWDs), with an emphasis on the disabilities of posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI). A survey of 1,083 human resource professionals examined employer readiness in three

areas: knowledge, beliefs/willingness and actions/practices. Overall, employers surveyed did have willingness to employ VWDs and saw some benefits in doing so. Yet, they had key knowledge gaps around accommodating workers with PTSD and TBI and around disclosure issues. In the area of respondent willingness to employ VWDs, findings indicated most employers believed VWDs would benefit their organizations and would perform as well as other workers. Yet, they believed employing VWDs would involve more costs and more of a manager's time and were largely unsure if workers with PTSD were more likely than others to be violent in the workplace. Respondents' actions/practices indicated that the majority were not using recruitment or other resources specific to VWDs and had little experience in accommodating workers with PTSD and TBI. Implications of these findings are discussed in terms of research and application to impact employer knowledge, willingness, and practices regarding employing VWDs.

Davis, L.L., Drake, R.E., Drebing, C.E., Kashner, T.M., Leon, A.C., Parker, P.E., Toscano, R., & Ward, L.C. (2012). **A randomized controlled trial of supported employment among veterans with posttraumatic stress disorder.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 63(5), 464-470.

NARIC Accession Number: J63833

ABSTRACT: Study examined the outcome of evidence-based supported employment for veterans with posttraumatic stress disorder (PTSD). Eighty-five unemployed veterans with PTSD were randomly assigned to either individual placement and support (IPS) supported employment or a Veterans Health Administration Vocational Rehabilitation Program (VRP) treatment as usual. Employment rates and occupational outcomes were followed for 12 months. Over the 12-month period, 76 percent of the IPS participants gained competitive employment, compared with 28 percent of the VRP participants. Veterans assigned to IPS also worked substantially more weeks than those assigned to VRP (42 percent versus 16 percent of the eligible weeks, respectively) and earned higher income (mean income of \$9,264 for IPS versus \$2,601 for VRP). This study showed that veterans with PTSD who received IPS were 2.7 times more likely to gain competitive employment than those who received VRP. Because work is central to recovery, these results should assist stakeholders in planning improved services for veterans with PTSD.

Lunney, C.A., & Schnurr, P.P. (2012). **Work-related outcomes among female veterans and service members after treatment of posttraumatic stress disorder.**

Psychiatric Services (formerly Hospital and Community Psychiatry), 63(11), 1072-1079.

NARIC Accession Number: J65244

ABSTRACT: Study examined the effect of treatment for posttraumatic stress disorder (PTSD) on work-related quality-of-life (QOL) outcomes and the relationship between clinically significant change during treatment and work-related outcomes. Additional analyses explored whether current depression and employment status moderated the effects of treatment and clinically significant change. A total of 218 female veterans and soldiers with current PTSD were randomly assigned to receive ten weekly sessions of prolonged exposure or present-centered therapy and were assessed before and after treatment and at three- and six-month follow-ups. Outcomes were clinician-rated and self-rated occupational impairment and self-rated satisfaction with work. Both treatment groups had improvements in occupational impairment, and the degree of improvement by the two groups was similar. There was no pre- to post-treatment change in work satisfaction. At the end of treatment, participants who no longer met diagnostic criteria for PTSD (loss of diagnosis) had greater improvements in all domains of work-related QOL than participants who still had PTSD. The improvement in occupational impairment associated with loss of diagnosis suggests the importance of continuing treatment until clinically meaningful change has been attained.

2011

(2011). **Ten tips for employers: Tapping into the talents of veterans with disabilities.**

NARIC Accession Number: O18484

Project Number: H133A060088

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=118536>.

ABSTRACT: Article presents ten points human resources professionals can use to consider their readiness to employ veterans with disabilities. These ten points are based on research at Cornell University about barriers faced by veterans with disabilities in the workplace.

(2011). **Ten tips: Supporting a veteran family member returning to work.**

NARIC Accession Number: O18482

Project Number: H133A060088

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=118534>.

ABSTRACT: This fact sheet highlights some of the things families of veterans with disabilities should keep in mind as the veteran re-enters the workforce. It discusses if and when a job applicant should disclose a disability, how to request workplace accommodations, and how work may affect disability payments.

(2011). **You have a lot to offer: Ten points for veterans to consider when returning to work with a disability.**

NARIC Accession Number: O18481

Project Number: H133A060088

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=118533>.

Abstract: This fact sheet highlights some of the things veterans should keep in mind as they re-enter the workforce. It discusses if and when to tell an employer about their disability, requesting workplace accommodations, and how work may affect disability payments.

Barrett, D., Chang, H., Ingram, E., Klaus, J., Lerner, D., Mavandadi, S., Oslin, D.W., Possemato, K., Tew, J.D., & Zadler, D.A. (2011). **Psychiatric status and work performance of veterans of operations enduring freedom and Iraqi freedom.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(1), 39-46.

NARIC Accession Number: J60882

ABSTRACT: Study investigated the relationship between psychiatric diagnosis and impaired work functioning among American service members returning from Operation Iraqi Freedom and Operation Enduring Freedom (OEF-OIF). Participants were 797 OEF-OIF veterans, of whom 473 were employed. They were referred for further psychiatric assessment by primary care providers at six Veterans Affairs medical centers and underwent a behavioral health interview that assessed psychiatric and health status and work impairment as measured by the Work Limitations Questionnaire (WLQ). The four WLQ subscales (mental-interpersonal demands, time management, output, and physical demands) and an aggregated measure of productivity loss were considered in the analysis. Associations between patient characteristics, psychiatric status, and work impairments were investigated with regression models. Results indicated that major depressive disorder, posttraumatic stress disorder, and generalized anxiety or panic disorder were significantly associated with impairments in mental-interpersonal demands, time

management, and output. Alcohol dependence and illicit drug use were associated with impairments in output and physical demands. On average, these productivity losses were four times those found in a previous study of nonveteran employees with no psychiatric disorders. Conclusions: Veterans' ability to maintain gainful employment is a major component of successful reintegration into civilian life, and psychiatric disorders have a negative impact on work performance. This study demonstrated that multiple dimensions of job performance are impaired by psychiatric illness among OEF-OIF veterans. Delivery of empirically supported interventions to treat psychiatric disorders and development of care models focusing on work-specific interventions are needed to help veterans return to civilian life.

Blanck, P. (2011). **Disability and diversity: Historical and contemporary influences.** In Michele Paludi (Ed.), *Managing Diversity in Today's Workplace.*

NARIC Accession Number: J65581

Project Number: H133A060033

ABSTRACT: This chapter proposes that many of the seeds of contemporary ideas about disability, diversity, and employment policy may be traced to the legacy of the American Civil War and its expansive disability pension scheme. It provides an overview of the pension scheme, discusses research conducted on pension laws and veterans with disabilities, and examines the implications of this study for attitudes and policy toward persons with disabilities, with emphasis on the disabled in workplaces.

Boutin, D.L. (2011). **Effective vocational rehabilitation services for military veterans.** *Journal of Applied Rehabilitation Counseling (JARC)*, 42(2), 24-32.

NARIC Accession Number: J61268

ABSTRACT: Study identified vocational rehabilitation (VR) services related to competitive employment for 2 groups of consumers: veterans who received college and university training and veterans who did not receive such training. Data were obtained from the 2008 Rehabilitation Services Administration 911 database for 20,376 participants identified as veterans eligible for the state VR program. A hierarchical logistic regression was used to analyze the data. Only two services related to employment for veterans who received college training status: job search assistance and job placement assistance. A total of eight services were found related to employment for veterans who did not receive college training: (1) diagnosis and treatment of impairments, (2) VR coun-

seling and guidance, (3) job placement assistance, (4) on-the-job support, (5) maintenance, (6) rehabilitation technology, (7) miscellaneous training, and (8) other services. No VR service had a negative relationship with the outcome. Implications of the findings and recommendations for rehabilitation counseling professionals working with veterans with disabilities are discussed.

Bohnert, A.S.B., Ilgen, M.A., Kilbourne, A.M., Mezuk, B., Miller, E.M., Ratliff, S., Valenstein, M., Welsh, D., & Zivin, K. (2011). **Employment status of patients in the VA health system: Implications for mental health services.** *Psychiatric Services (formerly Hospital and Community Psychiatry)*, 62(1), 35-38.

NARIC Accession Number: J60881

ABSTRACT: Study evaluated the association between mental disorders and employment status among veterans who received Department of Veterans Affairs' health care services. Multinomial logistic regression analyses modeled the relationship between mental disorders and employment among patients aged 18 to 64 who completed the 2005 Survey of Healthcare Experiences of Patients. Of the 98,867 patients who met eligibility criteria, 36 percent were disabled, 35 percent were employed, 20 percent were retired, and 7 percent were unemployed. Those with bipolar disorder, depression, posttraumatic stress disorder, schizophrenia, or a substance use disorder were more likely to be unemployed, disabled, or retired than employed. This study confirmed a negative relationship among veterans between having a mental disorder and being employed. The implications of the findings research and rehabilitation practice are discussed.

Boutin, D.L. (2011). **A study of occupational differences between veterans vs. non-veterans with disabilities post-state vocational rehabilitation services.** *Journal of Applied Rehabilitation Counseling (JARC)*, 42(2), 50-56.

NARIC Accession Number: J61271

ABSTRACT: Study examined differences in employment outcomes between veteran and non-veteran consumers of vocational rehabilitation (VR) services. Data were obtained from the Rehabilitation Services Administration 911 database for fiscal year 2008. The cases were split into 2 samples: 7,830 consumers with veteran status and 7,830 non-veteran consumers. A chi square analysis of veteran status and occupational category was conducted. Results indicated that military veterans with disabilities leaving the state VR program

during 2008 were more proportionally represented in management, professional, natural resources, construction, maintenance, production, transportation, and material moving occupations and less represented in services jobs as well as sales and office occupations.

Burker, E.J., & Salisbury, A.G. (2011). **Assessment, treatment, and vocational implications of combat related PTSD in veterans.** *Journal of Applied Rehabilitation Counseling (JARC)*, 42(2), 42-49.

NARIC Accession Number: J61270

ABSTRACT: Article examines the assessment, treatment, and vocational implications of combat-related posttraumatic stress disorder (PTSD) among veterans from the wars in Iraq and Afghanistan. The symptoms of PTSD are described, common assessment measures are presented, and treatment modalities are discussed. Suggestions are made to help vocational rehabilitation counselors to work within multidisciplinary teams to treat veterans with PTSD and to better accommodate veterans' re-adjustment to non-combatant life.

Cater, J.K., Leach, J. (2011). **Veterans, military sexual trauma and PTSD: Rehabilitation planning implications.** *Journal of Applied Rehabilitation Counseling (JARC)*, 42(2), 33-41.

NARIC Accession Number: J61269

ABSTRACT: Article examines military sexual trauma (MST) and its potential effects on vocational rehabilitation. Discussion includes: (1) a brief overview of MST; (2) how MST affects female veterans; (3) how MST affects male veterans; (4) the relationship among MST, posttraumatic stress disorder (PTSD), and other mental health problems; (5) MST and its effect on quality of life; (6) current effective MST therapeutic treatments; and (7) rehabilitation considerations.

Cheng, A., Goetz, L.L., Ottomanelli, L., Sinnott, P.L., & Wagner, T.H. (2011). **Cost-effectiveness analysis of the spinal cord injury vocational integration program (SCI-VIP).** *Topics in Spinal Cord Injury Rehabilitation*, 16(4), 80-88.

NARIC Accession Number: J61422

ABSTRACT: This article provides a review of the background on economic analyses in health care and a description of the methods for the cost-effectiveness analysis of the Spinal Cord Injury Vocational Integration Program (SCI-VIP) intervention. The SCI-VIP is a 5-year multisite randomized clinical trial to test for differences in employment and rehabilitation outcomes in veterans with spinal cord injury, including a cost-effectiveness analysis.

Cipher, D.J., Goetz, L.L., Ottomanelli, L., & Sippel, J.L. (2011). **Factors associated with employment among veterans with spinal cord injury.** *Journal of Vocational Rehabilitation*, 34(3), 141-150.

NARIC Accession Number: J62433

ABSTRACT: Study investigated predictors of a veteran's ability to obtain competitive employment after a spinal cord injury (SCI). This study retrospectively examined return to work after SCI, types of jobs held, and variables that were associated with return to work. Participants included 238 veterans receiving healthcare at one of several Veteran Affairs Medical Centers. Data were obtained through subject interviews and chart extraction. Subjects were also administered the Veterans RAND 36-Item Health Survey (VR-36), Quick Inventory for Depressive Symptomatology–Self Report (QIDS-SR), and Craig Handicap Assessment Reporting Technique (CHART). Results revealed that 34.5 percent of participants were employed at some point after SCI. Employed subjects had significantly higher scores on two of the CHART subscales (Mobility and Occupation) than unemployed subjects, but there were no significant differences among subjects on the QIDS or the VR-36. Receipt of Social Security benefits was a significant disincentive for employment, but receipt of veteran's disability benefits was not. Education, gender, ethnicity, level and severity of injury were not significant predictors of employment status after SCI, after controlling for demographic variables. Clinical implications of these findings may be that vocational rehabilitation interventions that focus on rapid re-entry to the workforce using existing skill sets may maximize post-SCI employment.

Drake, R., Drebing, C.E., Mueller, L., O'Connor, M.K., Penk, W., Rosenheck, R., Semiatin, A., & Van Ormer, A. (2011). **Cognitive impairment as barrier to engagement in vocational services among veterans with severe mental illness.** *Journal of Rehabilitation Research and Development (JRRD) (formerly the Bulletin of Prosthetics Research)*, 48(5), 597-608.

NARIC Accession Number: J61680

ABSTRACT: Study investigated whether impaired cognitive functioning is a barrier to entry into vocational services (VS) in a sample of veterans with severe mental illness (SMI). It specifically examined the contribution of cognitive impairment to the time it takes veterans to progress through the following VS stages: (1) recognition of a vocational problem, (2) initiation of help-seeking behavior, and (3) participa-

tion in treatment. Participants were 179 veterans with both SMI and un- or under-employment who completed a work history, the Pathways To Care Inventory, and the Trail-Making Test, Part B. Analysis revealed that veterans with SMI and moderate to severe cognitive impairment took significantly longer to progress through pathways-to-care than those with SMI and mild or no cognitive impairment. These results suggest that identifying veterans with SMI and cognitive impairment early and providing them with integrated and adjunct services may help them navigate VS.

Garcia-Rea, E.A., Johnson, K.E., LePage, J.P., Lewis, A.A., & Washington, E.L. (2011). **Effects of structured vocational services on job-search success in ex-offender veterans with mental illness: 3-month follow-up.** *Journal of Rehabilitation Research and Development (JRRD) (formerly the Bulletin of Prosthetics Research)*, 48(3), 277-286.

NARIC Accession Number: J60962

ABSTRACT: Study compared the effectiveness of three methods of assisting ex-offender veterans with mental illness and substance dependence find employment upon returning to the community. Sixty-nine veterans were followed to determine the number finding employment within 3 months after enrollment in the study. Three conditions were evaluated: (1) basic vocational services, (2) self-study of a vocational manual designed for formerly incarcerated veterans, and (3) a group led by vocational staff using the vocational manual. The group format was expected to be superior to self-study, and self-study was expected to be superior to basic services. Though the group format was found to be superior to both self-study and basic services, the results for self-study and basic services were statistically similar. Limitations and directions for future refinement are discussed.

Satcher, J. (Ed.). (2011). **Special issue: Veterans with disabilities.** *Journal of Applied Rehabilitation Counseling (JARC)*, 42(2), 1-64.

NARIC Accession Number: R09114

ABSTRACT: This special journal issue contains 6 articles covering a wide range of topics that may impact veterans with disabilities. Each article provides information important to rehabilitation counselor working with veterans and their support system. Topics include: the Department of Veteran Benefits' Vocational rehabilitation and Employment Independent Living Program; returning veterans' adjustment concerns: family views; effective vocational rehabilitation services for military

services; veterans, military sexual trauma, and posttraumatic stress disorder (PTSD): rehabilitation planning implications; assessment, treatment, and vocational implications of combat related PTSD in veterans; and a study of occupational difference between veterans versus non-veterans with disabilities post-state vocational rehabilitation services. Individual articles are available for document delivery under accession numbers J61266 through J61271.

2010

(2010). **HR strategies workbook: Including veterans with disabilities in your workforce.**

NARIC Accession Number: O18483

Project Number: H133A060088

Available in full-text at: <http://search.naric.com/research/rehab/download.cfm?ID=118535>.

ABSTRACT: Workbook presents a quick assessment employers can use to consider the readiness of their business/organization to include veterans with disabilities in the workplace. Five actual cases of veterans with disabilities in the workplace are presented for human resources (HR) professionals to consider what strategies need to be utilized to address the barriers face by each veteran. This handout also contains a list of resources for business or employers on hiring, accommodating and retaining qualified veterans with disabilities.

Anthony, W.A., Gill, K.J. (Eds.). (2010). **Special issue on psychosocial rehabilitation and recovery in the VA.** *Psychiatric Rehabilitation Journal (formerly Psychosocial Rehabilitation Journal)*, 33(4), 255-336.

NARIC Accession Number: R09069

ABSTRACT: Articles in this journal issue focus on efforts to promote psychosocial rehabilitation and recovery in the United States Department of Veterans Affairs (VA). Topics include: a veteran's perspective on recovery, predictors of attendance in mental health mutual support, using organizational change strategies to guide peer support technician implementation in the VA, a proof of concept trial of an online psychoeducational program for relatives of both veterans and civilians living with schizophrenia, transition to low intensity case management in a VA assertive community treatment model program, VA transitional work experience vs. job placement in veterans with co-morbid substance use and non-psychotic psychiatric disorders, national dissemination of supported housing in the VA, the four-year impact of a VA fellowship program on the recovery orientation of rehabilitation programs, learning objective, and book reviews.

2009

Bradshaw, L.D., Ciper, D.J., Ottomanelli, L. (2009). **Employment and vocational rehabilitation services use among veterans with spinal cord injury.** *Journal of Vocational Rehabilitation, 31*(1), 39-43.

NARIC Accession Number: J57950

ABSTRACT: Study investigated patterns of return to work and use of vocational rehabilitation (VR) services among veterans with spinal cord injury (SCI). Thirty veterans receiving healthcare at a Veteran Affairs (VA) SCI center in Dallas, Texas were surveyed. Results indicated that 30 percent of participants had a history of employment after SCI, a rate that is comparable to figures reported in prior studies of employment rates among non-veterans with SCI. Only 20 percent of the veterans reported being aware of vocational services either within or outside of the VA, and awareness of services was significantly lower for veterans with tetraplegia compared to those with paraplegia. Of those who were aware of vocational services, only a small minority actually used them. The findings emphasize the need to educate veterans, especially those with more severe injuries, about VR services as a possible means of improving employment outcomes in this special population.

Myhill, W.N., & Shaheen, G. (2009). **Entrepreneurship for veterans with disabilities: Lessons learned from the field.** *inBrief, October 2009.*

NARIC Accession Number: O17679

Available in full-text at: http://www.dol.gov/odep/documents/NTAR_Issue_Brief_1_Veterans.pdf.

ABSTRACT: This brief examines entrepreneurship as a viable career option for veterans with disabilities, particularly those returning from the present-day conflicts in the Middle East. As entrepreneurs, veterans have an array of opportunities to customize their employment, accommodate their challenges, maximize their strengths and skills, and achieve their financial and career goals. This brief takes a close look at one program, the Entrepreneurship Boot Camp, and discusses some lessons learned from the operation of this program.

2008

(2008). **ADA and IT in focus, Spring/Summer 2008, 13**(2), 1-8.

NARIC Accession Number: O17400

Project Number: H133A060085

Available in full-text at: <http://search.naric.com/re->

search/rehab/download.cfm?ID=108660.

ABSTRACT: Newsletter provides information related to the Americans with Disabilities Act (ADA) and accessible information technology (IT). In this issue: (1) access to health care, (2) training events, (3) assistive technology in the workplace, (4) ADA rulings, (5) emergency preparedness and people with developmental disabilities, (6) employment of veterans, (7) guidance for parks, (8) universal design in parks, (9) new disability office, (10) housing modifications, and (11) online resources.

Resnick, S.G., & Rosenheck, R.A. (2008). **Posttraumatic stress disorder and employment in veterans participating in veterans health administration compensated work therapy.** *Journal of Rehabilitation Research and Development (JRRD) (formerly the Bulletin of Prosthetics Research), 45*(3), 427-436.

NARIC Accession Number: J55389

ABSTRACT: Study examined employment outcomes in individuals with a primary diagnosis of posttraumatic stress disorder (PTSD). Multivariate modeling was used to examine the relationship between PTSD, other aspects of military service, and employment among 5,862 veterans in a national Department of Veterans Affairs vocational rehabilitation program. Results showed that, after controlling for potentially confounding variables, veterans with PTSD were 19 percent less likely to be employed at discharge. Individuals with substance use diagnoses or who were homeless at program entry were more likely to be employed at discharge, while receipt of public support income and severe mental illness decreased the likelihood of being competitively employed.

2005

Bricout, J., Crockatt, S., Dye, A., Ericksen, J., Targett, P., Wehman, P., & West, M. (2005). **Telework and disability: A literature review and implications for workers compensation clients and disabled veterans.**

NARIC Accession Number: O17469

Project Number: H133B040011

ABSTRACT: This literature review explores the extent to which current telecommuting positions are held by people with disabilities and employer attitudes about hiring people with disabilities, including veterans. Discussion includes an overview of telework, including the characteristics of telecommuters and barriers to successful telework; employees with disabilities and telework; and employment issues and barriers for workers compensation clients and veterans with disabilities.

Head, L. (2005). **Veterans with disabilities: New implications for social research and policy evaluation.** In D. Anson (Ed.), *Proceedings of the RESNA 28th Annual Conference*. Arlington, VA: RESNA Press. NARIC Accession Number: O16154

Project Number: H133E020720

ABSTRACT: Paper focuses on research and policy evaluation on veterans with disabilities. The military conflicts in Iraq and Afghanistan have left over 10,000 American troops wounded. These young soldiers, who are 19 years old on average, will return to a society with technologies and legislation to reintegrate them into the workforce. They will likely face the same barriers to employment faced by millions of people with disabilities. Policymakers and rehabilitation professionals can study this population in order to evaluate the effectiveness of rehabilitation efforts, workplace accommodations, and other disability policies, and can make improvements that could enhance the lives of millions of Americans with disabilities. This paper was presented at the 2005 annual conference of RESNA, the Rehabilitation Engineering and Assistive Technology Society of North America and is available on CD-ROM.

2004

Boninger, M.L., Cooper, R., Cooper, R.A., Fitzgerald, S.G., & Kellerher, A. (2004). **Preliminary assessment of a prototype advanced mobility device in the work environment of veterans with spinal cord injury.** *NeuroRehabilitation*, 19(2), 161-170.

NARIC Accession Number: J50057

Project Number: H133N000019

ABSTRACT: Based on observations by trained clinicians and responses to a survey completed by subjects with spinal cord injury (SCI), this study assessed the potential for the Independence 3000 IBOT Transporter (IBOT) to improve employment satisfaction for veterans who use wheelchairs at work. The IBOT is an electronically stabilizing, wheeled mobility device for people with disabilities. It operates in 4 functions: standard, balance, 4-wheel, and remote. Four men with SCI used the devices to hold eye-level discussions with colleagues, climb stairs, ascend steep ramps, and negotiate curbs. The participants rates the ease of use and function of the IBOT favorably. Half of the users felt that the IBOT would help them at work and all thought it should be made available to veterans who use wheelchairs. A larger study is recommended to determine if the IBOT affects

work performance and the ability to return to work.

Boyd, C., Drebing, C.E., Krebs, C., Losardo, M., Penk, W., Rosencheck, R., Schutt, R.K., & Van Ormer, E.A. (2004). **Client goals for participating in VHA vocational rehabilitation: Distribution and relationship to outcome.** *Rehabilitation Counseling Bulletin (ARCA)*, 47(3), 162-172.

NARIC Accession Number: J47527

ABSTRACT: Study describes the relationship between the self-reported goals expressed by applicants to a vocational rehabilitation (VR) program sponsored by the Veteran Health Administration (VHA) and participant outcomes. Analysis revealed a wide variety of participation goals, including practical goals such as earning money or obtaining housing, and clinical goals such as maintaining sobriety and working while remaining in treatment. Factor analysis reduced these goals to four summary scales: (1) substance use disorder recovery, (2) supportive work setting, (3) competitive employment, and (4) temporary work. Competitive employment was a goal for only 53 percent of participants and was the primary goal for only 5 percent. Implications for research and practice are discussed.

2003

Brown, J.A., & Bruyere, S.M. (2003). **Legislation affecting employment for persons with disabilities.** In E. M. Szymanski, R. M. Parker (Eds.), *Work and Disability: Issues and Strategies in Career Development and Job Placement*. Austin, TX: Pro-Ed, Inc, 27-52.

NARIC Accession Number: J49733

Project Number: H133A970005; H133B040013

ABSTRACT: Chapter provides an overview of key pieces of legislation that impact the delivery of rehabilitation and other employment services for people with disabilities. The laws discussed include the Rehabilitation Act of 1973 as amended, the Americans with Disabilities Act of 1990, the Ticket to Work and Work Incentives Improvement Act of 1999, veterans rehabilitation legislation, and the Workforce Investment Act of 1998. Laws that affect and govern workplace practices are also discussed, such as the Family and Medical Leave Act of 1993, short-term disability laws, state workers' compensation laws, the Occupational Safety and Health Act of 1970, and the National Labor Relations Act.

2000

Boeringa, J.A., Kaough, J.E., Kerrigan, A.J., Monga, T.N., Wilson, B.L., & Wilson, J.V. (2000). **Vocational rehabilitation outcomes of veterans with substance use disorders in a partial hospitalization program.** *Psychiatric Services, 51*(12), 1570-1572.

NARIC Accession Number: J41007

ABSTRACT: Study examining factors affecting the employment rates of 529 veterans with severe alcohol and other substance use disorders who were treated at a partial hospitalization substance abuse treatment program. It was found that the employment rate was significantly higher for veterans who completed the hospitalization program, participated in a Veterans Industries work-for-pay program, and received drug-free supportive housing.

1998

Kelley, S.D., Simon, S.E. (1998). **Service characteristics explaining overall satisfaction of U.S. Department of Veterans Affairs vocational rehabilitation participants.** *Journal of Rehabilitation Outcomes Measurement, 2*(2), 31-39.

NARIC Accession Number: J35139

ABSTRACT: Article about the relationship between perceived service characteristics and overall satisfaction among veterans receiving U.S. Department of Veterans Affairs (DVA) vocational rehabilitation services. It was found that 6 characteristics accounted for 67 percent of the variance in overall satisfaction in the initial evaluation phase, and 5 characteristics that accounted for 74 percent of the variance in overall satisfaction in the rehabilitation services phase. Service characteristics that best explained satisfaction were different for the two phases of the vocational rehabilitation process.

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There is a charge of 5 cents for copying and shipping with a \$5 minimum on all orders.



Documents from the Education Resource Information Center (ERIC) search at www.eric.ed.gov are listed below:

2014

Osborne, L.K. (2014). **Using a cognitive information processing approach to group career counseling with visually impaired veterans.** *Professional Counselor, 4*(2), 150-158.

ERIC Number: EJ1063196

Available in full-text at: <http://files.eric.ed.gov/fulltext/EJ1063196.pdf>.

ABSTRACT: Unemployment continues to be a growing concern among both civilian and veteran populations. As 14 percent of the veteran population currently identify as disabled because of service, this population's need for specialized vocational rehabilitation is increasing. Specifically in Veterans Affairs (VA) Blind Rehabilitation Centers (BRC) where holistic treatment is used in treatment and rehabilitation, career services may be useful in improving quality of life for visually impaired veterans. A group approach to career counseling with visually impaired veterans is discussed using the principles and theory of the cognitive information processing (CIP) approach. This approach emphasizes metacognitions, self-knowledge, occupations knowledge, and the use of a decision-making cycle to improve career decision states and decrease negative career thinking. A group outline is provided and discussion of special considerations and limitations are included.

2013

Bishop, M., Frain, M., Sanchez, J., Tansey, T., & Wijn-gaarde, F. (2013). **Current knowledge and training needs of certified rehabilitation counselors to work effectively with veterans with disabilities.** *Rehabilitation Research, Policy, and Education, 27*(1), 2-17.

ERIC Number: EJ1018467

ABSTRACT: Veterans with disabilities have gained national attention in recent years because of the wars in Iraq and Afghanistan. This study examined certified rehabilitation counselors' (CRCs) knowledge and preparation for working with veterans with disabilities on their rehabilitation. Results indicate that CRCs report low levels of preparation in some of the areas deemed important by veterans and professionals. However, CRCs report high knowledge in many important areas to work effectively with veterans with disabilities.

2011

Johnson, J.E., Moore, C.L., & Washington, A.L. (Eds). (2011). *Improving vocational rehabilitation access and return to work and career outcomes among African American wounded warriors, Gulf War, and Vietnam War era veterans with disabilities: A white paper series.*

ERIC Number: ED516923

Available in full-text at: <http://files.eric.ed.gov/fulltext/ED516923.pdf>.

ABSTRACT: The purpose of this monograph is to present documents that discuss issues related to improving access to vocational rehabilitation services and return to work rates of African American Wounded Warriors, Gulf War and Vietnam War Era veterans with disabilities. This monograph also includes a review of relevant literature on barriers to employment for African American Veterans. The seven documents in this monograph on the rehabilitation of African American Wounded Warriors, Gulf War, and Vietnam War Era veterans with disabilities include a preface and two sections organized into: (1) general documents and (2) "white papers." The two general documents are: "The National Association for Black Veterans (NABVETS): A Brief History and the Mission" (Reverend James Greenwood); and "Veterans Stateside Readjustment Services Available to Wounded Warriors" (Captain Francine Tryon). The four "White Papers" are: "The Role of State VR Agencies in Assisting African American Wounded Warriors, Gulf War and Vietnam War Era Veterans with Disabilities to Obtain Competitive Jobs" (Dr. Michael D. O'Brien); "Improving Vocational Rehabilitation Access and Employment Success for African American Homeless Veterans with Disabilities" (Dr. Sonja Feist-Price & Ms. Neena Khanna); "African American Veterans, Post-Traumatic Stress Disorder (PTSD) and Employment" (Dr. Bobbie J. Atkins); and "Barriers to VR Service Access and Return to Work Outcomes among African American Veterans: The Need for Evidence-Based Research and Service Strategies" (Dr. Corey L. Moore, Dr. Jean Johnson and Ms. Nkechi Uchegbu). The authors advocate for the Veterans Administration (VA) and Federal funding entities to consider developing future national research and service initiatives to address barriers to vocational rehabilitation services and successful return to work outcomes among African American Wounded Warriors, Gulf War, and Vietnam War Era Veterans with disabilities.

2009

McMahon, B.T. (2009). **One veteran counselor's take on the future of rehabilitation counseling.** *Rehabilitation Counseling Bulletin*, 52(2), 120-123.

ERIC Number: EJ820928

ABSTRACT: One counselor argues that rehabilitation counseling has a bright future that will be better still if it recommits to vocational services, achieves organizational unity (not just coordination), remains true to its core values, and increases collaboration with cross-disability organizations.

Ruh, D., Spicer, P., & Vaughan, K. (2009). **Helping veterans with disabilities transition to employment.** *Journal of Postsecondary Education and Disability*, 22(1), 67-74.

ERIC Number: EJ844253

Available in full-text at: <http://files.eric.ed.gov/fulltext/EJ844253.pdf>.

ABSTRACT: Veterans with disabilities constitute a vast, capable, deserving, and under-utilized workforce, and many successful hiring campaigns have targeted the employment of veterans. Colleges offering comprehensive, individualized transitional services have proven successful in supporting veterans with disabilities reentering the civilian workforce. With the incorporation of learning models and reasonable academic adjustments to educational pedagogies and policies, veterans can be poised to successfully transition from college to the workforce. Disability Service (DS) offices can serve as an important bridge between the disability and career transition needs of these students. Specific suggestions are offered to increase collaboration with career offices to enhance the transition to employment.

2005

Drebing, C.E., Herz, L., Krebs, C., Penk, W., Rosenheck, R., Rounsaville, B., & Van Ormer, E.A. (2005). **The impact of enhanced incentives on vocational rehabilitation outcomes for dually diagnosed veterans.** *Journal of Applied Behavior Analysis*, 38(3), 359.

ERIC Number: EJ725227

Available in full-text at: <http://files.eric.ed.gov/fulltext/EJ725227.pdf>.

ABSTRACT: This study evaluated the efficacy of adding contingency management techniques to vocational rehabilitation (VR) to improve treatment outcome as measured by entry into competitive employment. Nine-

teen dually diagnosed veterans who entered VR in the Veterans' Administration's compensated work therapy (CWT) program were randomly assigned to CWT (n = 8) or to CWT with enhanced incentives (n = 11). Over the first 16 weeks of rehabilitation, those in the incentives condition could earn up to \$1,006 in cash for meeting two sets of clinical goals: (a) remaining abstinent from drugs and alcohol and (b) taking steps to obtain and maintain a competitive job. Results indicate that relative to participants in the CWT-only group, those in the incentives condition engaged in more job-search activities, were more likely to remain abstinent from drugs and alcohol, were more likely to obtain competitive employment, and earned an average of 68 percent more in wages. These results suggest that rehabilitation outcomes may be enhanced by restructuring traditional work-for-pay contingencies to include direct financial rewards for meeting clinical goals.

2001

Nilsen, S.R. (2001). *Veterans' employment and training service: Flexibility and accountability needed to improve service to veterans. Report to the Chairman, Subcommittee on Oversight and Investigations, Committee on Veterans' Affairs, House of Representatives.* ERIC Number: ED458399

Available in full-text at: <http://files.eric.ed.gov/fulltext/ED458399.pdf>.

ABSTRACT: A study reviewed the efficiency and effectiveness of the Department of Labor's (DOL's) Veterans' Employment and Training Service's (VETS's) administration of the Disabled Veterans' Outreach Program (DVOP) and Local Veterans' Employment Representative (LVER) program. While veterans received priority employment services at one-stop centers, VETS did not collect appropriate data for determining the effectiveness of these services, including subsequent job retention and wages. VETS's oversight of the DVOP and LVER grants was inadequate. The agency did not have a comprehensive system in place to manage state performance in serving veterans. VETS did not communicate a consistent message to states on expected performance, nor did it have meaningful incentives to encourage states to perform well. VETS's monitoring of the DVOP and LVER grants was excessive and had little effect on service. The DVOP and LVER programs did not always operate well within the one-stop center environment because states did not have the flexibility to design their services for veterans in a way that best meets the needs of employers and veterans. VETS had

not adequately adapted to the one-stop center environment. Matters for congressional consideration and recommendations for executive action were identified.

1996

(1996). *Vocational rehabilitation. VA continues to place few disabled veterans in jobs. Report to the Chairman, Subcommittee on Education, Training, Employment, and Housing, Committee on Veterans' Affairs, House of Representatives. General Accounting Office, Washington, DC. Health, Education, and Human Services Division.*

ERIC Number: ED400409

Available in full-text at: <http://files.eric.ed.gov/fulltext/ED400409.pdf>.

ABSTRACT: Since the 1940s, the Department of Veterans Affairs (VA) has provided training to veterans with service-connected disabilities to help improve their employability. A review of the program, legislation, regulations, and operating procedures and an analysis of program data and visits to regional offices and rehabilitation agencies in four locations were conducted to determine the success of the program in placing veterans in jobs, as mandated by 1980 legislation. Some of the results of the study were the following: (1) the program has rehabilitated about 8 percent of the approximately 74,000 veterans found eligible for vocational rehabilitation services over the last 5 years, whereas about 50 percent of the eligible veterans continued to receive program services; (2) the program continues to send veterans primarily to training and does not focus on employment services; (3) only about one in four veterans in the program has a serious employment handicap; (4) a review of 100 case files showed an average of \$20,000 spent on each veteran who gained employment and about \$10,000 on each program dropout; (5) more than half the total costs of rehabilitation services consisted of payments to veterans to cover their basic living expenses; (6) a comparison of state vocational rehabilitation programs over the last 5 years showed that state agencies rehabilitated 37 percent of the approximately 2.6 million individuals eligible for vocational rehabilitation program services, whereas about 31 percent continued to receive program services; (7) the state agencies provide a wide range of rehabilitative services and a majority of the program participants had severe disabilities; and (8) the state agencies spent, on average, about \$4,000 on each client who achieved employment and about \$2,000 on each client who dropped out of the program. The VA is currently trying to improve programs in order to increase the number of veterans who obtain suitable employment.

Quick, M. (1996). *Vocational rehabilitation within a V.A. medical center.*

ERIC Number: ED408519

Available in full-text at: <http://files.eric.ed.gov/fulltext/ED408519.pdf>.

ABSTRACT: Many military veterans struggle with substance abuse, homelessness, physical and emotional disabilities, disappointing work histories, and low income. A vocational rehabilitation program at a Veterans' Administration medical center, designed to help veterans with some of these struggles, is described here. Personnel work within the context of each individual's circumstances to instill a sense of hope and self-efficacy by helping them create a story about the future role of work in their lives. Veterans are provided four major services: career counseling, vocational testing and assessment, referral to other appropriate agencies, and case management and follow-up. The veterans in the program are predominantly male, ranging in age from early 20s to late 50s, and most have a high school diploma or equivalent degree. Over 40% are from ethnic minorities. They present a wide range of disabilities and diagnoses. Emphasis is placed on the past and present barriers to success in order to help each veteran create the most realistic plan possible. Work and career are viewed as existing in conjunction with family, friends, living arrangements, skills, personality, disabilities, likes, and dislikes. Vocational counselors try to address each of these concerns when counseling their clients.



Documents from the Cochrane Database of Systematic Reviews search at www.thecochranelibrary.org are listed below:

2014

Ablondi, K., Black, A.C., Martino, S., Mobo, B.H., Mueller, L., Rosen, M.I., Rosenheck, R.A., & Serowik, K.L. (2014). **Work outcomes after benefits counseling among veterans applying for service connection for a psychiatric condition.** *Psychiatric Services*, 65(12), 1426-32.

ID: CN-01037460

Available in full-text at: <http://ps.psychiatryonline.org/doi/pdf/10.1176/appi.ps.201300478>.

ABSTRACT: Objective: This study's objective was to determine the efficacy of benefits counseling in a clinical trial. There has been concern that disability payments for psychiatric disorders reduce incentives for employment and rehabilitation. Benefits counseling, with education about opportunities to work and the financial implications of work on receipt of disability benefits, may counter these disincentives. Methods: This single-blind, six-month randomized clinical trial enrolled 84 veterans who had applied for service-connected compensation for a psychiatric condition. Veterans were randomly assigned to either four sessions of benefits counseling or of a control condition involving orientation to the U.S. Department of Veterans Affairs health care system and services. Days of paid work and work-related activities were assessed at follow-up visits by using a timeline follow-back calendar. Results: Veterans assigned to benefits counseling worked for pay for significantly more days than did veterans in the control group (effect size=.69, $p<.05$), reflecting an average of three more days of paid employment during the 28 days preceding the six-month follow-up. Benefits counseling was associated with increased use of mental health services, but this correlation did not mediate the effect of benefits counseling on working. Conclusions: Barriers to employment associated with disability payments are remediable with basic counseling. More research is needed to understand the active ingredient of this counseling and to strengthen the intervention.

2013

Barnett, S.D., Goetz, L.L., & Ottomanelli L.A. (2013). **Multicenter trial of supported employment for veterans with spinal cord injury.** *Topics in Spinal Cord Injury Rehabilitation*, 19(1), 15.

ID: CN-01025097

ABSTRACT: Objective: Determine the effectiveness of evidence-based supported employment practices in improving employment outcomes among veterans with spinal cord injury (SCI). Design: A 5-year, randomized, multicenter trial of evidence-based supported employment (SE) for veterans with SCI. Participants/Methods: Veterans with SCI, age 18-65 years inclusive, who lived within 100 miles of the SCI center, were unemployed, and were interested in competitive employment in the community were eligible. The sample included 201 subjects, mean age 48.3 + 9.9 years, 95.5 percent male, 50.4 percent with paraplegia. Average years of education was 13.4 (SD 2.2), and duration of SCI was 12.4 (SD 11.2). Subjects were randomized to either an SE program or treatment as usual (TAU) for vocational issues. The essential features of the SE program included

integrated treatment, rapid job search, competitive employment focus, consumer choices, benefits counseling, community-based services, and ongoing support for job success. Follow-up data were collected up to 24 months. Results: Subjects randomized to receive the SE intervention were 2.4 times as likely to obtain employment ($P < .001$) versus subjects randomized to TAU. Conclusion: Veterans with SCI who received a supported employment intervention had significantly higher rates of employment versus treatment as usual. Supported employment is an approach to vocational rehabilitation that had not previously been tested in a population of persons with disabilities.

Davis, B., Glasgow, A., LePage, J.P., Lewis, A.A., & Washington, E.L. (2013). **Effects of structured vocational services in ex-offender veterans with mental illness: 6-month follow-up.** *Journal of Rehabilitation Research and Development*, 50(2), 183-92.

ID: CN-00985952

ABSTRACT: With more than 200,000 veterans incarcerated, a significant need exists for the development of technologies that help veterans with felony histories return to employment. This study evaluated the effect of three methods of vocational assistance on competitive employment over a 6 month follow-up period: (1) basic vocational services, (2) self-study using a vocational manual designed for formerly incarcerated veterans, and (3) a group led by vocational staff using the vocational manual. We evaluated 111 veterans for time to obtain and total time of competitive employment. The group format was expected to be superior to the self-study and the self-study superior to basic services. Findings indicated that the group format was associated with quicker employment and more total employment than the basic and self-study conditions. Limitations and directions for future refinement are discussed.

2012

Barnett, S.D., Ciper, D.J., Dixon, T.M., Goetz, L.L., Holmes, S.A., Kerrigan, A.J., Lind, L.M., McGeough, C., Ottomanelli, L., Sinnott, P.L., Suris, A., Thomas, F.P., & Toscano, R. (2012). **Effectiveness of supported employment for veterans with spinal cord injuries: Results from a randomized multisite study.** *Archives of Physical Medicine and Rehabilitation*, 93(5), 740-7.

ID: CN-00969643

ABSTRACT: OBJECTIVE: To examine whether supported employment (SE) is more effective than treatment as usual (TAU) in returning veterans to competitive employment after spinal cord injury (SCI). DESIGN: Prospective, randomized, controlled, multisite trial of

SE versus TAU for vocational issues with 12 months of follow-up data. SETTING: SCI centers in the Veterans Health Administration. PARTICIPANTS: Subjects ($N=201$) were enrolled and completed baseline interviews. In interventional sites, subjects were randomly assigned to the SE condition ($n=81$) or the TAU condition (treatment as usual-interventional site [TAU-IS], $n=76$). In observational sites where the SE program was not available, 44 subjects were enrolled in a nonrandomized TAU condition (treatment as usual-observational site [TAU-OS]). INTERVENTIONS: The intervention consisted of an SE vocational rehabilitation program called the Spinal Cord Injury Vocational Integration Program, which adhered as closely as possible to principles of SE as developed and described in the individual placement and support model of SE for persons with mental illness. MAIN OUTCOME MEASURES: The primary study outcome measurement was competitive employment in the community. RESULTS: Subjects in the SE group were 2.5 times more likely than the TAU-IS group and 11.4 times more likely than the TAU-OS group to obtain competitive employment. CONCLUSIONS: To the best of our knowledge, this is the first and only controlled study of a specific vocational rehabilitation program to report improved employment outcomes for persons with SCI. SE, a well-prescribed method of integrated vocational care, was superior to usual practices in improving employment outcomes for veterans with SCI.

Davis, L.L., Drake, R.E., Drebing, C.E., Kashner, T.M., Leon, A.C., Parker, P.E., Toscano, R., Ward, L.C. (2012). **A randomized controlled trial of supported employment among veterans with posttraumatic stress disorder.** *Psychiatric Services*, 63(5), 464-70.

ID: CN-00851905

Available in full-text at: <http://ps.psychiatryonline.org/doi/pdf/10.1176/appi.ps.201100340>.

ABSTRACT: OBJECTIVE: Posttraumatic stress disorder (PTSD) is a potentially disabling mental illness that can cause occupational dysfunction. Although vocational rehabilitation is often prescribed for patients with PTSD, standard vocational services are far from adequate in helping them obtain and maintain competitive employment. This study is the first to examine the outcome of evidence-based supported employment for veterans with PTSD. METHODS: Unemployed veterans with PTSD were randomly assigned to individual placement and support (IPS) supported employment ($N = 42$) or a Veterans Health Administration Vocational Rehabilitation Program (VRP) treatment as usual ($N = 43$). Employment rates and occupational outcomes were followed for 12 months. RESULTS: During the

12-month study, 76 percent of the IPS participants gained competitive employment, compared with 28 percent of the VRP participants (number needed to treat = 2.07; (2) = 19.84, $df = 1$, $p < .001$). Veterans assigned to IPS also worked substantially more weeks than those assigned to VRP (42 percent versus 16 percent of the eligible weeks, respectively; Mann-Whitney z test $p < .001$) and earned higher 12-month income (mean \pm SD income of \$9,264 \pm \$13,294 for IPS versus \$2,601 \pm \$6,009 for VRP; Mann-Whitney z test $p < .001$) during the 12-month period. **CONCLUSIONS:** Veterans with PTSD who received IPS were 2.7 times more likely to gain competitive employment than those who received VRP. Because work is central to recovery, these results should assist stakeholders in planning improved services for veterans with PTSD.

2011

Garcia-Rea, E.A., Johnson, K.E., Lepage, J.P., Lewis, A.A., & Washington, E.L. (2011). **Effects of structured vocational services on job-search success in ex-offender veterans with mental illness: 3-month follow-up.** *Journal of Rehabilitation Research and Development*, 48(3), 277-86.

ID: CN-00891359

Available in full-text at: <http://www.rehab.research.va.gov/jour/11/483/lepage.html>.

ABSTRACT: With the high number of incarcerated veterans with mental illness and substance dependence returning to the community annually, a significant need exists for technologies that will help them return to employment. This study evaluates three methods of assistance: (1) basic vocational services, (2) self-study of a vocational manual designed for formerly incarcerated veterans, and (3) a group led by vocational staff using the vocational manual. We evaluated 69 veterans to determine the number finding employment within 3 months after enrollment in the study. The group format was expected to be superior to self-study, and self-study was expected to be superior to basic services. Though the group format was found to be superior to both self-study and basic services, the results for self-study and basic services were statistically similar. Limitations and directions for future refinement are discussed.

2010

Drebing, C.E., Krebs, C., Mueller, L., Ormer, A., Penk, W., & Rosenheck, R.A. (2010). **Veterans Health Administration transitional work experience vs. job placement in veterans with co-morbid substance use and non-psychotic psychiatric disorders.** *Psychiatric*

Rehabilitation Journal, 33(4), 297-307.

ID: CN-00743372

ABSTRACT: OBJECTIVE: This study seeks to compare the effectiveness of Veterans Health Administration's (VHA) transitional work experience (TWE) services and a minimal but common intervention-job placement (JP) services, for veterans with co-morbid substance and psychiatric disorders. **METHODS:** We conducted a random clinical trial comparing work outcomes for 89 veterans with co-morbid psychiatric and substance use disorders (SUD) who were randomly assigned to participate in VHA TWE services with those assigned to simple JP services provided by state vocational rehabilitation professionals. Participants were enrolled at the time of application to VHA TWE services and then randomly assigned to the two treatment groups and followed for 12 months. **RESULTS:** VHA TWE participants were more likely to engage in paid activity, to work more total hours, to work more weeks and to earn more in total wages. The groups were not significantly different with respect to competitive employment, in terms of the percentage acquiring competitive jobs, the number of hours worked, or wages earned. **CONCLUSIONS:** These data suggest that the primary benefit of VHA TWE services is in rapidly engaging participants in paid activity and that these services are not effective at helping dually diagnosed veterans obtain competitive employment.

2009

Cipher, D.J., Goetz, L., McGeough, C., Ottomanelli, L., Sinnott, P., Sippel, J., Suris, A., & Wagner, T.H. (2009). **Methods of a multisite randomized clinical trial of supported employment among veterans with spinal cord injury.** *Journal of Rehabilitation Research and Development*, 46(7), 919-30.

ID: CN-00741884

ABSTRACT: This article compares the methods of a randomized multisite clinical trial of evidence-based supported employment with conventional vocational rehabilitation among veterans with spinal cord injury (SCI). The primary hypothesis is that, compared with conventional vocational rehabilitation (i.e., standard care), evidence-based supported employment will significantly improve competitive employment outcomes and general rehabilitation outcomes. The secondary hypothesis is that evidence-based supported employment in SCI will be more cost-effective than standard care. The current article describes the clinical trial and presents baseline data. The present sample includes 301 veterans with SCI, which includes paraplegia (50 percent), high tetraplegia (32 percent), and low tetraplegia (18 percent).

Baseline data indicate that 65 percent of this sample of employment-seeking veterans with SCI had never been employed post-injury, despite the fact that nearly half (41 percent) had received some type of prior vocational rehabilitation. These rates of unemployment for veterans with SCI are consistent with the rates reported for community samples of persons with SCI. Forthcoming outcome data will provide much needed insights into the best practices for helping these veterans restore vocational goals and improve overall quality of life.

2007

Altshuler, L., Bauer, M.S., Biswas, K., Evans, D., Kilbourne, A.M., Tang, D., & Tekell, J. (2007). **Executive function and employment status among veterans with bipolar disorder.** *Psychiatric Services, 58*(11), 1441-7. ID: CN-00620653

ABSTRACT: OBJECTIVE: This study assessed the relationship between neurocognitive function (measured by the Executive Interview [EXIT]) and occupational role function (measured by employment status) in a large cohort of Veterans Affairs patients with bipolar disorder. METHODS: A total of 213 patients in a national bipolar disorder intervention study (Department of Veterans Affairs Cooperative Study 430) were dichotomized into two groups--employed (N=91) and unemployed (N=122)--on the basis of responses to a semi-structured interview regarding past-year work history. Bivariate analysis was used to assess whether any participant characteristics and course-of-illness variables were significantly different between the employed and unemployed groups and thus could confound results. A stepwise logistic regression was then performed to investigate the association between neurocognitive function and employment status by using the significant demographic and course-of-illness variables as covariates. RESULTS: There were significant differences in EXIT scores between the employed and unemployed groups, with the unemployed group showing greater executive impairment. Lifetime psychiatric hospitalizations and number of psychotropic medications prescribed had significant associations with employment status. When these variables were entered into a regression analysis, employment status could still be explained by executive functioning. CONCLUSIONS: This study found that poor executive function may be associated with poor work adjustment (unemployment) among patients with bipolar disorder. The etiology of this relationship and the contributory role of the prior number of hospitalizations and number of psychotropic medications to executive function remain to be further evaluated.

Drebing, C.E., Hebert, M., Mueller, L., Ormer, E.A., Penk, W.E., Petry, N.M., Rosenheck, R., & Rounsaville, B. (2007). **Adding contingency management intervention to vocational rehabilitation: outcomes for dually diagnosed veterans.** *Journal of Rehabilitation Research and Development, 44*(6), 851-65. ID: CN-00687561

ABSTRACT: In this random-assignment trial, we evaluated the efficacy of using a contingency management (CM) intervention to enhance job acquisition and tenure among participants of a vocational rehabilitation (VR) program. The CM intervention offered participants cash incentives up to \$1,170 for completing tasks related to sobriety and job search and maintenance. Participants were 100 veterans with comorbid psychiatric disorders and substance dependence who were randomly assigned either to VR only or VR + CM. Relative to participants in the VR-only group, those in the VR + CM group showed more intense job searches and transitioned to competitive employment faster and at higher rates. No significant difference was found in job tenure, though this may be due to the limited follow-up period. Abstinence rates were significantly better in the VR + CM group during the first 16 weeks of follow-up but not significantly different in subsequent follow-ups. No relationship was found between relapse and employment. These results suggest that rehabilitation outcomes may be enhanced by adding CM to current programming or by restructuring traditional work-for-pay contingencies to include direct financial rewards for achievement of clinical goals.

1990

Pendorf, J.E. (1990). **Vocational rehabilitation for psychiatric inpatient Vietnam combat veterans.** *Military Medicine, 155*(8), 369-71. ID: CN-00713275

ABSTRACT: A Department of Veterans Affairs (DVA) inpatient psychiatry program treating Vietnam veterans for symptoms of posttraumatic stress disorder provided day and evening treatment programs. The evening program, besides treating psychiatric trauma, incorporated the DVA mission of assisting patients with vocational rehabilitation and work force reentry. Although initially opposed to employment, Vietnam veterans accepted a treatment program with an emphasis on working and job training. Both programs were compared using the Ward Atmosphere Scale (WAS). No significant differences between the two programs were found. The results support the DVA's position that employment is a valuable component of psychiatric treatment.



Documents from the National Library of Medicine PubMed search at www.pubmed.com are listed below:

2015

Araten-Bergman, T., Stein, M.A., & Tal-Katz, P. (2015). **Psychosocial adjustment of Israeli veterans with disabilities: Does employment status matter?** *Work*, 50(1), 59-71.

PMID: 25167907

ABSTRACT: **BACKGROUND:** Since its establishment in 1948, the state of Israel has been deeply committed to reintegrating veterans with disabilities into mainstream society. Prominently, the Israeli Ministry of Defense's rehabilitation division provides veterans with disabilities with a wide array of benefits and services aimed at restoring their physical and psychosocial functioning, especially in the workplace. The focus on employment is motivated by a prevailing assumption among professionals that successful adjustment to disability is contingent on an individual's ability to reacquire normative occupational function. To date, however, this widely accepted wisdom has not been empirically scrutinized. **OBJECTIVE:** To empirically explore whether employment status is associated to psychological, social, and behavioral adjustment attributes. **METHODS:** One hundred and one employed veterans were compared to 111 non-employed veterans in respect to their self-reported levels of hope, acceptance of disability, social networks size and social participation patterns. **RESULTS:** Employed veterans reported significantly higher levels psychological adjustment as manifested in elevated hope and acceptance of disability and lighter social network than their non-employed counterparts. However no differences were found between employed and non-employed veterans with respect to their social participation patterns. **CONCLUSIONS:** The value of these findings, as well as wider implications for rehabilitation professionals and policy makers, is discussed.

Griffin, C.L., Jr., & Stein, M.A. (2015). **Self-perception of disability and prospects for employment among U.S. veterans.** *Work*, 50(1), 49-58.

PMID: 25167905

ABSTRACT: **BACKGROUND:** Barriers to employment in the civilian labor force are increasingly difficult problems for returning veterans with disabilities. Reduced self-perception of disability status because of

predominant military norms can be particularly harmful to reintegration efforts. **OBJECTIVE:** We analyze rates of self-identified and externally determined disability status among U.S. veterans. Evidence of a lower self-report rate would confirm the hypothesis that armed forces culture might hold back truly deserving veterans from seeking the benefits owed, including specialized employment training programs. **METHODS:** We use data from the Current Population Survey Veterans Supplement over the sample period 1995-2010 on disability status and associated demographic characteristics to present descriptive measures and limited statistical inference. **RESULTS:** Over the entire sample period, federal agencies considered 29 percent of the survey respondents to have a service-connected disability versus a 9 percent self-identification rate. The rate of more severe service-connected disabilities has risen steadily, while less drastic disability rates have fallen. Non-white respondents and those with lower education levels were less likely to self-identify. **CONCLUSIONS:** Large disparities in internal and external disability status identification raise questions about targeting soldiers re-entering the labor force. Employment policy should focus on overcoming negative cultural stereotypes and encouraging self-identification.

Smith, D.L. (2015). **The relationship of disability and employment for veterans from the 2010 Medical Expenditure Panel Survey (MEPS).** *Work*, 51(2), 349-63. PMID: 25425598

ABSTRACT: **BACKGROUND:** Veterans with disabilities, especially those with posttraumatic stress disorder (PTSD) and traumatic brain injury (TBI) have difficulty obtaining and maintaining competitive employment. **OBJECTIVE:** To determine if there are significant differences in employment between veterans with and without disability, between veterans with a disability and nonveterans with a disability, and to investigate the association of veteran status and disability with employment. **METHODS:** Chi square analyses were conducted on data obtained from the 2010 Medical Expenditure Panel Survey to determine if significant differences in employment occurred between veterans with disabilities, veterans without disabilities and nonveterans with disabilities. Multivariate regression analyses were used to determine how veteran status and disability are associated with employment. **RESULTS:** Significant differences in employment were found between veterans with and without a disability; however, no significant differences existed in employment between veterans

and nonveterans with a disability. Multivariate analysis showed that veteran status (aOR = 1.80), having any disability (aOR = 7.29), social disability (aOR = 3.47) or a cognitive disability (aOR = 3.16) were associated with not being employed. CONCLUSIONS: Veterans with disabilities are more likely not to be employed than veteran populations without disabilities. Veterans; however have unique disabilities, different than nonveterans with disabilities that need to be addressed, such as social and cognitive disabilities resulting from TBI and PTSD. Future research should focus on evaluating the effectiveness of employment programs and policies designed to address the unique issues faced by veterans with disabilities.

2014

Smith, D.L. (2014). **The relationship between employment and veteran status, disability, and gender from 2004-2011 Behavioral Risk Factor Surveillance System (BRFSS).** *Work*, 49(2), 325-34.

PMID: 23803432

ABSTRACT: BACKGROUND: In 2011, about 1.8 million or 8 percent of the 22.2 million veterans were women in the US. The unemployment rate for female veterans of the wars in Iraq and Afghanistan rose to 13.5 percent, above the 8.4 percent for non-veteran adult women. OBJECTIVE: To examine data from the Behavioral Risk Factor Surveillance System (BRFSS), from 2004-2011 to determine the relationship between employment and veteran status, disability and gender. METHODS: Chi square analysis was used to determine if significant differences existed between the employment rate of female veterans with disabilities and female veterans without disabilities, female non-veterans with disabilities and male veterans with disabilities. Binomial logistic regression analysis was used to determine how veteran status, disability and gender affected the likelihood of not being employed. RESULTS: Significant differences were found in employment rate between female veterans with disabilities and female veterans without disabilities, but not when compared to female non-veterans with disabilities or male veterans with disabilities. Disability was the strongest factor increasing the likelihood of not being employed, though veteran status and female gender were also predictive. CONCLUSIONS: Female veterans with disabilities experience low levels of employment. Policies and programs are needed to address the unique needs of these veterans.

1993

Grafman, J., Kraft, J., Salazar, A.M., & Schwab, K. (1993). **Residual impairments and work status 15 years after penetrating head injury: Report from the Vietnam Head Injury Study.** *Neurology*, 43(1), 95-103.

PMID: 8423917

ABSTRACT: We investigated the relationship of neurologic, neuropsychological, and social interaction impairments to the work status of a large sample of penetrating head-injured patients wounded some 15 years earlier during combat in Vietnam. Extensive standardized testing of neurologic, neuropsychological, and social functioning was done at follow-up on each head-injured patient (N = 520), as well as on a sample of uninjured controls (N = 85). Fifty-six percent of the head-injured patients were working at follow-up compared with 82 percent of the uninjured controls. Seven systematically defined impairments proved to be most correlated with work status. These were post-traumatic epilepsy, paresis, visual field loss, verbal memory loss, visual memory loss, psychological problems, and violent behavior. These disabilities had a cumulative and nearly equipotent effect upon the likelihood of work. We suggest that a simple summed score of the number of these seven disabilities can yield a residual "disability score" which may prove to be a practical tool for assessing the likelihood of return to work for patients in this population and perhaps in other brain-injured populations. These findings may also help to focus rehabilitation efforts on those disabilities most likely to affect return to work.



Quick Looks

Online Resources Related to Employment and Veterans with Disabilities

ADA & IT Technical Assistance Program (ADA-TA) - Disability and Business Technical Assistance Centers

Toll Free: 800/949-4232

Find your region/ADA Center: adata.org/national-network.
www.adata.org.

ADA Document Portal

adata.org/ada-document-portal.

ADA: Know Your Rights – Returning Service Members with Disabilities

www.ada.gov/servicemembers_adainfo.html.

America's Heroes at Work — Veterans Hiring Toolkit through the U.S. Department of Labor

This toolkit is designed to assist and educate employers who have made the proactive decision to include transitioning service members, veterans, and wounded warriors in their recruitment and hiring initiatives.

www.dol.gov/vets/ahaw.

American Job Bank (AJB) – Component of CareerOneStop

AJB ceased operation in July 2007. Visit this site to locate your state's Job Bank.

www.ajb.dni.us.

APSE: The Network on Employment (Formerly the Association for Persons in Supported Employment)

Improving and expanding integrated employment opportunities, services and outcomes for persons experiencing disabilities.

Phone: 804/278-9187

www.apse.org.

Career OneStop

For information about career services for workers and employers, laid-off worker assistance, job bank databases, resume help, and the location of One-Stop Career Centers.

Toll-free: 877/872-5627 (V), 877/889-5627 (TTY)

Email: info@careeronestop.org.

Veterans with disabilities: www.careeronestop.org/ReEmployment/Veterans/disabled-veterans.aspx.

www.careeronestop.org.

Center on Knowledge Translation for Employment Research

Phone: 512/391-6565

www.kter.org.

Disabled American Veterans (DAV)

Toll Free: 877/426-2838

Contact Information: www.dav.org/contact-us.

Veterans Job Search: www.dav.org/veterans/veterans-job-search.

www.dav.org.

Disabled Businesspersons Association (DBA)

Phone: 619/594-8805

Email: info@disabledbusiness.com.

www.disabledbusiness.com.

Employer Assistance and Recruiting Network (EARN)

Toll Free: 855/275-3276

Recruiting Veterans: www.askearn.org/refdesk/Recruitment/Veterans.

www.AskEARN.org.

FEDS HIRE VETS Managed by U.S. Office of Personnel Management

Phone: 202/606-5090

Contact: www.fedshirevets.gov/contactus/index.aspx.
www.fedshirevets.gov

Job Accommodation Network (JAN)

Free consulting service to increase the employability of people with disabilities.

Toll Free: 800/526-7234 (V), 877/781-9403 (TTY)

Veterans and Service Members: askjan.org/topics/veterans.htm.

askjan.org.

Small Business and Self-Employment Service (SBSSES)

Located at the Job Accommodation Network, the SBSSES is a service of the Office of Disability Employment Policy of the U.S. Department of Labor that provides comprehensive information, counseling and referrals about self-employment and small business ownership opportunities for people with disabilities. SBSSES is located at JAN and is available through JAN's toll free number 800/526-7234 or their website at askjan.org/entre.

National Telecommuting Institute (NTI)

National Telecommuting Institute (NTI) is a unique educational/job-matching organization pioneering the development of telework jobs for Americans with disabilities.

Email: info@nticentral.org.
www.nticentral.org.

National Resource Directory

Connecting wounded warriors, service members, veterans, their families and caregivers with those who support them.

Resources for Resources for Employers & Veterans' Employment Service Providers:
tinyurl.com/j9ll2p4.
www.ebenefits.va.gov/ebenefits/nrd.

Occupational Outlook Handbook – Bureau of Labor Statistics

Nationally recognized source of career information, designed to provide valuable assistance to individuals making decisions about their future work lives. Revised every two years, the Handbook describes what workers do on the job, working conditions, training and education needed, earnings, and expected job prospects in a wide range of occupations.
www.bls.gov/oco.

RRTC on Employment of Individuals with Physical Disabilities

Phone: 804/828-1851
www.vcurrtc.org.

RRTC on Workplace Supports – VCU Rehabilitation Research and Training Center on Workplace Supports and Job Retention

This project has completed its research activities. The

site remains as a resource for families and health professionals.

Phone: 804/828-1851 (V), 804/828-2494 (TTY)
www.worksupport.com.

State Vocational Rehabilitation Offices

Listed in Alphabetical Order by State, available through the Job Accommodation Network
Toll free: 800/526-7234 (V/TTY)
askjan.org/cgi-win/TypeQuery.exe?902.

Understanding Your Employment Rights under the Americans with Disabilities Act (ADA): A Guide for Veterans

www.eeoc.gov/eeoc/publications/ada_veterans.cfm.

USAJOBS

Resources for Veterans: www.usajobs.gov/Veterans.
www.usajobs.gov.

U.S. Department of Defense Computer/Electronic Accommodations Program (CAP)

Phone: 703/681-8813 (V), 703/681-3978 (TTY)
Email: cap@mail.mil.
FAQ: www.cap.mil/AboutCAP/FAQs.aspx.
www.tricare.mil/cap.

U.S. Department of Veterans Affairs

Provides a variety of services and resources to U.S. military veterans.

Toll Free Numbers: iris.custhelp.com/app/answers/detail/a_id/1703.

Contact Information:
www.va.gov/landing2_contact.htm.

Veterans Employment Toolkit:
www.va.gov/vetsinworkplace.

Resources for Employment: www.va.gov/jobs.
Vocational Rehabilitation and Employment (VR&E):
www.benefits.va.gov/vocrehab/index.asp.

Additional Resources on Hiring Programs:
www.va.gov/jobs/hiring_programs.asp.
www.va.gov.

U.S. Equal Employment Opportunity Commission (EEOC) – Part of the ADA

Toll Free: 800/669-4000 (V), 800/669-6820 (TTY)
www.eeoc.gov.

U.S. Small Business Administration (SBA)

Maintaining and strengthening the nation's economy by aiding, counseling, assisting and protecting the interests of small businesses and by helping families and businesses recover from national disasters.

Toll Free: 800/827-5722

www.sba.gov.

Veterans and the Americans with Disabilities Act (ADA): A Guide for Employers

www.eeoc.gov/eeoc/publications/ada_veterans_employers.cfm.

Veterans' Employment and Training Service (VETS) through the U.S. Department of Labor

Regional Offices: www.dol.gov/vets/aboutvets/regionaloffices/map.htm.

REALifelines – Recovery & Employment Assistance Information Page: www.dol.gov/vets/programs/Real-life/main.htm.

www.dol.gov/vets.

Veterans & Military Resources through Disability.gov

























Veterans: www.disability.gov/?s=Veterans&submit.

Military: www.disability.gov/?s=Military&submit.

Search Terms for the Employment and Veterans with Disabilities

- 📖 Adaptation
- 📖 Acceptance of Disability
- 📖 Accessibility
- 📖 Accommodation
- 📖 ADA
- 📖 Adjustment
- 📖 African Americans
- 📖 Agencies
- 📖 Alcoholism
- 📖 Amputation(s)
- 📖 Assistive Technology
- 📖 Attitudes toward Disabilities
- 📖 Barriers/Attitudinal
- 📖 Best Practices
- 📖 Brain Injuries
- 📖 Career Centers/Counseling/Guidance
- 📖 Case Studies
- 📖 Client Characteristics
- 📖 Clinical Trials/Studies
- 📖 Community/Integration/Resources
- 📖 Computer Applications
- 📖 Cost-Benefit Analysis
- 📖 Counseling/Group
- 📖 Counselor Certification/Qualifications
Training
- 📖 Data Collection
- 📖 Depression
- 📖 Disabilities
- 📖 Disability Management
- 📖 Dual Diagnosis
- 📖 Education
- 📖 Eligibility Determination
- 📖 Employer(s)/Attitudes
- 📖 Employment/Competitive/Legislation
Opportunities/Patterns/Programs
Qualifications/Reentry/Services/Success
Supported
- 📖 Evaluation Criteria/Methods
- 📖 Evidence Based Practice
- 📖 Families
- 📖 Federal Agencies/Legislation/Programs
- 📖 Follow-Up Studies
- 📖 Foreign Countries
- 📖 Government
- 📖 Handbooks
- 📖 Hiring Practices
- 📖 Information Resources/Systems
- 📖 Injuries
- 📖 Internet
- 📖 Interview Techniques
- 📖 Job Placement/Skills/Training
- 📖 Labor force
- 📖 Limbs
- 📖 Mental Health/Service/Stress
- 📖 Mentors
- 📖 Military/Personnel/Service
- 📖 Modeling
- 📖 Multicenter Study
- 📖 Musculoskeletal Disorders
- 📖 Occupational Injuries
- 📖 Organizations
- 📖 Outcome Assessment/Treatment
- 📖 Outcomes
- 📖 Pain
- 📖 Paraplegia
- 📖 Patient Education
- 📖 Performance/Factors
- 📖 Physical Disabilities
- 📖 Policy
- 📖 Population
- 📖 Posttraumatic Stress Disorder (PTSD)
- 📖 Program Administration/Effectiveness
Evaluation/Improvement
- 📖 Psychiatric Disabilities
- 📖 Psychological Aspects
- 📖 Psychosocial Factors
- 📖 Quality Of Life
- 📖 Randomized Controlled Trial
- 📖 Reentry Workers
- 📖 Regulations
- 📖 Rehabilitation/Counseling/Research/Services
- 📖 Research and Training Centers
- 📖 Research/Methodology/Utilization
- 📖 Retraining









Search Terms for the Employment and Veterans with Disabilities continued....

-  Role
-  Secondary Conditions
-  Self-Help/Identification
-  Service Delivery/Integration
-  Social Behavior/Integration
-  Spinal Cord Injury (SCI)
-  State Programs
-  Statistics
-  Substance Abuse
-  Surveys
-  Systems Approach
-  Training
-  Transition/Programs
-  Traumatic Brain Injury (TBI)
-  United States Department of Veterans Affairs
-  Veteran/Education/Policy
-  Veteran's Administration
-  Vietnam
-  Visual Impairments
-  Vocation
-  Vocational Education/Guidance
Rehabilitation/Training
-  War
-  Work/Adjustment/Attitudes/Experience
Performance
-  Workers with Disabilities

About reSearch:

reSearch is an information product from the National Rehabilitation Information Center (NARIC). Each issue is based on real-world queries received by our information specialists from researchers, educators, and rehabilitation professionals around the world.

We search several sources both in-house and online, to fill these requests including:

-  REHABDATA and the NIDRR Program database
-  Education Resources Information Center
-  National Clearinghouse of Rehabilitation Training Materials
-  Campbell and Cochrane Collaborations
-  PubMed and other National Library of Medicine databases
-  Agency for Health Care Policy and Research databases
-  Center for International Rehabilitation Research Information and Exchange
-  and other reputable, scholarly information resources.

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