

ADA Technical Assistance Projects: Sims, M. (Ed.). (2007) *Rocky Mountain access, July 2007*. NARIC Accession Number: O16880. Project Number: H133A060079.

Abstract: Newsletter provides offers information about various issues related to the Americans with Disabilities Act (ADA) and accessible information technology for the Rocky Mountain region that includes Wyoming, Utah, Montana, North Dakota, South Dakota, and Colorado. Topics featured include: (1) in the Rocky Mountain Region, (2) latest and greatest, (3) law and order, (4) vital information, (5) accessibility tools, (6) coming soon, (7) the Internet Café, and (8) roundtable discussions.

Full text available to download from www.adainformation.org/newsletter/July07.htm

Disability Demographics: (2006) *2005 disability status reports: United States*. NARIC Accession Number: O16630. Project Number: H133B031111.

Abstract: The Annual Disability Status Reports provide policy makers, disability advocates, reporters, and the public with a summary of the most recent demographic and economic statistics on the working-age (ages 21-64) population with disabilities by state in the United States. They contain information on the population size, prevalence, employment, earnings, poverty, household income, home ownership, and activity limitations of working-age people with disabilities, as well as the composition of this population by age, race, gender, and educational attainment. Comparisons are made to working-age people without disabilities, across types of disabilities, and to the previous year. Additional statistics by state are available at www.DisabilityStatistics.org.

Full text available to download from naric.com

Technology for Access and Function: Yeager, P., Kaye, S. (2006) *Tools for living: Assistive technology on the job. Community Research for Assistive Living*. NARIC Accession Number: O16641. Project Number: H133A010702.

Abstract: Fact sheet examines the impact of assistive technology (AT) in the workplace. It describes the types of AT devices commonly used to perform job duties, how these accommodations are requested and funded, and the benefits associated with having AT on the job for workers with disabilities.

Full text available to download from naric.com

Knowledge Translation: (2006) *Focus: Technical brief number 14: Overview of international literature on knowledge translation*. NARIC Accession Number: O16647. Project Number: H133A060028.

Abstract: This brief examines the knowledge translation (KT) process as described by several international authors. Viewing KT from an international perspective provides several models or strategies for understanding and planning the movement of evidence-based research into practice setting. The majority of these approaches consist of multiple stages or steps, including: (1) identification of quality information/research findings; (2) assessment of research findings for target system; (3) program development, program/content adaptation; (4) program implementation; (5) evaluation of knowledge utilization; and (6) sustainability, capacity building.

Full text available to download from naric.com

Participation and Community Living: Salzer, M., Baron, R. (2006) *Community integration and measuring participation*. NARIC Accession Number: O16812. Project Number: H133B031109.

Abstract: Article focuses on the measurement of the success of community integration outcomes. It presents strategies for measuring participation in the following community integration domains: housing, employment, education, health, leisure/recreation, spirituality, citizenship, social roles, peer support, and self-determination.

Full text available to download from naric.com

Capacity Building for Rehabilitation Research and Training: Gordon, W., Brown, M. (2005) *Building research capacity: The role of partnerships*. *American Journal of Physical Medicine and Rehabilitation*, 84(12), 999-1004. NARIC Accession Number: J50162. Project Number: H133B040033.

Abstract: Article suggests that the goal of capacity building through partnerships is to maximize research utility. Specifically, an investigator or research organization must create partnerships that will enable the selection and framing of research questions to address concerns of relevant stakeholders, the development of a high-quality research design, and the translation of new knowledge into useful message that will be clearly understood by target audiences. Paper was presented at the "Rehabilitation Medicine Summit: Building Research Capacity" held in April 2005, in Washington, DC. Funding for the Summit was provided in part by the National Institute on Disability and Rehabilitation. A response to this article is available under NARIC accession number J50163.

NARIC is operated by HeiTech Services, Inc., for the National Institute on Disability and Rehabilitation Research under contract number ED-05-CO-0007.

RehabWire
News from the National
Rehabilitation Information
Center

NIDRR's Research Priorities

Volume 9, Number 9, October 2007



NIDRR Grantees on the Cutting Edge

Participation and Community Living: Evacuation Methodology and Understanding Behavior of Persons with Disabilities in Disasters: A Blueprint for Emergency Planning Solutions, *West Virginia University* (H133A070005) led by George E. Trapp, PhD. Bonnie Gracer, Project Officer.

Abstract: This project quantifies and interprets the unique challenges of persons with disabilities and other special needs during emergency/disaster evacuations in order to improve the management of such events. In order to evaluate the current state of evacuation preparedness, the project gathers data on persons with disabilities/special needs who have either recently personally evacuated from an emergency/disaster situation, have been in or proximate to a recent disaster evacuation, or who reside in an area that has not experienced a recent evacuation, but might face a type of hazard that could prompt an evacuation some time in the future. The investigators integrate these two data sources to create guidelines that key decision-makers, both governmental and nongovernmental, can use to improve existing evacuation plans to account for the disabilities/special needs public based upon urban, suburban, and rural models. Likewise, the project also produces guidelines for incorporating a disability/special needs element in emergency evacuation training and exercises along with delineating future emergency preparedness educational needs within the individuals with disabilities community.

Employment Outcomes: Rehabilitation Research and Training Center for Vocational Rehabilitation Research, *University of Massachusetts Boston* (H133B070001) led by John Halliday. Phillip Beatty, Project Officer.

Abstract: The RRTC for Vocational Rehabilitation: (1) conducts an exhaustive, systematic research literature search modeled after the Campbell Collaboration reviews, to provide a comprehensive platform for future research activities of the RRTC and for other researchers and policy-makers; (2) collects descriptive data from a wide range of sources and launches the RRTC survey of state agencies for vocational rehabilitation, mental retardation/developmental disability, mental health, and welfare, and community rehabilitation providers to develop state-by-state profiles of employment services and the context of VR service delivery; (3) interviews VR directors of all 80 VR agencies to collect descriptive information about key characteristics related to operational and programmatic decisions, policies, and practices; (4) uses the Delphi Method to identify, evaluate, and describe best practices in the implementation of (a) Order of Selection policies and the prioritization of individuals with the most significant disabilities for VR services; (b) employment services for individuals with developmental disabilities; and (c) employment services for individuals with mental illnesses; (5) institutes a training and technical assistance agenda that uses Communities of Practice

What are NIDRR's Priorities?

NIDRR's Long Range Plan outlines seven research priorities: Health and Function, Participation and Community Living, Employment Outcomes, Technology for Access and Function, Capacity Building, Knowledge Translation, and Disability Demographics.

Please note: These abstracts have been modified. Full, unedited abstracts, as well as any available REHABDATA citations, are available at naric.com.

Thousands of additional resources on these topics are available from NARIC's resource pages at www.naric.com/public

QLGUU#sxeolvkhv#d#Orqj#Udqjh#Sodaq#nyhu#ilyh#hduv#ghwdlolqj#uhvhdufk#sodqv
daqg#sulruv#hvh1#AVklv#vvxh#kljkoljkwv#r#q#q#z#surmhfw#urp#ndfk#sulruv|1

mechanisms to create interactive participant-driven opportunities for translation, information sharing, and policy development; and (6) widely disseminates products, curricula, and knowledge throughout the vocational rehabilitation system, employment services system, and to a wide array of disability and advocacy organizations.

Find out more at: www.communityinclusion.org

Technology for Access and Function: RERC on Rehabilitation Robotics and Telemanipulation Machines Assisting Recovery from Stroke Rehabilitation Engineering Research Center (MARS-RERC), Rehabilitation Institute of Chicago (H133E070013) led by W. Zev Rymer, MD, PhD. Thomas Corfman, Project Officer.

Abstract: This project designs and implements a program of research and development, centered on the use of robots for restoration of function in hemispheric stroke survivors. The focus is on the application of new approaches that improve functional outcomes of the entire body during either upper extremity reach-and-grasp activities or full body locomotion activities. The broad objective is to develop devices that assist the therapist in providing rationally based, intensive, and long duration stroke treatments. Such devices also monitor progress, and help to improve the functional performance of stroke survivors, with the intent that there is a greater likelihood of their return to community and to work.

Find out more at: www.smp.northwestern.edu/MARS/mars.html

Capacity Building for Rehabilitation Research and Training: Constructing Consumer Values for Independent and Community Living (ICL), Elias Mpofu (H133F070025) led by Elias Mpofu. A. Cate Miller, PhD, Project Officer.

Abstract: This project investigates consumer values that influence independent and community living (ICL) preferences. Knowledge of consumer values for ICL is central to service delivery, particularly in view of the self-determination and consumer philosophy that informs ICL outcomes. The project applies concept mapping to consumer focus group discussion data. Participants engage in nine focus group discussions with concept mapping to identify their ICL-related values. Concept mapping is an inductive, mixed method approach for describing social reality from participant viewpoints. The external validity of the consumer values construct determines their differentiation among consumers with known ICL statuses. Consumer value maps for ICL outcomes define significant ICL preferences. The maps operationalize the content of each value components, enabling utilization in ICL related interventions.

Knowledge Translation: EVIDAAC: A Database of Appraised Evidence in Augmentative and Alternative Communication, Northeastern University (H133G070150) led by Ralf W. Schlosser, PhD. Ruth Brannon, Project Officer.

Abstract: This project develops EVIDAAC, an accessible and usable database of appraised research evidence in augmentative and alternative communication (AAC) for practitioners, individuals using AAC, and their families. EVIDAAC provides access to pre-filtered, evidence-based practice by critically appraising studies and systematic reviews. EVIDAAC is developed in accordance with published quality criteria for health-related web sites using formative and process evaluation. Usability and accessible web design principles are integrated into the development of the database, with regular assessment using Web Accessibility Initiative principles and guidelines and rigorous technologies, including structured usability tasks in controlled laboratory situations.

Disability Demographics: Public Spending for Disability in the United States: A Comparative, Longitudinal Study, University of Colorado Health Sciences Center (H133G070163) led by David L. Braddock, PhD. David W. Keer, Project Officer.

Abstract: This project is a comprehensive longitudinal study of the characteristics, trends, and



Feel like browsing?

All of the currently and previously funded NIDRR projects are listed in the NIDRR Program Database. You can browse through the currently funded projects by priority or by program type (such as Research and Training Centers and Fellowships) at www.naric.com/research/pd.

Where Can I Find More?

A quick keyword search is all you need to connect to a wealth of disability and rehabilitation research. NARIC's databases hold more than 75,000 resources. Visit www.naric.com/research to search for literature, current and past research projects, and organizations and agencies in the US and abroad.



How can I apply for a NIDRR grant?

NIDRR funds approximately 85 new projects each year. Requests for proposals are announced in the Federal Register and Grants.gov. If you're interested in applying for a grant from NIDRR or any other Federal organization, sign up for email alerts at www.grants.gov.

determinants of public spending for disability programs in the United States at the federal, state, and local level. Data collection and analysis utilizes 28 disability program subcategories across 4 major activity domains: income maintenance, general health care, long-term care, and special education. The project's comprehensive focus includes intellectual/developmental disabilities, mental illness, and physical/sensory disability.

Health and Function: INSIGHT-WPD: Development of a Cognitive Behavioral Therapy Intervention for Women with Physical Activity Limitations who Experience Depression, Oregon Health and Science University (H133G070214) led by Dena Hassounah, PhD. Joyce Y. Caldwell, Project Officer.

Abstract: This project addresses the need for efficacious, relevant, and accessible, consumer-run services for women with physical disabilities (WPD) who experience secondary depression. Rates of depression and suicide in WPD are up to five times higher than in the general population. Despite this disparity, few intervention studies that address the specific needs of WPD are available. Therefore, the specific aims of the project are to: (1) modify an existing cognitive behavioral group therapy intervention to address the specific needs of WPD who experience depressive symptoms; and (2) pilot-test the intervention to preliminarily evaluate its efficacy with a total of 90 participants using a using a wait list control design. Because the intervention is peer implemented and, if proven efficacious, intended for use by Centers for Independent Living, this project is community-based, participatory, and collaborative.

Current Literature - Selections from REHABDATA

Employment Outcomes: Habeck, R., Kregel, J. (2007) **Salient and subtle aspects of demand side approaches for employment retention: Lessons for public policymakers.** *Journal of Vocational Rehabilitation*, 26(1), 21-27. [NARIC Accession Number: J52289](#). Project Number: H133B040011.

Abstract: Article describes the organizational characteristics and practices of companies that have successfully employed workers with disabilities for public policymakers who want to understand the demand side factors associated with employment of people with disabilities. Preliminary findings from research into demand-side approaches to employment retention are presented and illustrated with practice examples.

Health and Function: Schwartz, C., Andresen, E. (2007) **Response shift theory: Important implications for measuring quality of life in people with disability.** *Archives of Physical Medicine and Rehabilitation*, 88(4), 529-536. [NARIC Accession Number: J52310](#). Project Number: H133B040034.

Abstract: Article describes how the concept of response shift can help researchers better understand and measure health-related quality of life (HRQOL) in people with disabilities. Response shift refers to a change in the meaning one's self-reported HRQOL resulting from changes in internal standards, values, or conceptualization. The authors define and distinguish between health and HRQOL, and review recent changes in the conceptualization of disability and health that contribute to an understanding of what constitutes HRQOL. Discussion includes: identifying response shift in HRQOL measurement, how response shift theory can improve the measurement of HRQOL, the distinction between effect and causal indicators of HRQOL, the importance of evaluation-based ratings of HRQOL, how response shift affects the psychometrics of measurement and clinical decision making, and first steps for using response shift in the future development of HRQOL measures.