Johnston, M., Wood, K. (2004) Perceived quality of care and outcomes following spinal cord injury: Minority status in the context of multiple predictors. Journal of Spinal Cord Medicine, 27(6), 1. NARIC Accession Number: J48241. Project Number: H133B000002. Project Number: H133N000013. Abstract: Study identified predictors of and examined minorities’ perceptions about rehabilitation quality of care and outcomes after SCI. Perceptions about rehabilitation were assessed during inpatient rehabilitation, one month after rehabilitation discharge, and one year after injury. Seven factors were investigated as potential predictors: (1) age, (2) American Spinal Injury Association index level (2 age), (3) race, (4) marital status, (5) education, (6) facility, and (7) overall life satisfaction. Analysis indicated that minorities did not report statistically significant differences in perceived quality of care or other indicators compared with other groups. Severity of injury affected length of stay and activity outcomes. Satisfaction with medical care before the injury significantly predicted perceived quality of acute hospital care, inpatient rehabilitation, and continuing care.

Warren, P., Giens, J. (2004) Effects of race, gender, and other characteristics of legally blind consumers on homemaker closure. Journal of Rehabilitation, 70(3), 1. NARIC Accession Number: J48426. Project Number: H133B000093. Project Number: H133N000080. Abstract: Examined the vocational rehabilitation outcomes of legally blind clients to determine if personal characteristics were predictors of homemaker closure. Predictors like Center for Independent Living, Family Support Index level, and other retirement programs were used in the analysis. Race was a secondary disability, source of support, gender, marital status, education, and age at application. Using logistic regression with only race in the model, African Americans were significantly less likely to be closed as a homemaker. When the other variables were included hierarchically, race made no significant difference in whether a client was closed as homemaker or competing for another position. There were no significant differences in the ages at application, self-support at application, gender, level of education, presence of secondary disability, and marital status.

Anderson, G. (2005) Appreciating diversity through stories about the lives of deaf people of color. American Annals of the Deaf, 149(5), 9. NARIC Accession Number: J48596. Project Number: H133B000101. Project Number: H133N000081. Abstract: Authors examined the life stories of deaf people of color (e.g., Black/African American, Hispanic/Latino, Asian/Pacific Islander, or American Indian/Alaskan Native) published in national and print and visual media. For five of the six categories of emerging research from the data: (1) experiences relating to overcoming obstacles to educational opportunities, (2) stories about people in communities that were positive and hopeful, (3) the directions the featured individual took in their lives, (3) childhood and family experiences, and (4) experiences relation to stereotypes, cultural conflicts, or discrimination.

Hart, T., Whyte, J. (2005) Community outcomes following traumatic brain injury: Impact of race and preinjury status. Journal of Head Trauma Rehabilitation, 20(2), 1. NARIC Accession Number: J48300. Project Number: H133B000155. Project Number: H133N000092. Abstract: Study examined the influence pre-injury differences between whites and African Americans with TBI on their social and community outcomes once one year after injury. Results showed that whites and African Americans did not differ significantly on self- reported pre-injury status or demographic factors except gender. At one year after injury, African Americans reported significantly lower social integration scores and having lost more income than whites. All other outcome measures were comparable and showed declines in community productivity, increases in symptoms of depression, and lower satisfaction with life for both groups compared to pre-injury.

Miller, K. (Ed.). (2004) Circle of unity: Pathways to improving outreach to American Indians and Alaska Natives who are deaf, deaf-blind, and hard of hearing. NARIC Accession Number: J15905. Project Number: H133B000150. Project Number: H133N000081. Abstract: Publication presents information to assist community counselors, vocational rehabilitation counselors, tribal rehabilitation counselors, and others who are interested in improving outreach to American Indians and Alaskan natives who are deaf, deaf-blind, and hard of hearing. Chapters include information on the diversity of the American Indian and Alaskan native communities, options for service approaches to service provision, as well as a list of helpful resources.

Cho, S. (2004) Journal writing intervention in alleviating psycho- logical distress. NARIC Accession Number: O15982. Project Number: H133F500018. Project Number: H133B000101. Abstract: Project examined the effectiveness of a journal writing intervention on Korean-American mothers of children with disabilities by randomly assigning them only to the intervention group or the control group. The intervention group received journals and written instructions to help them write about stressful events related to raising a child with a disability, while the control group did not. Statistical analysis revealed no significant differences between the groups.

Lazenby, K., Worthington, J. (2004) Findings brief 4: Pathways to care. Family experience of the mental health system: Findings compendium. NARIC Accession Number: O16012. Project Number: H133B000091. Project Number: H133B000101. Abstract: Authors described the experiences with pathways to mental health services described by the families who participated in the Family Experience of the Mental Health System Study. For families in the study, the pathway to appropriate mental health services was often difficult and winding, and was often through informal networks (i.e., schools, courts, and pediatricians), and often through informal networks (i.e., waiting rooms, playgrounds, etc.). For the Hispanic families who participated in the study, their experiences varied, often depending on language proficiency, and immigration status and permanency. African American families said they did not experience any problems due to their race; however, they shared feelings about being discriminated against based on their low income or perceived lack of education.

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Efficient Trilingual Interpreter Certification Program that addresses an under-recognized "language barrier"—American Sign Language (ASL), English, and Spanish—that affects deaf and hard of hearing Hispanics. This barrier presents access problems for deaf and hard of hearing Hispanics, who may use only one language, but must communicate with both English and Spanish speakers, often at the same time. This trilingual language barrier often affects Hispanic deaf and hard of hearing children who learn ASL in school, but whose parents speak Spanish and whose service providers speak English. Providing access to critical educational, health, legal, and social services requires interpreters who can competently bridge these three different cultures and languages. This certification program— to be conducted in partnership with Texas Department of Assistive and Rehabilitative Services - Division for Deaf and Hard of Hearing Services—includes the development, piloting, and validation of beginning and advanced level trilingual interpreting certification tests in Spanish from English/ASL and ASL to Spanish/English.

Find out more at: nci.arizona.edu

Advanced Rehabilitation Research Program: Ed Roberts Fellowship in Disability Studies, University of California (H133P020009) led by Susan Schweik. Ruth Brannon, Project Officer.

Abstract: This program trains scholars who have PhD, MD, or other advanced professional degrees, conferred in the last five years, to be leaders in disability studies and rehabilitation research, teaching and mentorship. Based at the University of California, Berkeley, a San Francisco Bay area-wide consortium of universities, research institutes, and disability agencies recruits people who want to broaden their theoretical outlook and their disability research methodological skills. In particular, the project recruits scholars with significant disabilities from minority groups who have not had the opportunity for collaborative cross-disciplinary research study of disability that includes social science and the humanities. The project supports three nine-month-long (September to May) Ed Roberts Fellowships a year for each of the five program years. Fellows devote their full-time effort to Fellowship activities on site.

Find out more at: www.iard.edu/berkeley/Press/2003-02-2disability-studies-fellowship.htm

NIDRR's new Long Range Plan is now available for comment through August 26th, 2005. Go to www.ed.gov/legislation/ FedRegister/other/2005-3072705.pdf to download a copy. Comments may be submitted to Donna Nangle at Donna.nangle@ed.gov.

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