The NIDRR Program Directory
Fiscal Year 2002

Produced by The National Rehabilitation Information Center

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Introduction

The mission of the National Institute on Disability and Rehabilitation Research (NIDRR) is to generate, disseminate and promote knowledge that will improve the lives of persons with disabilities in their communities. NIDRR conducts comprehensive and coordinated programs of research and related activities to assist in the achievement of the full inclusion, social integration, employment, and independent living of people with disabilities. This edition of the NIDRR Program Directory lists all projects funded by NIDRR during the 2002 fiscal year.

NIDRR’s Long-Range Plan, announced in the Federal Register, December 7, 1999 (http://www.ed.gov/offices/OSERS/NIDRR/#LRP), provides background on NIDRR’s conceptual base. It describes the “new paradigm of disability,” which posits that disability is an interaction between the individual and the environment. NIDRR’s research focus includes such areas as: employment outcomes, health and function, technology for access and function, independent living and community integration, associated disability research areas, knowledge dissemination and utilization, and capacity building for rehabilitation and international activities. For detailed descriptions of these areas, consult the Long-Range Plan.

NIDRR’s Research Program

NIDRR’s research is conducted via a network of individual research projects and centers of excellence throughout the country. Most NIDRR grantees are universities or providers of rehabilitation or related services. NIDRR’s largest funding programs are the Rehabilitation Research and Training Centers (RRTCs) and Rehabilitation Engineering Research Centers (RERCs). NIDRR also makes awards for information dissemination and utilization centers and projects, field initiated projects, research and development projects, advanced research training projects, Mary E. Switzer fellowships and NIDRR scholars, small business innovative research, and model systems of care. NIDRR also administers the State Technology Assistance Projects, the Assistive Technology Loan Funds, and the Disability and Business Technical Assistance Centers.

Disability and Rehabilitation Research Projects

The Disability and Rehabilitation Research Projects (DRRP) program allows for projects with special emphasis on research, demonstrations, training, dissemination, utilization, and technical assistance. Projects may include combinations of these activities. True to the mission of NIDRR, these projects may develop methods, procedures, and rehabilitation technology to assist in achieving the full inclusion and integration into society, employment, independent living, family support, and economic and social self-sufficiency of individuals with disabilities, especially individuals with the most significant disabilities, or to improve the effectiveness of services authorized under the Rehabilitation Act.

Model Systems

NIDRR administers programs that have become world-renowned model systems of care for persons with spinal cord injuries, burns, and traumatic brain injuries. The Model Systems establish innovative projects for the delivery, demonstration, and evaluation of comprehensive medical, vocational, and
other rehabilitation services. The work of the Model Systems begins at the point of injury and ends with successful re-entry into full community life. These projects collect and contribute data on patient characteristics, diagnoses, causes of injury, interventions, outcomes, and costs to a uniform national database; participate in collaborative research with other Model System centers; and coordinate research efforts with other related grant recipients.

Advanced Rehabilitation Research Training Projects

The Advanced Rehabilitation Research Training (ARRT) Program (formerly known as the Research Training Grants Program) expands the capacity of the field of rehabilitation research by providing advanced training opportunities. These projects provide rehabilitation research training for persons with clinical or other experience, who may be lacking certain formal research training. Grants are made to institutions to recruit qualified persons with doctoral or similar advanced degrees with clinical, management, or basic science research experience, and prepare them to conduct independent research on problems related to disability and rehabilitation. This research training may integrate disciplines, teach research methodology in the environmental or new paradigm context, and promote the capacity for Disability Studies and rehabilitation science. These training programs must operate in interdisciplinary environments and provide training in rigorous scientific methods.

Rehabilitation Research and Training Centers

NIDRR’s Rehabilitation Research and Training Centers (RRTCs) conduct coordinated and integrated advanced programs of research targeted toward the production of new knowledge, which may improve rehabilitation methodology and service delivery systems, alleviate or stabilize disabling conditions, or promote maximum social and economic independence for persons with disabilities. Operated in collaboration with institutions of higher education or providers of rehabilitation or other appropriate services, RRTCs serve as centers of national excellence in rehabilitation research. Also, they are national or regional resources for research information for individuals with disabilities and the parents, family members, guardians, advocates, or authorized representatives of the individuals. These centers also conduct related training programs, including graduate, pre-service and in-service training. The centers also disseminate and promote the utilization of research findings.

Rehabilitation Engineering Research Centers

Rehabilitation Engineering Research Centers (RERCs) conduct programs of advanced research of an engineering or technical nature designed to apply advanced technology, scientific achievement, and psychological and social knowledge to solve rehabilitation problems and remove environmental barriers. Each center is affiliated with one or more institutions of higher education or nonprofit organizations. The RERCs’ work in a rehabilitation setting provides an environment for cooperative research and the transfer of rehabilitation technologies into rehabilitation practice. Involved at both the individual and systems levels, RERCs seek to find and evaluate the newest technologies, products, and methods that ultimately can benefit the independence of persons with disabilities and the universal design of environments for all people of all ages. The centers also exchange technical and engineering information worldwide and improve the distribution of technological devices and equipment to individuals who need them.
State Technology Assistance Projects

This program supports statewide, consumer-driven, technology-related assistance networks for individuals of all ages and disabilities. States and territories are eligible to apply for one grant per entity which spans a total of ten years of Federal funding. The first phase is a development grant and lasts for three years. The second phase is known as the first extension and can last for two more years. The third and final phase is known as the second extension and lasts for five additional years. The Assistive Technology Act of 1998 (AT Act) authorized three additional years for States that have completed ten years, at a reduced funding level. Several states have received one-year alternative financing projects aimed at providing financial assistance in the purchase of assistive technology. Projects work with public and private lenders in their states.

Fellowships

Fellowships, named for the late Mary E. Switzer, give individual researchers the opportunity to develop new ideas and gain research experience. There are two levels of fellowships: Distinguished Fellowships and Merit Fellowships. Distinguished Fellowships go to individuals of doctorate or comparable academic status, who have had seven or more years of experience relevant to rehabilitation research. Merit Fellowships are given to persons with rehabilitation research experience, but who do not meet the qualifications for Distinguished, usually because they are in earlier stages of their careers. Fellows work for one year on an independent research project of their design.

NIDRR Scholars

The Scholars program attempts to build research capacity by recruiting undergraduates with disabilities to work in NIDRR-funded Centers and projects and introduces them to disability and rehabilitation research issues. Scholars gain work experience and participating centers receive a small stipend. This program is an innovative approach aimed at generating interest in research careers for persons with disabilities.

ADA Technical Assistance Projects

NIDRR administers a network of grantees to provide information, training, and technical assistance to businesses and agencies with responsibilities under the Americans with Disabilities Act (ADA). Ten regional Disability and Business Technical Assistance Centers (DBTACs) are funded to provide information and referral, technical assistance, public awareness, and training on all aspects of the ADA. Several National Training Projects target particular groups, organizations, or subject areas for ADA training and the ADA Technical Assistance coordinator contract assists all of the grantees with their activities.

Small Business Innovative Research

Small Business Innovative Research (SBIR) grants help support the production of new assistive and rehabilitation technology. This two-phase program takes a product from development to market readiness.
**NIDRR Contracts**

Through its contracts, NIDRR seeks improved methods, systems, products, and practices to add to its work. The contracts are for specific activities related to management, research, and information dissemination.

**NARIC and the *NIDRR Program Directory***

The *Program Directory* is compiled by the National Rehabilitation Information Center (NARIC). NARIC functions as NIDRR’s library, providing the rehabilitation community with information and referral services to help locate pertinent research related to specific areas of expertise. Since 1977, NARIC has been the primary source of rehabilitation and disability information generated by NIDRR funds, with special priority services to NIDRR staff and NIDRR-funded project staff.

NARIC also produces a companion to the *Program Directory*, which is the *Compendium of Products by NIDRR Grantees and Contractors*. Copies of NIDRR-supported research products are received by NARIC and added to the reference collection and Compendium database. Information about holdings are available online at http://www.naric.com.

Neither NARIC nor NIDRR assumes liability for the *Directory’s* contents or the use thereof. NARIC does not evaluate or certify the programs or products of the organizations listed in the *Directory*.

This *Directory* is not intended for use as a fiscal document to show how NIDRR funds are allocated; its purpose is to display the range of programs that NIDRR supports. This listing is current as of October 1, 2002.

NARIC operates under U.S. Department of Education contract ED-02-CO-0002.
Employment Outcomes

NIDRR seeks to improve employment outcomes for people with disabilities by funding research into a wide spectrum of employment and disability issues, including economics; Federal, State, and community employment programs; accommodation; technology; education; and ergonomics and the work environment.

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Rehabilitation Research and Training Centers (RRTCs)
Arkansas

Rehabilitation Research and Training Center on Improving Vocational Rehabilitation Services for Individuals Who Are Deaf or Hard of Hearing

University of Arkansas/Little Rock
College of Education
4601 West Markham Street
Little Rock, AR 72205
dwatson@comp.uark.edu
http://www.uark.edu/deafrtc

Principal Investigator: Douglas Watson, PhD
Public Contact: 501/686-9691; Fax: 501/686-9698

Project Number: H133B010501
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $600,000; FY 02 $600,000

Abstract: This program enhances the rehabilitation outcomes of persons who are deaf or hard of hearing who are served by VR and related employment programs. When appropriate, the unique needs of specific subgroups within this diverse and heterogeneous population are investigated. The ultimate goal of these efforts is to improve the capacity of the VR system and related programs to address the career preparation, entry, maintenance, and advancement, as well as the community living needs, of the target population. Research activities include: investigating the impact of changes in federal employment and rehabilitation legislation and policy on the delivery of services to the target population; investigating the impact of business practices that contribute to accessible work and workplace supports to enhance the employment of the target population; and identifying, developing, and assessing rehabilitation-related innovations that enhance employment and community living outcomes of the target population.
Research and Training Center for Persons Who Are Hard of Hearing or Late Deafened

Alliant University Foundation
California School of Professional Psychology
6160 Cornerstone Court East
San Diego, CA 92121-3725
rrtc@alliant.edu
http://www.hearinghealth.org

Principal Investigator: Raymond J. Trybus, PhD
Public Contact: 858/623-2777, ext. 390 (V); 800/432-7619 (TTY); 858/554-1540 (TTY); Fax: 858/642-0266

Project Number: H133B70016
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 97 $499,911; FY 98 $499,911; FY 99 $499,911; FY 00 $499,911; FY 01 $499,911; FY 02 (No-cost extension through 3/31/2003)

Abstract: This Center implements a series of projects involving the impact of hearing loss on workplace and personal adjustment issues through collaboration with business, professional, and consumer organizations. The primary target populations are accessed through a network of consumer organizations, collaborating companies, and service agencies and associations. Project examples include the identification of factors that have a negative impact on the employment status of people who are hard of hearing or late deafened. Data sources include affiliations with Veteran’s Affairs hospitals, local minority communities, and multiple consumer organizations. Interventions include psycho-educational training sessions with consumers and family members, consultations with businesses, and presentations to key individuals and groups such as labor union officials, employee assistance counselors, and psychological and public health professionals. Interventions include “rights training” in relation to the ADA, and focus on assistive technologies. The project provides workshops for families and employers, establishes support groups for people with cochlear implants, and creates a family life center project: a “one-stop shopping” facility where individuals who are hard of hearing or late deafened can obtain a variety of interventions, information, and guidance regarding services and devices. Dissemination includes information on the ADA and Tech Act. Training targets groups, including employers, consumers, and human resource organizations.
Rehabilitation Research and Training Centers (RRTCs)
Hawaii

National Center for the Study of Postsecondary Educational Supports:
A Rehabilitation Research and Training Center

University of Hawaii at Manoa
Center on Disability Studies/University Affiliated Program
1776 University Avenue/UA4-6
Honolulu, HI 96822
stodden@hawaii.edu; huap@hawaii.edu
http://www.rrtc.Hawaii.edu

Principal Investigator: Robert Stodden, PhD, 808/956-9199
Public Contact: Juana Tabali-Weir, Administrative Assistant; Valerie Shearer, Pacific Rim and Grants Coordinator, 808/956-3975 (Tabali-Weir); 808/956-2673 (Shearer); Fax: 808/956-5713

Project Number: H133B980043
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000; FY 99 $605,000; FY 00 $600,000; FY 01 $600,000; FY 02 $600,000

Abstract: The research this project conducts on educational supports is designed to increase access to postsecondary education programs and improve outcomes for people with disabilities. The research includes: (1) examining and evaluating the current status of educational supports, including (a) individual academic accommodations, (b) adaptive equipment, (c) case management and coordination, (d) advocacy, and (e) personal counseling and career advising; (2) identifying effective support practices and models of delivery that contribute to successful access, performance, and retention and completion of postsecondary programs; (3) identifying specific barriers to the provision of disability-related services, including policy and funding requirements; (4) assessing the effectiveness of promising educational practices and disability-related services that are important to career mobility and success in the workplace; (5) testing the effectiveness of specific models of delivery that are believed to increase the accessibility of educational supports and innovative technologies; (6) identifying the types of educational and transitional assistance that postsecondary programs provide to improve educational and subsequent labor market success; (7) providing training, technical assistance, and information to support personnel, public and private rehabilitation personnel, career placement specialists, and students with disabilities based on the findings and implications of the research program; and (8) implementing a consumer-driven empowerment evaluation plan for assessment of the Center’s progress in achieving its goals. Additional goals include conducting national surveys and field studies within diverse postsecondary educational settings, and implementing an innovative and integrated training, technical assistance, and dissemination model to ensure the application and sustainability of research-proven policy and practice. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Research and Training Centers (RRTCs)
Iowa

Rehabilitation Research and Training Center on Workforce Investment and Employment Policy for Persons with Disabilities

University of Iowa College of Law
Law Health Policy and Disability Center
100 Gilmore Hall
Iowa City, IA 52242
mmorris@ncbdc.org
http://www.its.uiowa.edu/law/lhpdc/rrtc/index.html

Principal Investigator: Michael Morris; Peter Blanck; Michael Collins; Robert Silverstein
Public Contact: Michael Morris, Project Director, 202/521-2930; Fax: 202/218-7297

Project Number: H133B010102
Start Date: November 1, 2001
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $588,756

Abstract: This Center helps expand, improve, and modify disability policy and other more general policies in order to improve the employment status of Americans with disabilities and increase their independence and self-sufficiency. Based on research from this project and other NIDRR-funded projects, this project establishes an information and technical assistance resource to government leaders and decision makers at state and federal levels, individuals with disabilities, parents and family members, and other interested parties, offering new and revised approaches to workforce development and employment policy. Studies conducted by this project include: (1) an analysis of the relationship between select federal and state policies upon the employment of people with disabilities, (2) an analysis of the policy-based implications of outcome-based reimbursement on the delivery of employment and rehabilitation services to people with disabilities, and (3) an analysis of the effect of civil rights protections and multiple environmental factors on promoting or depressing the employment status of people with disabilities. The Center actively seeks to be outcome-focused and involve individuals with disabilities, parents, and family members in all facets of project activities, including training, research, information dissemination, and technical assistance.
Institute for Community Inclusion  
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Boston, MA 02125  
cia@umb.edu  
http://www.communityinclusion.org/rrtc

Principal Investigator: William E. Kiernan, PhD  
Public Contact: John Butterworth, PhD, 617/287-4357; Fax: 617/287-4352

Project Number: H133B980037  
Start Date: October 1, 1998  
Length: 60 months  
NIDRR Officer: Delores Watkins  
NIDRR Funding: FY 98 $700,000; FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000

Abstract: This Center identifies effective practices in coordinated employment efforts and facilitates such development at local, regional, and state levels. It also influences policy, practice, and perceptions on the national level. Project activities include investigations, technical assistance, and public policy reviews focused on: (1) examining state service systems, including VR, mental health, mental retardation, employment and training service (including one-stop career centers and welfare-to-work programs), and education to document promising policies and practices reflecting integrated and coordinated approaches to employment of people with disabilities; (2) documenting actual employment outcomes for people with disabilities through the analysis of national, state, and local data collection systems; (3) documenting strategies state agencies use for overcoming barriers to employment at the state and local levels; (4) examining, documenting, and disseminating practices at the state level that respond to the employment and support needs of SSI and SSDI beneficiaries; and (5) reviewing and evaluating strategies and approaches to develop a more integrated employment approach at the federal and state levels, in order to enhance the employment of people with disabilities.
Rehabilitation Research and Training Centers (RRTCs)
Mississippi

RRTC on Improving Vocational Rehabilitation Services for Individuals Who Are Blind or Have Severe Visual Impairments

Mississippi State University
P.O. Box 6189
Mississippi State, MS 39762
schaefer@ra.msstate.edu
http://www.blind.msstate.edu

Principal Investigator: J. Elton Moore, EdD, 662/325-2001
Public Contact: Kelly Schaefer, 662/325-7825 (V); 662/325-8693 (TTY); Fax: 662/325-8989

Project Number: H133B010101
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 01 $600,000; FY 02 $600,000

Abstract: This program includes a variety of research and training activities that focus on improving VR services for individuals who are blind or have severe visual impairments. Activities include: (1) investigating and documenting the impact of changes in disability and employment legislation on the unique employment-related needs of individuals who are blind or have visual impairments, as well as their impact on service delivery options and policy; (2) investigating, documenting, and analyzing existent state and federal data sets to determine different employment outcomes for persons who are blind or have visual impairments and the relationship of the outcomes to client and service provider characteristics; (3) investigating and documenting how state VR agencies, other public agencies, and private service providers overcome environmental barriers in order to improve employment outcomes for individuals who are blind or have visual impairments; (4) developing a national information and resource referral database for the training needs of state business enterprise program facilities, developing and delivering training programs to meet the identified training needs, and developing measures that can be used to evaluate the efficacy of the training; (5) conducting three conferences to train VR staff on state-of-the-art information and computer technology for individuals who are blind or have visual impairments; and (6) conducting a coordinated and advanced program of training in rehabilitation research focusing on blindness and low vision, including training in applied research methodology that is designed to increase the number of qualified doctoral-level researchers working in the area of blindness rehabilitation.
Rehabilitation Research and Training Centers (RRTCs)
Montana

Rehabilitation Research and Training Center on Rural Rehabilitation Services

University of Montana
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muarid@selway.umt.edu
http://ruralinstitute.umt.edu/rtcrural

Principal Investigator: Tom Seekins, PhD
Public Contact: 888/268-2743 (V, information service only); 406/243-5467 (V/TTY); Rural Disability Information Network [RUDI] BBS numbers: 406/243-2318; 800/961-9610 (In MT and WY); Fax: 406/243-2349

Project Number: H133B70017
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 97 $500,000; FY 98 $550,000; FY 99 $555,000; FY 00 $500,000; FY 01 $550,000; FY 02 (No-cost extension through 9/29/2002)

Abstract: This RRTC conducts and disseminates research and provides training that improves the capacity of rural environments to support people with disabilities in living and working independently. Rural Employment and Economic Development Projects concentrate on employment and VR service needs, including self-employment as a vocational option for rural people with disabilities. These project components explore the role of rural economic development in meeting the needs of people with disabilities, and ways that rural citizens with disabilities can assume community leadership. Rural Community Development, Independent Living, and Telecommunications components look at how rural independent living services, transportation services, accessible housing, and telecommunications are funded, and ways to improve rural access to these services. Health Care projects conduct research to improve access to rural health care services, including health promotion activities that might reduce the incidence of secondary conditions. American Indian project components work with American Indian tribes to develop culturally sensitive ways to discuss disability issues, such as ensuring environmental, programmatic, and social access for tribal members with disabilities; and developing appropriate long-term care options for elders and people with disabilities or chronic conditions. Methodology: the RRTC approaches its research areas from a community psychology perspective. Cross-cutting measures of importance include participation, engagement, and a psychological sense of community. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Research and Training Centers (RRTCs)
New York

Rehabilitation Research and Training Center for Economic Research on Employment Policy for Persons with Disabilities

Cornell University
Program on Employment and Disability
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106 ILR Extension Building
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Principal Investigator: Susanne Bruyère, PhD; Richard Burkhauser, PhD; David Stapleton, PhD
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Project Number: H133B980038
Start Date: December 16, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $700,000; FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000

Abstract: Using principles of economics, this project conducts policy research on how environmental factors influence the work outcomes of people with disabilities. Research also addresses critical aspects of employment outcomes, recognizing the heterogeneity of people with disabilities, and explains the importance of interactions among the multiplicity of programs intended to meet the employment needs of people with disabilities. Components include: (1) a comprehensive analysis, using existing panel data, of the current employment status of people with disabilities; (2) a longitudinal analysis of the effects of labor market change on the employment and earnings of people with disabilities; (3) a longitudinal analysis of return-to-work after the onset of a disability; (4) a longitudinal analysis of the impact of civil rights protections on the employment and earnings of people with disabilities; (5) identification and analysis of policies that foster or impede the participation of transitioning students in rehabilitation or employment service programs; and (6) analysis of emerging and important issues affecting the employment of people with disabilities. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Research and Training Centers (RRTCs)
Ohio

Rehabilitation Research and Training Center on Drugs and Disability

Wright State University
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Substance Abuse Resources and Disability Issues (SARDI)
P.O. Box 927
Dayton, OH 45401-0927
sardi@wright.edu
http://www.sardi.wright.edu

Principal Investigator: Dennis C. Moore, EdD
Public Contact: Jo Ann Ford, 937/775-1484 (V/TTY); Fax: 937/775-1495

Project Number: H133B70018
Start Date: October 1, 1997
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 97 $499,369; FY 98 $602,294; FY 99 $602,294; FY 00 $603,663; FY 01 $603,663; FY 02 (No-cost extension through 2/28/2003)

Abstract: This project conducts epidemiological and evaluative studies of substance abuse and substance abuse services for consumers of state VR programs. Activities address substance abuse as it co-exists with other disabilities; all components of the RRTC are designed to interrelate and synergistically build on each other. The research components include longitudinal and multisite studies to address more advanced research questions, and quantitative/qualitative methods to investigate VR issues for people with HIV. The training components use a variety of materials, venues, and trainers in order to address needs within pre- and in-service populations. Training and dissemination components also include extensive use of distance learning media, especially use of the Internet to provide professionals and consumers with timely and relevant information. Stakeholders’ concerns and interests are addressed by several mechanisms, including a formal subcontract with the National Association on Alcohol, Drugs, and Disability. This project is one component of a number of state and federally funded entities in the SARDI (Substance Abuse Resources & Disability Issues) Center. Multiple collaborations are delineated with federal agencies, including the Substance Abuse and Mental Health Services Administration, as well as professional and consumer organizations, national clearinghouses, other RRTCs, and institutions of higher education.
Rehabilitation Research and Training Centers (RRTCs)
Virginia

Rehabilitation Research and Training Center on Workplace Supports
Virginia Commonwealth University
Rehabilitation Research and Training Center on Workplace Supports
1314 West Main Street, Box 842011
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tcblanke@saturn.vcu.edu
http://www.worksupport.com

Principal Investigator: Paul Wehman, PhD
Public Contact: Valerie Brooke, Associate Director, 804/828-1851 (V); 804/828-2494 (TTY); Fax:
804/828-2193

Project Number: H133B980036
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $699,992; FY 99 $699,992; FY 00 $699,992; FY 01 $699,992; FY 02 $699,992

Abstract: This Center helps to increase the national employment rate among people with disabilities by identifying factors in the work environment that inhibit or enhance employment outcomes and by sharing the results with the business community. Researchers: (1) analyze existing or new financial incentives to find those that encourage enterprises to hire or retrain workers with disabilities; (2) measure the effectiveness of disability management and return-to-work strategies; (3) assess employers’ need for information, training, and resources; (4) conduct, in business settings, interventions that respond to employer needs; (5) analyze the interventions to determine their effectiveness; (6) determine the impact of changes in work structures such as telecommuting and self-employment on the employment outcomes of people with disabilities. Stakeholders who benefit from these research, training, technical assistance, and dissemination efforts include business personnel; rehabilitation service personnel; federal and state policy-makers; people with disabilities; their guardians, advocates, and authorized representatives; students; and the general public.
Rehabilitation Research and Training Center on Community Rehabilitation Programs to Improve Employment Outcomes

University of Wisconsin/Stout
Stout Vocational Rehabilitation Institute
College of Human Development
220 Tenth Avenue East
Menomonie, WI 54751
rtc@uwstout.edu
http://www.rtc.uwstout.edu

Principal Investigator: Fredrick E. Menz, PhD
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Project Number: H133B980040
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 98 $700,000; FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000

Abstract: This project engages community-based rehabilitation programs (CRPs) and state rehabilitation programs in an effort to open multiple funding sources for rehabilitation and habilitation services and employment opportunities for people with disabilities. The project includes a series of interrelated studies directed toward changing outcomes and determining CRP capacities to affect the economic status of people with disabilities in their communities, and it develops a complementary methodology for achieving utilization and application of the new knowledge. Primary research tasks: (1) examining how CRPs are serving people with disabilities from alternate sources of funding; (2) determining the extent to which consumers pursue and receive services, compared to the intentions of the Rehabilitation Act; (3) exploring what funding, service, and strategy capacities exist to address those intentions more coherently at the community level; (4) devising and demonstrating practice-program alternatives that materially improve outcomes from CRPs; and (5) clarifying how CRPs as an industry can be enjoined as a complementary resource to improve the economic and community integration status of people with disabilities. The project establishes a publicly accessible national database of core information on CRPs, and includes training, technical assistance, and dissemination activities.
Model Distance-Learning Computer Training Program for Blind and Visually Impaired Individuals

Iowa Department for the Blind
524 Fourth Street
Des Moines, IA 50309
assist@blind.state.ia.us
http://www.blind.state.ia.us/assist

Principal Investigator: Kent A. Farver
Public Contact: 515/281-1256; Fax: 515/281-1263

Project Number: H133A010104
Start Date: December 1, 2001
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 01 $299,565; FY 02 $299,463

Abstract: This project creates a model distance-learning program that delivers computer training to people who are blind or who have visual impairments. The purpose of this program is to increase IT educational opportunities and employability in the IT field. Project objectives include: (1) developing a model distance-learning computer training program for people who are blind that results in employment in the IT field; (2) developing 13 distance-learning computer training courses for individuals who are blind or who have visual impairments and VR professionals; (3) training and preparing 150 individuals who are blind or who have visual impairments for Microsoft Office certification and thus prepare them for entry-level IT positions; (4) training 50 people who are blind and VR professionals to provide computer training to job seekers who are blind, thus increasing future IT educational opportunities for people who are blind and those who have visual impairments; and (5) disseminating training materials and research results to agencies serving individuals who are blind or who have visual impairments.
Disability and Rehabilitation Research Projects
Iowa

I.T. Works

University of Iowa
Law, Health, Policy, and Disability Center
431 Boyd Law Building
Iowa City, IA 52242
http://www.its.uiowa.edu/law

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Project Number: H133A011803
Start Date: November 1, 2001
Length: 60 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 01 $299,935; FY 02 $299,724

Abstract: The goal of the I.T. Works project is to identify barriers to and facilitators of the hiring, retention, advancement, and wages of individuals with disabilities. Research also shows that the percentage of working-age individuals with disabilities in full- or part-time positions is substantially lower than the percentage of working-age people without a disability, and there is a demand for trained IT workers. Increasing the employment of individuals with disabilities in IT-related jobs would increase the employment of individuals with disabilities and reduce the shortage for trained IT workers. Research activities for this project include a theoretical model in which predictive measures include environmental factors, organizational factors, attitudinal factors, and individual characteristics. Outcome measures in the model include hiring rate, advancement rate, retention rate, and wages of individuals with disabilities. Training activities allow for the distribution of the research findings to diverse target audiences, including employers, IT trainers and professionals, persons with disabilities in diverse employment settings, other researchers, and relevant policy-makers. Target audiences also include IT employers; IT training certification bodies; human resource managers; community colleges and university continuing education programs; and Centers for Independent Living and other disability-related organizations.
Disability and Rehabilitation Research Projects
Mississippi

Persons Aging with Hearing and Vision Loss

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Project Number: H133A020701
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $500,000

Abstract: This project investigates strategies to improve outcomes for persons who have a sensory disability and acquire a second as a result of the aging process. The project conducts a variety of research, development, training, and dissemination activities and evaluates both technology and model service delivery approaches for improving employment and community integration options. A Participation Action Research team provides guidance and direction. The project solicits direct input from key stakeholders as part of the ongoing planning, development, and implementation of research activities. These activities include the use of focus groups, a panel of experts, and a study sample that includes a nationally representative sample of older individuals who are blind or visually impaired and losing their hearing, and those who are deaf or hard of hearing and losing their vision. This is a collaborative project of the Rehabilitation Research and Training Center (RRTC) on Blindness and Low Vision at MSU, the RRTC on Persons Who Are Hard of Hearing or Late Deafened at the National University, and the Helen Keller National Center for Deaf-Blind Youths and Adults.
Preparing Avenues for Competitive Employment in Information Technology (PACE-IT) Project

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Project Number: H133A011802
Start Date: November 1, 2001
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 01 $293,183; FY 02 $290,191

Abstract: Preparing Avenues for Competitive Employment in Information Technology (PACE-IT) develops a comprehensive, person-centered system that assists local students with disabilities in their transition to professional employment in IT-related careers following graduation. The project ensures that students with disabilities at the University of Missouri-Columbia (MU) engage in experiential opportunities in IT-related work settings with appropriate support. Participants also receive individualized accommodations, electronic portfolios, and professional mentoring in their chosen fields to enable them to be competitive in the IT job market upon graduation. The partnership involves university student services; departments of state government, agencies, government officials; and area businesses (totaling 21 entities).
Disability and Rehabilitation Research Projects
New York

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)

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Project Number: H133A70005
Start Date: October 1, 1997
Length: 48 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 97 $249,958; FY 98 $249,804; FY 99 $249,804; FY 00 $249,855; FY 01 (No-cost extension through 1/31/02) FY 02 (No-cost extension through 9/30/02)

Abstract: This project addresses ways to improve the employment practices covered by Title I of the ADA. The purpose of this effort is to investigate the impact of the ADA on the employment practices of private sector small, medium, and large businesses. The intended outcome is to assist in the identification of employment practices that have been the most challenging in implementing the ADA, and to identify interventions that can be used by private sector employers and people with disabilities to address these challenging employment practices. Employment policy and practices that enhance both the hiring and retention of workers with disabilities are examined. A representative sample of small, medium, and large private sector employers was selected for study from the membership of the Washington Business Group on Health and the Society for Human Resources Management. A survey was conducted of almost 1,000 private-sector employers and the results have been used to identify specific interventions to address remaining barriers. The study is conducted in collaboration with the Washington Business Group on Health, the Society for Human Resource Management, and The Lewin Group.
Field-Initiated Projects (FIPs)
Arkansas

Reaching Hard of Hearing Workers in the Mainstream: Implications for Consumers and Service Professionals

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Project Number: H133G010156
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project investigates the utilization of rehabilitation services by hard of hearing individuals. Most existing studies of this population have been limited to convenience samples, a methodological approach that is likely to present a fragmented and potentially inaccurate picture of these workers and their VR needs. Research with representative samples of hard-of-hearing workers is critically needed so results can be obtained that are more valid. Additionally, the project studies the existing practices and policies used by VR professionals as they deliver rehabilitation and employment services to hard-of-hearing adults. These professionals can offer valuable insights into their abilities to serve this population.
Comparison of Two Employment Models for Consumers with Severe Mental Illness

Field-Initiated Projects (FIPs)
Illinois

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Project Number: H133G90155
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 7/1/03)

Abstract: This project conducts a randomized controlled trial comparing supported employment with well-established, comprehensive psychiatric rehabilitation approaches. It also investigates interactions between consumer characteristics and employment approaches, toward an understanding of the best VR strategies for people of color, especially people from the African American community. This study compares the effectiveness of two important, popular employment models for people with Severe Mental Illness (SMI). The Diversified Placement Approach (DPA) offers a gradual, stepwise preparation for competitive employment, including prevocational training, agency-run business opportunities, group placements, individual placements, and ultimately movement into independent employment, all available on a flexible, individualized basis without fixed time limits. The second model is a supported employment model developed in New Hampshire, known as Individual Placement and Support (IPS). IPS is a supported employment approach for individuals with SMI. As a consumer-oriented approach, key features of the IPS model include individualized planning with careful attention to consumer preferences in the job matching process, close coordination between rehabilitation and treatment, and rapid job search.
An Exploratory Study of the Factors Determining the Vocational Recovery of People with Psychiatric Disabilities

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Project Number: H133G010113
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $148,989; FY 02 $149,932

Abstract: This project studies factors that determine the vocational recovery of persons with psychiatric disabilities. Vocational recovery is examined as an important aspect of recovery from serious mental illness and is defined as preserving, regaining, or acquiring competitive employment despite being affected by a disabling psychiatric condition. The project seeks to explore the major factors that promote vocational recovery from serious mental illness based on the experiences of individuals who made the transition from severe work dysfunction, measured through the receipt of Social Security income (SSI/SSDI), to full- or part-time sustained competitive employment. Activities include: (1) studying the major subjective and objective factors influencing mental health consumers’ capacity to overcome severe work dysfunction and sustain vocational recovery; (2) studying the indicators for consumers’ readiness for financial self-sufficiency examined as an essential factor determining vocational recovery from serious mental illness; and (3) disseminating the results of the study to various vocational and psychosocial rehabilitation programs, self-help groups, the broad mental health community, employers, and the general public.
Field-Initiated Projects (FIPs)
Massachusetts

Job Retention Factors for Homeless People with Significant Disabilities

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Project Number: H133G020092
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $150,000

Abstract: This project studies the major factors that promote or limit job retention and sustained employment for approximately 200 homeless individuals with significant disabilities who have successfully transitioned from unemployment to competitive employment and permanent housing. Unemployment rates, wage levels, benefits, and educational levels for individuals with disabilities are unacceptably low when compared to the general population and access to quality jobs with decent wages is lower still for individuals with disabilities who are homeless, or who reside in supported or subsidized housing. The goals of this project are: (1) to study the relationship between successful job retention and the individual characteristics and coping strategies of homeless people with significant disabilities; (2) to study the relationship between successful job retention and different workplace supports, program services, and homeless resources used by homeless people with disabilities; (3) to study how specific individual characteristics, and different workplace and program supports and resources, interact to influence job retention and sustained employment; and (4) to disseminate results of the study to employment and vocational rehabilitation programs, homeless resources, workforce development programs, advocacy groups, and interested stakeholders.
Self-Employment Technology Transfer (SETT)

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Project Number: H133G000189
Start Date: October 1, 2000
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 00 $149,970; FY 01 $149,487; FY 02 $149,986

Abstract: The Self-Employment Technology Transfer (SETT) project has developed and field tested a VR self-employment support model based on extensive research. This project is designed to develop, demonstrate, and evaluate methods for facilitating the widespread adoption by practicing VR counselors of this empirically derived model of standards and practices in a cost-effective manner and in a relatively short time. It is estimated that achieving this goal benefits 25,560 to 62,850 consumers of VR services annually. Further it is believed that such a technology transfer model for disseminating empirically derived social technology from research into practice has the potential to shape the content, methods, and goals of future disability and rehabilitation research. There has been an explosion of interest in self-employment for people with disabilities. More than a half-million people with disabilities report owning their own businesses and people with disabilities are nearly twice as likely to be self-employed as those in the general population. While self-employment is not for everyone, it clearly is a viable option used by many. Yet, VR agencies nationally help fewer than 2.5 percent of their consumer achieve self-employment. Research shows that few of the estimated 9,500 practicing VR counselors have the knowledge or skills to support consumers who choose to pursue self-employment. Anecdotal reports indicate that VR agencies and staff have a significant interest in developing methods to respond to this consumer demand. While a few programs have served as models for promoting self-employment, none are designed specifically for VR counselors or organized for such wide-scale dissemination.
Medication Management and Successful Work Transition in Persons with HIV/AIDS

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Project Number: H133G000195
Start Date: July 1, 2000
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 00 $149,998; FY 01 $149,998; FY 02 $149,998

Abstract: This project conducts survey research and a series of focus groups with graduates of a comprehensive VR program. The purpose is to identify effective strategies used by persons with HIV/AIDS for managing combination antiretroviral medications in the workplace. Men and women with HIV/AIDS are a population from the new universe of disability; many are from ethnically diverse backgrounds and are economically disadvantaged. Within this population NIDRR-funded research has found a high frequency of hidden TBI and a strong correlation between health and employment. The information gleaned from the survey research and focus groups, as well as other research on how people with HIV/AIDS can maintain their health, is used to create rehabilitation interventions for people with HIV/AIDS to enter the labor market and sustain employment. Medication management is conceptualized in its broadest sense to include adherence to prescribed treatment protocols, management of medication side effects and other HIV/AIDS-related symptoms while balancing daily life roles, routines, activities, expectations, and demands. The effectiveness of these rehabilitation interventions is evaluated in the context of a community-based employment agency in New York City—Mobilizing Talents and Skills (MTS)—that serves men and women with HIV/AIDS from ethnically diverse backgrounds. The interventions are expected to enhance the VR services provided by MTS and combine a series of psycho-educational groups with individualized service coordination and counseling.
Measuring Employer Openness to Hiring People with Disabilities:
Development of Expanded Labor Market Survey

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Project Number: H133G000028
Start Date: October 1, 2000
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 00 $149,306; FY 01 $147,650; FY 02 $148,892

Abstract: This project works to understand the labor market in regard to people with disabilities. The first goal is to identify the key factors that distinguish employers that are authentically open to people with disabilities throughout the human resource management process, including recruitment, selection, training, supervision, accommodation, and promotion. The second goal is to develop a simple interview protocol (and supportive training materials) that rehabilitation consumers and counselors can use as part of an enhanced labor market survey to target employers for placement, employer development, and consulting efforts based upon that employer’s level of openness. Five objectives help to achieve these goals: (1) develop and convene a consumer advisory panel; (2) conduct focus groups and interviews with employers in key labor markets; (3) analyze the data to identify key components of openness; (4) present the data to a consumer advisory panel and a practitioner panel to help develop enhanced labor market survey questions, protocols, and training materials; and (5) disseminate the project results to consumers, practitioners, educators, and employees. Consumers and rehabilitation professionals can use the enhanced labor market survey to understand the openness of employers. The web and CD-ROM versions of the labor market survey illustrate the key aspects of employer openness with Quicktime movies of employer statements.
Field-Initiated Projects (FIPs)
North Carolina

Resolving ADA Employment Discrimination Charges

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Project Number: H133G000132
Start Date: October 1, 2000
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 00 $149,925; FY 01 $149,591; FY 02 $149,933

Abstract: The project’s purpose is to assess the impact of the ADA employment discrimination service system on the lives of people with disabilities, using data from the computerized charge data system of the U.S. Equal Employment Opportunity Commission (EEOC). Under Title I of the Americans with Disabilities Act (ADA), individuals who believe they have been discriminated against in employment on the basis of a disability may file an administrative charge with either the EEOC or a state or local Fair Employment Practice Agency (FEPA). During the statute’s first decade of operation, the EEOC and the FEPA have become a significant service system for people with disabilities, handling an average of 30,000 Title I claims each year. Recently, landmark Supreme Court decisions interpreting the ADA, the EEOC’s implementation of a new charge processing policy, and their ambitious new mediation program have significantly changed the Title I charge process and considerably altered the landscape in which EEOC offices and FEPA process Title I charges. The aims of the project, therefore, are as follows: (1) to monitor the evolving implementation of Title I of the ADA by the EEOC and the FEPA, (2) to monitor the evolving implementation of the EEOC’s new mediation program, and (3) to design and disseminate useful and accessible information about the Title I charge process for people with disabilities and persons who support them.
Field-Initiated Projects (FIPs)
Ohio

Variables Associated with Vocational Success Among Persons with Severe Mental Illness: An Empirical Study

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Project Number: H133G990036
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 99 $138,332; FY 00 $141,462; FY 01 $144,060; FY 02 (No-cost extension through 6/30/03)

Abstract: This project (1) examines the relationships between several variables and vocational success among people with severe and persistent mental illness; and (2) develops a model of how those variables together lead to vocational success in this population. Many attempts have been made to identify factors associated with vocational success among people with severe mental illness, but no comprehensive portrait of these factors has been developed. The study is carried out at a community employment collaborative among three community-based rehabilitation service agencies in Cleveland Ohio that provides a range of vocational services to individuals with severe and persistent mental illness. This study uses a longitudinal design with three data collection points to follow approximately 300 individuals receiving vocational training; the variables to be examined are in three areas: personal factors, work environment factors, and other factors. Personal factors include social functioning, symptomatology, symptom management, and expectations to succeed. Work environment factors include the employers’ knowledge about mental illness, the work environment, and pay. Other factors include the fit between employee interests and the actual job, and social networks.
Self-Employment Development for Individuals with Traumatic Brain Injury

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Project Number: H133G020215
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $149,985

Abstract: This project creates self-employment opportunities for individuals with traumatic brain injuries through inventive, replicable capacity building approaches coupled with high-quality and cost-effective technical consultation and program redesign. The research, conducted by the Brain Injury Association of America and The Rural Institute at the University of Montana, addresses consumer self-determination, staff development, dissemination, and capacity building, with significant attention to consumer choice, minority enrollment, and local collaboration. Staff focus on systemic community-wide capacity building for self-employment, with the assistance of a broad-based culturally, geographically, and disability diverse Advisory Council. Each of the two development communities receives on-site and distance technical training and consultation on business planning, SSA Work Incentives, financing/alternative funding, and specific supports (assistive/universal technology, self-management regimens, etc.) for individuals with TBI. The project builds capacity with local CRPs, VR and Work Force Investment Act offices, medical providers, families, self-advocates, economic development entities including business incubators and Small Business Development Centers, and Tribal Business Information Centers.
Field-Initiated Projects (FIPs)
Virginia

Strategies People with Psychiatric Disabilities Use to Maintain Employment and Build Careers

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Project Number: H133G020116
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 02 $150,000

Abstract: This project investigates the strategies individuals with psychiatric disabilities use to maintain employment over time. The majority of individuals with psychiatric disabilities who are working find their work independently, without the help of specialized employment programs. Little is known concerning the strategies they use to maintain employment over time. Research that has focused on psychiatric disability and employment has looked solely at those populations who are currently attending or have attended vocational rehabilitation or specialized employment programs; individuals who have been most successful at maintaining employment have not been consulted regarding the strategies that worked best for them. This project explores a number of domains, including: (1) coping with stigma in the workplace, (2) managing symptoms as well as medications and their side effects, (3) making decisions regarding disclosure of psychiatric disability in the workplace, (4) negotiating workplace accommodations, (5) developing a social support network, (6) coping with relapse or re-hospitalization with regard to employment, and (7) obtaining education or training (career development). In addition, the project examines whether those who have found work with the help of professionals and those who have found work independently use differing strategies to maintain employment. Researchers ascertain the prevalence of various strategies in each group as well as their importance to participants in maintaining employment over time.
Telework as an Accommodation for Employees with Disabilities: Developing Prediction Models for Successful and Satisfying Careers

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Project Number: H133G020158
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $149,998

Abstract: This three-year project develops research models to predict successful entry or reentry into employment using telework options. The models include: (1) functional, demographic, and experiential characteristics of participants; (2) telework options, such as telecenters, home-based work, and combinations of home- and office-based duties; (3) types of work performed, such as telephone or on-line technical support, telemarketing, remote data entry, writing, reservations, etc.; (4) support and training provided by the employer and public and private agencies; and (5) monetary factors such as earnings and fringe benefits. “Success” is defined in terms of both sustained labor force involvement and satisfaction with one’s job, earnings, benefits, and career path.
Integration of Fingerprint Technology with Online Employment Screening Software to Create a Product that is Operated by Persons with Disabilities in Retail Outlets

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Project Number: H133S020056
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $75,795

Abstract: This project combines existing technologies with advanced imaged-based biometric fingerprint capture technologies to expand business opportunities for providers of community rehabilitation services. The goal is to identify, train, and employ individuals with disabilities as fingerprint technicians enabling them to conduct employment background investigative services. The FIRM, through its on-line employment background screening service called VERIFY, establishes employment-background retail outlets staffed by persons with disabilities who are trained to take Automated Fingerprint Information System quality fingerprints. Objectives include: (1) develop and test software that integrates the live-scan technology with the VERIFY product, (2) develop a job description with detailed skill and performance outcomes, and (3) develop a training protocol for the technicians. The project deploys ten systems in various communities to test the training protocol and adjust it to ensure successful job performance, while utilizing and further enhancing the newly developed software.
Multi-user, Interactive Online Computer Game to Improve School-to-Work Transition Outcomes

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Project Number: H133S020007
Start Date: September 15, 2002
Length: 6 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $74,800

Abstract: This project develops and designs an accessible, interactive on-line computer game to increase knowledge and skills in microenterprise development, self-determination, and financial literacy. The project includes: (1) a literature review on micro-enterprise, financial literacy, and work incentives, particularly as they relate to young adults and self-determination, and the educational/sociological value of multi-user, interactive on-line games; (2) preparation of requirements documentation (i.e., content, goals, and accessibility specifications) for an entertaining and educational game design; (3) preparation of design documentation translating the requirements into a schematic; (4) development of sample introductory and content screens; (5) content and design evaluation through focus groups to assess usability, knowledge gain, real life applicability, and value to young adults with disabilities; and (6) modification, if needed, of requirements and design documentation, and determination of need for accompanying training materials.
Virtual Interview Exercises for Workplace Success (VIEWS)

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Project Number: ED-01-Q-0003 (3-7)
Start Date: September 1, 2002
Length: 24 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $150,000

Abstract: This project conducts research to develop a prototype computer software program that provides the opportunity for job seekers who are deaf or hard-of-hearing to practice employment interviewing skills. This software incorporates SigningAvatar™ technology that uses 3D animated characters who sign in variants of American Sign Language. The software presents an accessible virtual interview scenario with interacting characters and the ability to respond to interview questions that are asked frequently. If the user selects a certain number of the best responses to the interview questions, the employer offers the interviewee the job. This software not only provides the opportunity to practice interviewing skills independently, it may boost the confidence and intrinsic motivation of the user.
Small Business Innovative Research (SBIR), Phase II
Wisconsin

Fair and Appropriate Community Employment (FACE): A Management Information System (MIS) for Evaluating the Impact of Employment Programs on Persons with Disabilities

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Project Number: SBIR 01-09
Start Date: September 17, 2001
Length: 24 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $149,968; FY 02 $149,968

Abstract: This project develops and beta tests a comprehensive management information system (MIS) at 15 community rehabilitation programs (CRPs) around the nation to fill the need for an MIS that can evaluate the relationship between services provided and outcomes achieved for consumers with various disabilities and backgrounds. While several research efforts have employed rigorous research designs for relating services to outcomes, the retrieval of data from the records of more than 7,000 CRPs who serve nearly 4 million persons with disabilities has met with much less success. In the past five years, the concept Fair and Appropriate Community Employment (FACE(c)) MIS has been developed to evaluate the effectiveness and efficiency of their service interventions upon employment outcomes. This MIS places powerful research and analytic tools directly into the hands of practitioners for improving outcomes for their consumers. The FACE(c) MIS software prototype was developed with three modules: Client Tracking/Case Management, Program Evaluation using managed care techniques, and follow-up based on FACE Profiling(c).
Health and Function

NIDRR’s research focus for health and function addresses problems in individual care, services, and supports for people with disabilities. Research topics include: medical rehabilitation; health and wellness programs; service delivery; short and long-term interventions; systems research; and new and emerging disabilities.

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Rehabilitation Research and Training Center on Secondary Conditions of Spinal Cord Injury: Promoting General Health, Well-Being, and Community Integration Through Home-Based, Self-Directed Care

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Principal Investigator: Amie B. Jackson, MD, 205/934-3334 (V); 205/934-3330 (V); 205/934-4642 (TTY)
Public Contact: Linda Lindsey, Assistant Director, Research Services, 205/934-3283; Fax: 205/975-4691

Project Number: H133B980016
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 98 $799,993; FY 99 $799,998; FY 00 $799,998; FY 01 $799,998; FY 02 $799,996

Abstract: This RRTC conducts coordinated, integrated, and advanced research in the prevention and treatment of secondary conditions of SCI. The eight interrelated projects include: (1) determine the effectiveness of cranberry pills to prevent and treat urinary tract infections (UTIs); (2) evaluate interventions used to prevent and treat UTIs in people with SCI using the University of Alabama/Birmingham SCI Urologic Database; (3) study the relationship of beverage consumption and water hardness to the risk of urinary tract stones; (4) address pain following SCI by evaluating SCI pain classification systems, studying the effectiveness of gabapentin and methadone in relieving certain types of pain, and developing a method to target those at risk; (5) determine the duration of immune response to pneumococcal vaccine and the need for revaccination; (6) evaluate a screening tool to identify people with SCI at high risk for sleep apnea, and evaluate treatments to improve their health and quality of life; (7) study the use of telemedicine to reduce depression and secondary conditions among people with SCI and their caregivers through problem solving interventions; and (8) evaluate and adapt a nationally recognized weight-loss project for a population of people with SCI. A collaborative project with another Center evaluates a computer-based risk assessment and feedback tool for assessing secondary conditions. This RRTC provides training on research methodology and information based on research activities to people with disabilities, their families, service providers, and rehabilitation professionals. Information is disseminated through print media (information sheets and newsletters), electronically (through the Internet and a fax information service), and through technical assistance.
Rehabilitation Research and Training Center in Neuromuscular Diseases

University of California/Davis
MED: Physical Medicine and Rehabilitation
TB 191
Davis, CA 95616-8655
nmdinfo@ucdavis.edu
http://www.rehabinfo.net

Principal Investigator: Craig McDonald, MD
Public Contact: Kathryn Devereaux, PhD, Training and Information Services Director, 530/752-2903 (V); Fax: 530/752-3468

Project Number: H133B980008
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $650,000; FY 99 $650,000; FY 00 $650,000; FY 01 $650,000; FY 02 $650,000

Abstract: This project conducts research designed to enhance the quality of life of people with neuromuscular diseases. Through multidisciplinary research and a comprehensive program of training and information services, the Center serves consumers, physicians, and health care workers. Program areas include: interventions to preserve functional capacity including management of weakness and respiratory insufficiency due to muscle wasting, exercise interventions, treatment of exercise related fatigue, pain interventions, and dietary interventions; interventions to enhance community integration, including incorporating goal-based approaches to community integration, facilitation of healthy adaptation through development of stress management and coping skills, and resource training for acquisition of disability-related information through the Internet; ethical issues related to genetic testing; and training and information services.
Rehabilitation Research and Training Center on Aging with a Disability

Los Amigos Research and Education Institute, Inc. (LAREI)
Rancho Los Amigos National Rehabilitation Center
7601 East Imperial Highway, 800 West Annex
Downey, CA 90242-4155
gracefg@agingwithdisability.org
http://www.agingwithdisability.org

Principal Investigator: Bryan J. Kemp, PhD
Public Contact: Grace Farwell Granger, Associate Training Director, 562/401-7402; Fax: 562/401-7011

Project Number: H133B980024
Start Date: September 1, 1998
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 98 $700,000; FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000

Abstract: This project assists people who are aging with a disability by conducting a series of research studies using a database of more than 1,000 people who represent a variety of disabilities (for example, cerebral palsy, rheumatoid arthritis, stroke, SCI, polio). Research projects include: (1) the natural course of aging with a disability, (2) assisting family caregivers of people aging with a disability, (3) improving community integration and adjustment, (4) preventing secondary complications such as diabetes and thyroid disorders, (5) improving bone density through a regimen of exercise and vitamins, and (6) understanding the role of AT and environmental interventions (EI) in maintaining functional performance. Training, dissemination, and technical assistance activities focus on students and professionals in the health, allied health, and rehabilitation fields, as well as people aging with a disability and their families. Goals include training rehabilitation researchers knowledgeable about aging with a disability, improving the adoption and utilization of RRTC-developed assessment and treatment regimens by health and rehabilitation professionals, and disseminating information about aging with a disability to people with disabilities and their families. Training and dissemination occurs through advanced and continuing education courses; local, national, and international conferences; workshops; publications in professional- and consumer-oriented journals; and the Internet.
Managed Health Care for Individuals with Disabilities

MedStar Research Institute
NRH Center for Health and Disability Research
1016 - 16th Street Northwest, Suite 400
Washington, DC 20036
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http://www.ilru.org/mgdcare/index.html

Principal Investigator: Gerben DeJong, PhD, 202/466-1905
Public Contact: Olga Elizabeth Hayes, 202/466-1919; Fax: 202/466-1911

Project Number: H133B70003
Start Date: May 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $499,969; FY 98 $499,988; FY 99 $500,000; FY 00 $700,000; FY 01 $300,000; FY 02 (No-cost extension through 5/30/03)

Abstract: This project provides national leadership on the major health service and health policy issues facing consumers with disabilities in managed health care arrangements. It: (1) conducts research; (2) prepares special policy analyses; (3) hosts forums for discussion; (4) presents expert testimony to Congress and governmental agencies; (5) publishes in the health policy, consumer, and trade literature; (6) trains graduate students with disabilities in health service research; and (7) disseminates findings to diverse consumer, provider, payer, academic, and policy-making audiences. On the state and national levels the project seeks to make managed care and the larger health care system more responsive to the needs of people with disabilities by acting as a catalyst for the development of new ideas. Program partners are the NRH Center for Health and Disability Research in Washington DC and the Independent Living Research Utilization (ILRU) center in Houston Texas.
The Consortium for Children and Youth with Disabilities and Special Health Care Needs.

Georgetown University
Child Development Center
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Washington, DC 20007
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http://www.consortiumnrrtc.org

Principal Investigator: Phyllis Magrab, PhD; Larke Huang, PhD
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Project Number: H133B001200
Start Date: July 1, 2000
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 00 $699,956; FY 01 $699,947; FY 02 $699,926
Abstract: The Consortium improves rehabilitation outcomes for children and youth with disabilities and special health care needs by increasing the effectiveness of service systems. Using an integrated, multifaceted research program, and related training, dissemination, and technical assistance activities, the program targets five areas: (1) access issues in pediatric rehabilitation, (2) impact of cost control strategies on provision of health care, (3) promising practices in transition from pediatric to adult health care, (4) effective telehealth strategies for interdisciplinary service delivery in remote areas, and (5) training issues in AT. In addition, a variety of strategies utilize this information and other knowledge to provide training and technical assistance to the target audiences of families, consumers, providers, researchers, policy-makers, and managed care organizations to improve rehabilitative services to this population in order to enhance their quality of life and that of their families. The RRTC is run by the Georgetown University Center for Child and Human Development in collaboration with Brandeis University’s Heller School, the University of Florida’s Institute of Child Health Policy, and Family Voices.
Rehabilitation Research and Training Centers (RRTCs)  
District of Columbia

Access to Rehabilitation and Empowerment Opportunities for Minority Persons with Disabilities

Howard University  
2900 Van Ness Street Northwest  
Holy Cross, Room 100  
Washington, DC 20008  
swalker@howard.edu  
http://www.law.howard.edu/HURTC/HURTC.html

Principal Investigator: Sylvia Walker, EdD  
Public Contact: 202/806-8086; Fax: 202/806-8148

Project Number: H133B000903  
Start Date: October 1, 2000  
Length: 60 months  
NIDRR Officer: Delores Watkins  
NIDRR Funding: FY 00 $600,000; FY 01 $600,000; FY 02 $600,000

Abstract: The Howard University Research and Training Center for Access to Rehabilitation and Empowerment Opportunity (HURTC) is implementing a RRTC on Access to Rehabilitation and Empowerment Opportunities for Minority Persons with Disabilities to help them achieve self-determination, economic independence, and full participation in American life. The program of the Center is designed to attain the following objectives: identify methodological problems determining the rehabilitation needs of persons with disabilities from minority backgrounds (including sub-populations within these groups) and propose strategies to address these methodological problems; based on research findings, identify implications for rehabilitation research, training, policy development, and services; assess the outcomes of rehabilitation for persons with disabilities from minority backgrounds as measured by two or more variables (such as functional abilities, wellness, employment, health/wellness, and psychosocial status); analyze the effects of minority status on rehabilitation outcomes; and identify, develop, and evaluate rehabilitation methodologies, models, and interventions for specific minority groups. The HURTC collaborates with the Center for Disease Control, the Center for Minority Health, and a variety of stakeholders including consumers with disabilities, state agencies, continuing education programs, and community-based organizations.
Rehabilitation Research and Training Centers (RRTCs)
Illinois

Rehabilitation Research and Training Center on Stroke Rehabilitation

Rehabilitation Institute Research Corporation
345 East Superior Street
Chicago, IL 60611
http://www.rrtc-stroke.org/

Principal Investigator: Elliot J. Roth, MD, 312/238-4637
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Project Number: H133B980021
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $800,000; FY 99 $800,000; FY 00 $800,000; FY 01 $800,000; FY 02 $800,000

Abstract: This project tests the effectiveness of several stroke rehabilitation strategies and tactics, trains stroke survivors and professionals, and disseminates knowledge relevant to stroke care. In order to extend the knowledge base of stroke rehabilitation, produce changes in clinical practice, and enhance the quality of life of stroke survivors and their families, the Center: (1) identifies, develops, and evaluates rehabilitation techniques in order to address coexisting and secondary conditions and improve outcomes for all stroke patients; (2) develops and evaluates standard aerobic exercise protocols; (3) identifies and evaluates methods to identify and treat depression and other psychological problems associated with stroke; (4) determines the effectiveness of stroke prevention education provided in a medical rehabilitation setting; (5) evaluates the impact of changes in diagnosis and medical treatment of stroke on rehabilitation needs; (6) evaluates long-range outcomes for stroke rehabilitation across different treatment settings; (7) evaluates the impact of stroke practice guidelines on delivery and outcomes of rehabilitation services; (8) provides training on new approaches, innovations, and the specialized principles and practices of rehabilitation care of individuals with stroke; (9) provides applied research experience and training in research principles and methods; (10) disseminates information of new developments in the area of stroke care and research to people with stroke and their families, rehabilitation professionals, and service providers; and (11) conducts a state-of-the-science conference. The Center has a large database of information regarding stroke rehabilitation patients and continues ongoing systems and activities to collect and analyze data concerning stroke impairment, disability, and social functioning. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Missouri Arthritis Rehabilitation Research and Training Center
(MARRTC)

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Principal Investigator: Jerry C. Parker, PhD, 573/884-1499
Public Contact: Valerie Baker, 573/884-1499; Fax: 573/884-3020

Project Number: H133B980022
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 98 $800,000; FY 99 $800,000; FY 00 $800,000; FY 01 $800,000; FY 02 $800,000

Abstract: MARRTC helps to prevent and manage disability in people with arthritis and related musculoskeletal disease by providing leadership at the national level through three strategies: (1) MARRTC conducts state-of-the-art rehabilitation and health services research that addresses the needs of people with arthritis and related musculoskeletal diseases in the following areas: exercise and fitness, interventions for psychological well-being and pain, job accommodations and employment, and health and wellness using participatory action research (PAR) strategies to emphasize the inclusion of consumers in all phases of the research process; (2) MARRTC provides training for physicians and other health care professionals in the rehabilitative aspects of rheumatologic practice, including university-based programs, national presentations, research capacity-building, and publications aimed at improving clinical skills; and (3) MARRTC disseminates rehabilitation research and technology transfer for the empowerment of people with arthritis to help them to minimize disability, maintain employment, and improve functional status.
Rehabilitation Research and Training Centers (RRTCs)
Oregon

Rehabilitation Research and Training Center: Health and Wellness Consortium

Oregon Health and Science University
Oregon Institute on Disability and Development
Child Development and Rehabilitation Center
707 Southwest Gaines
P.O. Box 574
Portland, OR 97207-0574
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Principal Investigator: Gloria Krahn, PhD, 503/494-8364
Public Contact: Carla Culley, Project Coordinator, 503/494-9557; Fax: 503/494-6868

Project Number: H133B990019
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000
Abstract: The Center has a comprehensive program of research, training, technical assistance, and dissemination with primary attention given to the physical and mental aspects of health for people with long-lasting disabilities such as cerebral palsy, SCI, multiple sclerosis, amputation, and post-polio. Interconnected research areas include evaluating health assessment definitions, practices, policies, and measurement, and their impact on health promotion and investigating the relationship between selected health maintenance strategies and the incidence and severity of secondary conditions and other functional outcomes. Center projects examine the practices of exemplary generic and specialized health promotion programs; analyze the health behaviors and related functional outcomes of individuals with disabilities; examine the relationship between health definitions, practices, and secondary conditions to develop a screening tool for health and wellness for people with disabilities; and investigate the association between disability and differential detection of cancer. The Center’s third area of focus centers on identifying and evaluating best practices in health promotion. These include an Internet-delivered reproductive health promotion package, strategies for enhancing the participation of individuals with disabilities in self-directed physical activity, the accessibility of alcohol and drug treatment programs to people with disabilities, and methods for culturally responsive health promotion. An additional research focus is the use and efficacy of complimentary alternative medicine among people with these specific long-term disabilities.
Rehabilitation Research and Training Centers (RRTCs)  
Texas  

Rehabilitation Research and Training Center on Rehabilitation Interventions Following Traumatic Brain Injury  

The Institute for Rehabilitation and Research (TIRR)  
Brain Injury Research Center  
1333 Moursund Avenue  
Houston, TX 77030-3498  
whigh@bcm.tmc.edu  
http://www.braininjuryresearch.org  

Principal Investigator: Walter M. High Jr., PhD  
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Project Number: H133B990014  
Start Date: September 1, 1999  
Length: 60 months  
NIDRR Officer: Kristi E. Wilson, PhD  
NIDRR Funding: FY 99 $650,000; FY 00 $650,000; FY 01 $650,000; FY 02 $650,000  

Abstract: The Center promotes the scientific advancement of rehabilitation research by focusing on several areas identified as needing further research. These include areas of weakness in the current knowledge and future research regarding TBI recovery and rehabilitation effectiveness: improvement of the diagnosis and treatment of persons with mild TBI; development of interventions to assist school-age children with TBI; the needs of minority groups members with TBI; evaluation of the effectiveness of rehabilitation interventions; and treatment for the family members of people with TBI. Activities include publishing an informational and technical assistance resource for consumers and professionals; training for medical and neuropsychological fellows in rehabilitation research; coordinating a state-of-the-science conference on mild TBI; and producing an educational videotape to train family members in effective coping skills. Through representation on the advisory committees, consumers are involved in all aspects of planning and evaluating research and training activities.
Multiple Sclerosis Rehabilitation Research and Training Center

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Department of Rehabilitation Medicine
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Seattle, WA 98195-6490
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http://www.msrrtc.washington.edu

Principal Investigator: George H. Kraft, MD, 206/543-7272
Public Contact: Carolyne Dollar, 206/221-5302; Fax: 206/685-3244

Project Number: H133B980017
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $691,314; FY 99 $697,978; FY 00 $697,978; FY 01 $695,684; FY 02 $696,257

Abstract: This Center promotes health and wellness of people with multiple sclerosis (MS) and improves their functioning and employment status. Fundamental to the project is a health survey administered to people with MS throughout the Northwest region. Information from the survey is fed into six project components: (1) promoting wellness among people with MS through brief counseling methods; (2) improving the functioning of people with MS through three studies: improving psychological distress using pharmacological intervention, evaluating the combined effect of cooling and exercise on performance, and improving function through cognitive rehabilitation interventions; (3) exploring the employment status of people with MS; (4) designing practical interventions and workplace modifications; (5) studying the interaction between aging and MS; and (6) exploring the effects of gender, culture, socioeconomic status, ethnicity, place of residence, and insurance coverage on people with MS, in regard to symptomology and response to treatments. Researchers develop and apply interventions and conduct follow-up surveys to evaluate the effectiveness of the intervention strategies. This Center collaborates with the RRTC on Substance Abuse, the RRTC on Workplace Supports, the Consortium of MS Centers, the National MS Society, and the MS Association of King County.
Lifetime Outcomes and Needs: Refining the Understanding of Aging with Spinal Cord Injury

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Principal Investigator: Daniel P. Lammertse, MD, 303/789-8220
Public Contact: Susan Charlifue, 303/789-8306; Fax: 303/789-8441

Project Number: H133A011108
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $350,000; FY 02 $350,000
Abstract: This project explores the incidence and prevalence of several health and psychosocial conditions that accompany living many years with SCI. Also studied in this comprehensive, longitudinal, multicenter effort are the services available to individuals with SCI as they attempt to address these conditions throughout their lives. The study expands the longitudinal database, addressing emerging issues of aging with SCI in greater detail, and expands efforts to share findings with a variety of constituents. The eight areas of focus include: (1) secondary conditions from five to 25 years post-injury, (2) new analytic techniques with longitudinal datasets, (3) chronic pain, (4) access to and satisfaction with health services, (5) personal assistance services, (6) spirituality and its effects on health outcomes and quality of life, (7) the role of perceived stress and self-reported problems on the presence or absence of secondary conditions and in relation to one’s overall well-being, and (8) trends in quality of life and health. This longitudinal study builds on two previous data collection points. It includes a broad, comprehensive examination of secondary conditions, both physical and psychosocial, and several new areas of inquiry investigated in-depth.
Pharmacological Management of Dyslipidemia and Cardiovascular Disease in Persons with Chronic Cervical SCI: A Multicenter Collaborative Trial

University of Miami
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Principal Investigator: Mark S. Nash, PhD, 305/243-3628
Public Contact: Maria Amadore, Directory of Education, Miami Project to Cure Paralysis, 305/243-7108

Project Number: H133A011115
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 01 $344,023; FY 02 $340,953

Abstract: This project researches strategies that reduce cardiovascular disease risks after onset of tetraplegia by increasing high-density lipoprotein cholesterol (HDL-C) levels. The research examines the ability of a pharmaceutical therapy to improve the lipid profiles and forestall cardiovascular disease progression in persons with tetraplegia. Previous research on persons without SCI has shown extended-release niacin effective for elevating HDL-C, lowering total cholesterol, lowering low-density lipoprotein cholesterol (LDL-C), lowering triglycerides, slowing cardiovascular disease progression, and reducing cardiovascular morbidity and mortality. The ability of this drug to improve lipid profiles has never been examined in persons with tetraplegia, although drug benefits similar to those reported in persons without SCI would be of great health benefit to those with tetraplegia.
Access to Health Care Services for Persons with Disabilities: Defining the Barriers and Strategies for Change

Health and Disability Working Group
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http://www.hdwg.org

Principal Investigator: Mari-Lynn Drainoni, PhD
Public Contact: 617/426-4447; Fax: 617/426-4547

Project Number: H133A990014
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $245,434; FY 00 $245,434; FY 01 $246,676; FY 02 $250,000
Abstract: This project examines a wide range of access barriers to the continuum of health care services for people with disabilities across the life span in Massachusetts. Project objectives include: (1) to examine variation in access to health care services by provider type; (2) to examine different types of access important for people with disabilities: physical access, communication access, cognitive access, and medical access; (3) to identify changes made since the passage of the ADA; (4) to identify barriers to health care services as experienced by individuals with disabilities and compare this experience with provider perceptions; (5) to identify best practices that mitigate access barriers; (6) to develop a research agenda for future activities in this area; and (7) to develop dissemination products that advance both knowledge and practice among purchasers, regulators, health plans, providers, and people with disabilities. The project examines the accessibility of a range of health care providers, including outpatient clinics, hospital outpatient departments, mental health and substance abuse treatment providers, dentists’ offices, hospitals, rehabilitation facilities, acute detoxification facilities, and assisted living facilities.
The Spauldings/Partners TBI Model System at Harvard Medical School

Spaulding Rehabilitation Hospital
125 Nashua Street
Boston, MA 02114
toneilpi@lynx.dac.neu.edu
http://spauldingrehab.org/home/ed_research/index.htm

Principal Investigator: Mel B. Glenn, MD, 617/573-2625
Public Contact: Therese O’Neil-Pirozzi, ScD, 617/573-2456; Fax: 617/573-2469

Project Number: H133A020513
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $365,000

Abstract: The Spaulding TBI Model Systems (TBIMS) provides a comprehensive spectrum of care for people with TBI through the collaborative efforts of three hospitals that are part of Partners Health Care System, Inc. and four organizations that operate a variety of postacute rehabilitation programs. Research at the center includes development of functional neuroimaging as a tool to guide cognitive rehabilitation treatment for people with TBI, and use of functional magnetic resonance imaging (fMRI), with both a cross-sectional and longitudinal component. The cross-sectional component assesses regional brain activation during the memorization of word lists, both under undirected (spontaneous) conditions and following training and cueing to use a categorization strategy. The longitudinal component studies the ability of the fMRI findings to predict outcome among people with TBI who participate in community integration program with a cognitive rehabilitation focus.
Disability and Rehabilitation Research Projects
Mississippi

Collaborative Study of Impaired Self-Awareness After Traumatic Brain Injury

Methodist Rehabilitation Center
Brain Injury Program
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http://www.mmrcrehab.org

Principal Investigator: Mark Sherer, PhD
Public Contact: 601/364-3448; Fax: 601/364-3452

Project Number: H133A980067
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 98 $140,108; FY 99 $140,108; FY 00 $140,108; FY 01 $140,108; FY 02 (No-cost extension through 3/30/2003)

Abstract: This project creates new knowledge on impaired self-awareness (ISA) in people with moderate to severe TBI. ISA interferes with effective delivery of rehabilitation services, prevents self-advocacy, leads to distress within the family system, and negatively affects social outcomes. This project studies its impacts and its subjective meaning for consumers in order to design new treatments and service delivery innovations. It conducts the first large-scale (N=160), prospective longitudinal study of ISA’s neural substrates, neuropsychological features, natural history, and relationship to functional and quality-of-life outcomes over the first year following moderate-to-severe TBI. With several methodological innovations that improve interpretation of the quantitative data, project researchers provide the first systematic qualitative study of self-awareness from the perspective of people with TBI and their families. The project uses: (1) the expertise of researchers involved in TBI outcomes research, (2) many data elements already captured in the Model System database and supported by Model System infrastructure, and (3) the high volume of subjects and excellence of resources jointly available at the two collaborating sites. The project is a collaboration between the TBI Model System of Mississippi and the TBI Model System at MossRehab in Philadelphia. Findings are disseminated to consumers, rehabilitation professionals, and the TBI Model Systems nationwide.
JFK-Johnson Rehabilitation Institute TBI Model System

JFK Johnson Rehabilitation Institute
2048 Oak Tree Road
Edison, NJ 08820
kcicerone@solarishs.org

Principal Investigator: Keith D. Cicerone, PhD
Public Contact: 732/906-2640; Fax: 732/906-9241

Project Number: H133A020518
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $365,000

Abstract: This project implements and evaluates innovative rehabilitation interventions that address the spectrum of severity and needs of persons with TBI. The first research study investigates the relationship between neurobehavioral (i.e., standardized rating scale) and neurophysiologic (i.e., fMRI data) indices of brain function in persons with traumatic minimally conscious state (MCS). The second study addresses current clinical and methodological concerns over the effectiveness of cognitive rehabilitation on cognitive functioning, community integration and social participation, return to school and work, and quality of life after traumatic brain injury. The third study uses qualitative inquiry to describe the quality of life after TBI from the perspective of persons at various stages after their injuries. These findings are triangulated with quantitative indices of community integration and satisfaction with functioning, which should provide a richer and more authentic understanding of what it takes to live a fulfilling life after traumatic brain injury.
Ohio Regional TBI Model System

Ohio Valley Center for Brain Injury Prevention and Rehabilitation
Department of Physical Medicine and Rehabilitation
Ohio State University
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480 West Ninth Avenue
Columbus, OH 43210
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http://www.ohiovalley.org

Principal Investigator: John D. Corrigan, PhD, 614/293-3830
Public Contact: Gary Lamb-Hart, 614/293-3802; Fax: 614/293-8886

Project Number: H133A020503
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $365,000

Abstract: This model system includes two local research projects on substance abuse and persons with TBI. Study 1 is a randomized clinical trial testing interventions to promote retention in substance abuse treatment. This study employs intervention strategies found effective for clients with TBI when first engaging with a treatment program. Study 2 tests the concurrent validity of an instrument that documents the extent of a person’s prior history of TBI objectively. This instrument is intended for research on TBI as a mediating factor in substance abuse treatment. This model system utilizes innovative community integration programs: Team Brain Injury (follow-up case management), the TBI Network (substance abuse treatment), and Community Capacity Building (education and advocacy operated in conjunction with the Brain Injury Association of Ohio).
Treatment of Shoulder Dysfunction in Polio Survivors and Elderly Adults with Lower Extremity Impairment

MossRehab
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mklein@einstein.edu

Principal Investigator: Mary G. Klein, PhD
Public Contact: 215/456-7864; Fax: 215/456-5926

Project Number: H133A000101
Start Date: July 1, 2000
Length: 24 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 00 $233,074; FY 01 $229,424; FY 02 (No-cost extension through 6/30/2003)
Abstract: This project demonstrates how a well-structured exercise program can help to alleviate shoulder symptoms in polio survivors. Research is needed to determine the effectiveness of treatment modalities, such as exercise, on shoulder overuse disorders in polio survivors and other populations with lower extremity impairments. Previous research has determined that shoulder pain is one of the most frequent overuse symptoms seen among post-polio survivors. Additionally, elderly adults who have lower extremity impairments, but no history of polio, also develop overuse symptoms. This research uses a predictive model of shoulder pain that demonstrated that lower extremity weakness and weight were associated with the presence of shoulder overuse symptoms, thus suggesting that these symptoms may arise from use of the upper extremities to compensate for lower extremity weakness during transfers, stair climbing, and other activities. Exercise training is a potential means of reducing the burden of both primary and secondary impairments in post-polio and elderly populations with significant lower extremity weakness, and an effective treatment for improving function and quality of life. Other populations with lower extremity weakness who may benefit from this research include those with muscular sclerosis or incomplete spinal cord injuries.
Disability and Rehabilitation Research Projects
Pennsylvania

Collaboration of Upper Limb Pain in Spinal Cord Injury

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Principal Investigator: Michael L. Boninger, MD
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Project Number: H133A011107
Start Date: December 1, 2001
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $349,998; FY 02 $349,950

Abstract: This collaborative studies project provides an opportunity to gain further insight into the cause and prevention of upper limb repetitive strain injuries in SCI. For the approximately 200,000 individuals with SCI, upper limb pain and injury is very common; some studies find prevalence rates above 70 percent. Prolonged wheelchair use and transfers have long been thought to cause these repetitive strain injuries. The consequences of upper limb pain are so significant that some researchers have suggested that damage to the upper arm may be functionally and economically equivalent to a spinal cord injury of higher neurological level. This collaboration includes the University of Pittsburgh Medical Center Spinal Cord Injury project, the Northern New Jersey Spinal Cord Injury System (NNJSCIS), and the Northwest Regional Spinal Cord Injury System (NWRSCIS).
Health and Function

Model Burn Injury Systems
Colorado

UCHSC Burn Model System Data Coordination Center (BMS/DCC)

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Department of Preventive Medicine and Biometrics
4200 East Ninth Avenue, Box B119
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Principal Investigator: Dennis C. Lezotte, PhD, 303/315-6873
Public Contact: Rebecca Sloan, Database Administrator, 303/315-0320; Fax: 303/315-3183

Project Number: H133A020402
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $249,997

Abstract: The BMS/DCC establishes a data management and analytical support facility for Burn Model Systems clinical and outcomes research projects. Objectives include: (1) to serve the clinical, research, and public communities to which it is responsible; (2) to serve the needs of good scientific procedure in multi-institutional outcomes research; and (3) to support the needs for patient safety and data confidentiality as required by Federal regulations when conducting collaborative clinical studies. The BMS Project is structured as a set of interacting, observational, randomized, and quasi-experimental clinical studies run at different centers that share the common purpose of acquiring and disseminating knowledge about burn injury care and rehabilitation. The project offers support in four important areas: project management, data management, analytical support, and dissemination. Support is provided in developing appropriate integrated systems to affect national data collection, project management, data coordination, technical support, collaborative clinical projects, scientific conduct, scientific publication, and effective dissemination. The UCHSC BMS/DCC continues to accumulate and integrate a central repository of data from the Model Systems to enhance their abilities to make sentinel statements and change the way burn injury rehabilitation is done. While the main function of the DCC is to integrate and manage these data, it also needs to be responsive to the technical and analytical needs of these individual clinical centers. In addition the DCC provides and coordinates statistical support among the clinical and statistical groups from each Burn Center and is prepared to expand this support, adding several new protocols and/or clinical studies where appropriate.
Model Burn Injury Systems
Maryland

**Johns Hopkins University Burn Injury Rehabilitation Model System (JHU-BIRMS)**

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**Project Number:** H133A020101
**Start Date:** October 1, 2002
**Length:** 60 months
**NIDRR Officer:** Theresa San Agustin, MD
**NIDRR Funding:** FY 02 $298,928

**Abstract:** This project tests interventions targeting three common postburn secondary complications affecting health and function: generalized deconditioning, muscle atrophy, and acute stress disorder. Testing the effectiveness of these interventions holds promise for improving the health and function of burn survivors as well as enhancing their options for workplace and community reintegration. The JHU-BIRMS includes several projects: (1) testing the efficacy of its augmented exercise program in rehabilitating people with generalized deconditioning, (2) testing the efficacy of enhanced cognitive-behavioral therapy in treating individuals with acute stress disorder and preventing the development of chronic posttraumatic stress disorder, (3) developing a new measure that quantifies the degree of social stigmatization experienced by burn survivors and its impact on emotional adjustment and integration into the workplace and the community (this project involves the Phoenix Society, the largest foundation supporting burn survivors and their significant others), (4) a collaborative effort with the University of Washington on a workplace integration study identifying and quantifying those factors interfering with early and complete return to work, and (5) a collaborative study on health and function with the University of Texas.
Model Burn Injury Systems
Texas

North Texas Burn Rehabilitation Model System (NTBRMS)

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Project Number: H133A020104
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $300,000
Abstract: This project conducts five research projects, two collaborative and three site-specific: (1) barriers to return-to-work following major burn injury; (2) long-term outcome following major burn injury; (3) outcome following deep, full-thickness hand burns; (4) the evolution over time of burn-associated neuropathy; and (5) the socioeconomic determinants of disability in individuals with burn injury. The North Texas Burn Rehabilitation Model System (NTBRMS) is a collaboration of Parkland Health and Hospital System (PHHS) and the University of Texas, Southwestern Medical Center (UTSW). Collaboration occurs on many levels at the NTBRMS. Clinical collaboration is the hallmark of the burn team, which includes individuals from several institutions who work together seamlessly, as well as collaboration with rural care providers through rural clinics and a biannual seminar. Research collaboration occurs locally with the surgeons and academic computing staff, and nationally with the other model systems.
Pediatric Burn Injury Rehabilitation Model System

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Project Number: H133A020102
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $300,000

Abstract: This program conducts independent and multi-center projects focusing on evaluating and improving the rehabilitation provided to the burned child, striving to decrease disability and improve reintegration into society. The project continues longitudinal assessments of patients, expanding the database that includes measures of cardiopulmonary function, physical growth and maturation, bone density, range of motion, activities of daily living, scar formation, reconstructive needs, and measures of psychosocial adjustment. This data is used to identify areas that require improvement and provide functional outcome measures that can be used in the evaluation of treatment methods.

Research activities include: (1) a multi-center project assessing the efficacy of the long-term administration of oxandrolone in the treatment of burn injury with endpoints of improved strength, lean body mass, bone density, and growth; (2) improving rehabilitative outcomes for children by instituting and evaluating major modifications to current treatment for children with large burns; (3) evaluating the use of pressure garments in controlling scar following burn injury; (4) a multi-center study evaluating the relationship between treatment, injury, patient characteristics, and patient outcome in those patients sustaining full thickness hand burns; and (5) evaluating acute stress disorder and posttraumatic stress disorder, including its occurrence, predictive elements, and efficacy of treatment.
Model Burn Injury Systems
Washington

University of Washington Burn Injury Rehabilitation Model System

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Project Number: H133A020103
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $300,000

Abstract: This model system conducts five research projects: (1) A New Approach to the Etiology of Hypertrophic Scarring: develops an increased understanding of hypertrophic scarring. (2) Effect of Virtual Reality on Active Range-of-Motion During Physical Therapy: uses distraction via immersive virtual reality as an adjunctive non-pharmacologic analgesic. This study tests the hypothesis that virtual reality allows patients to tolerate greater stretching during physical therapy compared to no distraction, and that in spite of achieving greater range-of-motion, patients still experience lower pain levels while in virtual reality. (3) Determination of Reasons for Distress in Burn-Injured Adults: identifies reasons behind a burn survivor’s distress at various time-points after hospital discharge. (4) Barriers for Return to Work: identifies specific barriers to return to work for burn survivors. (5) Acute Stress Disorder Among Burn Survivors: evaluates the effectiveness of cognitive-behavioral therapy, relative to a non-directive, supportive therapy control group, and a national comparison sample in reducing the prevalence of post-traumatic stress disorder diagnosis and symptom severity. Projects 4 and 5 are collaborative. In addition this project participates in the national database.
UAB Model Spinal Cord Injury Care System

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Project Number: H133N000016
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 00 $340,000; FY 01 $340,000; FY 02 $340,000

Abstract: The purpose of the University of Alabama at Birmingham (UAB) Spinal Cord Injury Care System (UAB-SCICS) program is to provide cutting edge, cost effective, comprehensive care from the moment of injury across the life span for persons who incur a SCI; to investigate ways of improving aspects of that system of care through clinical research; and to disseminate project research findings to persons with SCI, their family members, and professional care providers. UAB-SCICS includes two research projects: (1) investigating musculoskeletal/spine changes in postmenopausal women with SCI; and (2) completing a longitudinal investigation of the processes involved in coming to terms with disability over the first year post-injury. UAB-SCICS maintains linkages with emergency medical service agencies throughout the state, with state and local VR and long-term follow-up programs, with clinically oriented research activities within the UAB-SCICS itself; with UAB’s companion Medical RRTC on Secondary Conditions of SCI, as well as with clinical research programs being conducted at other Model SCI Systems. The UAB-SCICS currently maintains the National Spinal Cord Injury Statistical Center.
Regional Spinal Cord Injury Care System of Southern California

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Project Number: H133N000029
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 00 $345,000; FY 01 $345,000; FY 02 $345,000

Abstract: The Regional Spinal Cord Injury Care System of Southern California’s primary mission is to collect initial and follow-up data on persons who have sustained spinal cord injuries and submit it to the national statistics database at the University of Alabama at Birmingham. Another component of the project focuses on literacy in individuals with SCI. Also, the project identifies, evaluates, and eliminates environmental barriers, particularly cultural and social barriers, to enable people with SCI to reintegrate fully into their community, and thus improve their lives. The project has been designed to meet the needs of the approximately 75 percent minority and underserved populations that comprise its clientele, and has samples sufficient for achieving adequate statistical power in the relevant designs and producing meaningful research. Finally, the System contributes new and useful information to the current collection of SCI literature. This project contributes to the national statistics database at the University of Alabama at Birmingham.
Model Spinal Cord Injury Systems
California

Model Spinal Cord Injury System

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Project Number: H133N000007
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $340,000; FY 01 $340,000; FY 02 $340,000
Abstract: The system of care at the Santa Clara Valley Medical Center (SCVMC) that extends from the scene of the accident to community reintegration has been developed through a program encompassing services, teaching and demonstration, and clinical research activities in its northern and central California and Nevada catchment area. This effort continues to include community agency staff and consumers and has produced a network of services addressing the needs of individuals with SCI. Based on input from consumers and their family members, community organizations, rehabilitation health professionals, and the rehabilitation literature, the research program studies: (1) the efficacy of peer support, both group and one-on-one mentoring, to improve quality of life, physical and psychosocial status, and community participation and integration; (2) if a regular exercise program can improve the above mentioned community outcomes; (3) the effect of high personal attendant turnover on the above mentioned variables and whether an intervention can decrease that turnover and improve outcomes; and (4) the provision of SCI-specific education and whether improving knowledge improves outcomes. This project contributes to the national statistics database at the University of Alabama at Birmingham.
The Rocky Mountain Regional Spinal Injury System

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Project Number: H133N000001
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $375,000; FY 01 $375,000; FY 02 $375,000

Abstract: The Rocky Mountain Regional Spinal Injury System (RMRSIS) emphasizes research and significant contributions that have been made in the areas of SCI costs of care, aging, outcome assessment, high tetraplegia, neurorehabilitative surgery, and program evaluation, as well as participation in randomized controlled multicenter clinical trials. An integrated research agenda includes a controlled clinical trial of therapy for shoulder pain and evaluations of longitudinal outcomes of surgery for spinal cord myelopathies, recovery from pressure sore surgery, perimenopausal symptoms and treatments in women with SCI, the issues of women who provide assistance to a partner with SCI, and the impact of environmental barriers on the full participation in of people with SCI. The project includes two highly regarded Level I trauma centers with specialized acute neurotrauma care facilities (St. Anthony Hospital and Swedish Medical Center) and the rehabilitation and lifetime follow-up services of Craig Hospital. These facilities bring together a full complement of disciplines and specialists, medically directed by six full-time physicians specializing in SCI acute and rehabilitation management, to provide all components of a Model System of care. This project contributes to the national statistics database at the University of Alabama at Birmingham.
South Florida Regional Spinal Cord Injury Model System

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Project Number: H133N000017
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 00 $375,000; FY 01 $320,000; FY 02 $320,000

Abstract: The South Florida Spinal Cord Injury System (SFSCIS) is a cooperative effort between the University of Miami School of Medicine, The Miami Project to Cure Paralysis, Jackson Memorial Hospital, and the Miami VA Medical Center. The SFSCIS is a multidisciplinary system of care providing comprehensive rehabilitation services specifically designed to meet the special needs of individuals with spinal cord injuries. The clinical components of the SFSCIS include emergency medical services, acute care, vocational and other rehabilitation services, community and job placement, and long-term community follow-up and health maintenance. A comprehensive prevention program is included in the program. A significant and substantial research program focuses on the maintenance of health and function; three clinical trials and five major research projects are included. Each of these projects centers on studying interventions to improve outcomes in the preservation or restoration of function following SCI. In addition to these research projects, this project contributes to the National Spinal Cord Injury Database. A program designed for widespread dissemination of research and demonstration findings is included. In addition, culturally appropriate methods of education, training, and outreach are interwoven throughout the projects. Finally, the program includes a comprehensive evaluation program.
Model Spinal Cord Injury Systems
Georgia

Georgia Regional Spinal Cord Injury Care System

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Project Number: H133N000005
Start Date: September 30, 2000
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $374,992; FY 01 $374,992; FY 02 $374,992

Abstract: The Georgia Regional Spinal Cord Injury Care System admits approximately 200 individuals annually with acute onset paralysis secondary to spinal cord injury, and collects post-discharge data on 600 individuals each year. Its patient population comes primarily from Georgia, the rest of the Southeast, and the Eastern Seaboard. The continuum of care begins at injury and continues through transport, assessment, acute care, rehabilitation, emotional adjustment, community reintegration, and lifetime follow-up. The program is involved with site-specific research projects on incomplete spinal cord injuries, enhanced long distance technological communications with patients, and the determination of early predictors of secondary complications. As part of the clinical research activity sponsored by the facility’s Crawford Research Institute, the program is responsible for ongoing referrals of acutely injured individuals, as well as long-term follow-up and data collection. This project contributes to the national Model Spinal Cord Injury System (SCIS) national database at the University of Alabama at Birmingham.
The New England Regional Spinal Cord Injury Center

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Project Number: H133N000024
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $374,514; FY 01 $300,000; FY 02 $300,000

Abstract: The principal goals of the New England Regional Spinal Cord Injury Center (NERSCIC) are to identify interventions with a high likelihood of promoting employment and reemployment and to evaluate, systematically and scientifically, the efficacy of these strategies. The outcome is a regional clinical and research capacity designed to meet the needs of people with SCI, their employers and prospective employers, and the needs of people who provide their care. The Model SCI System includes ten research projects: (1) a pilot study on the effects of Internet access upon the health and social interactions of people with SCI; (2) a study of building accessibility in eastern Massachusetts; (3) a study of “way-finding” as confronting environment barriers and facilities; (4) a return to work of twenty people with SCI; (5) a study of freehand; (6) secondary data analysis of the inter-relationship among catheterization, smoking, and bladder cancer; (7) an insurance study identifying incentives and disincentives to work; (8) a study of the effects of health and fitness on secondary conditions to initiating or continuing paid employment; (9) the child care and dependent care needs of adults with disabilities and the effects of employment upon their children and other dependents; and (10) a secondary analysis of Veterans with SCI. This project contributes to the national statistics database at the University of Alabama at Birmingham.
University of Michigan Model Spinal Cord Injury Care System

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Project Number: H133N000009
Start Date: November 1, 2000
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $320,000; FY 01 $320,000; FY 02 $320,000

Abstract: The University of Michigan Model Spinal Cord Injury Care System provides comprehensive care and services to both children and adults, and is the only facility in Michigan to care for ventilator-dependent persons of all ages with SCI. The project objectives are to: (1) provide a continuum of comprehensive, multidisciplinary services for persons with SCI, from emergency medical services to long-term community follow-up, with a focus upon maintaining health; (2) demonstrate the effects of the continuum of comprehensive services, focusing on its efficacy in promoting employment, health maintenance and wellness, independent living, and community reintegration; (3) conduct significant research, using a participatory action research approach involving consumer input from inception through implementation; (4) operate an efficient service system; and (5) develop and demonstrate methods of community outreach and education in collaboration with the Ann Arbor Center for Independent Living (AACIL) to reach professionals, consumers, and their families in other rehabilitation facilities and Centers for Independent Living (CILs) in Michigan. These objectives emphasize community reintegration as a key outcome. The Model System is in collaboration with the AACIL, with the goal of promoting community reintegration. This partnership ensures a coordinated approach to clinical care, training, and research that integrates consumer empowerment with comprehensive lifelong follow-up, bringing a consumer-professional synergy to the project that serves as an example for other Model SCI Systems. This project contributes to the national statistics database at the University of Alabama at Birmingham.
The Missouri Model Spinal Cord Injury System (MOMSCIS) is committed to developing, implementing, and evaluating innovative research that promotes independent living and community integration among persons with spinal cord dysfunction. The two studies focus on the effect of a consumer-directed personal assistance services training intervention on consumer satisfaction, independent living, and community integration. The purpose of Study 1 is to develop, implement, and evaluate the in-person Individualized Management of Personal Assistant/Consumer Teams (IMPACT) workshop. The purpose of Study 2 is to assess whether this workshop can be implemented as effectively via video teleconferencing as in person, thereby increasing dramatically its dissemination potential. The objectives of the studies are: (1) to determine the effect of the IMPACT workshop on consumer satisfaction, the incidence of secondary conditions, activity, and participation (as defined by the ICIDH-2); (2) to determine the effect of the IMPACT workshop on personal assistant’s job satisfaction, job stress, and attrition; (3) to test for differences in outcomes between the participants who attended the workshop in-person and those who attend the workshop via video teleconferencing; and (4) to develop, evaluate, and refine a web version of the interactive IMPACT workshop. Data from this research provides valuable information for future studies seeking to document changes in personal independence and community integration. This project contributes to the national statistics database at the University of Alabama at Birmingham.
Northern New Jersey Spinal Cord Injury System

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Project Number: H133N000022
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $345,000; FY 01 $344,724; FY 02 $345,000

Abstract: The Northern New Jersey Spinal Cord Injury System (NNJSCIS) attempts to improve outcomes for persons with SCI through novel interventions and expanded service delivery options. The NNJSCIS is composed of Kessler Medical Rehabilitation Research and Education Corporation, Kessler Institute for Rehabilitation, and University of Medicine and Dentistry of New Jersey-University Hospital. The NNJSCIS has an interdisciplinary system of rehabilitation care specifically designed to meet the needs of individuals with SCI. It includes emergency medical services; acute care; psychological, social, and vocational services; peer support; independent living services; community and job placement, long-term community follow-up; and health maintenance. Some of the research and demonstration projects target three of the most common secondary conditions (pressure ulcers, shoulder pain, and urinary tract infections). Other studies promote wellness by reducing obesity, examine the relation between health literacy and outcomes, and identify risk factors and prevent potential problems. One project operationalizes the newly developed Clinical Practice Guidelines. The NNJSCIS contributes to the National Statistics Data Center.
Abstract: The Mount Sinai Spinal Cord Injury Model System (MS-SCI-MS) of the Department of Rehabilitation Medicine of Sinai Hospital (MSH) and the Mount Sinai School of Medicine (MSSM) in New York City provides comprehensive care to meet the diverse needs of persons with SCI in its catchment area. There are four components of the system: (1) comprehensive clinical care; (2) research (both center-specific research and contributions to the national statistics database); (3) dissemination, education, and training; and (4) injury prevention. The comprehensive clinical program stresses interdisciplinary care, and employs a primary team model to enhance coordination among caregivers. Comprehensive outpatient rehabilitation services and long-term follow-up at MSH are also included. Rehabilitation services include an evaluation program for a high-tech wheelchair and seating system, a lower-extremity functional electrical stimulation ergometry program, psychosocial services, extensive VR services, a consumer-directed program to promote community reintegration (DO IT!), and a women’s peer group. Specialty medical and surgical services include a fertility program for males with ejaculatory dysfunction, intrathecal pumps for treatment of spasticity, upper extremity reconstruction, and cutting-edge technology. A preventive health care demonstration project for screening and early intervention of secondary medical conditions is included as a collaborative effort of the MS-SCI-MS and the Spinal Cord Damage Research Center at the Bronx Veterans Affairs Medical Center. The research program of MS-SCI-MS consists of two studies relevant to one of the most disabling secondary conditions of SCI, chronic pain: (1) meta-analyses of pain reports and pain treatments; and (2) a prospective study of pain. This project contributes to the national statistics database at the University of Alabama at Birmingham.
Model Spinal Cord Injury Systems
Pennsylvania

Demonstration of a Model Spinal Cord Injury System Center

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Project Number: H133N000023
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $370,000; FY 01 $370,000; FY 02 $370,000

Abstract: The Regional Spinal Cord Injury Center of Delaware Valley (RSCICDV) is a comprehensive program of coordinated patient care, education, and research activities. The RSCICDV: (1) conducts on-site research focusing on improved outcome measures to meet Federally established objectives; (2) refines and improves the RSCICDV’s operational services and demonstration projects; and (3) conducts four development projects including development of an SCI web site, implementation of an SCI Care Path, development of a Pressure Sore Program, and employing persons with SCI through hireAbility. The on-site research includes four experiments: (1) validation of the Walking Index of Spinal Cord Injury (WISCI) scale in a clinical setting for severity and hierarchical ranking; (2) validation of WISCI scale for elements of a disability measure for distance, speed, and endurance into WISCI levels; (3) demonstration that the WISCI scale is responsive to change in a clinical trial setting; and (4) demonstrate consumer preference for walking. The four development projects include: (1) improved access to information via the web site; (2) implementation of a critical pathway for more efficient heathcare delivery; (3) increased employment and advancement of employment through hireAbility; and (4) increased monitoring of pressure sores and strategies for prevention. This project contributes to the national statistics database at the University of Alabama at Birmingham. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
University of Pittsburgh Model Center on Spinal Cord Injury

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Abstract: The University of Pittsburgh Model Center on Spinal Cord Injury (UPMC-SCI) represents the efforts of dedicated consumers, clinicians, and researchers. The UPMC-SCI’s research focus is on innovations in AT. The research projects evaluate the impact of selected innovations in technology on service delivery and on outcomes such as function, independence, and employment. One project is addressing a shortcoming in AT research through the use of a new dynamic outcome measure developed by Professor David Gray. Researchers are also testing an innovative pushrim-activated, power-assisted wheelchair that has great potential to improve mobility for individuals with tetraplegia. An additional project is investigating the impact of a new mobility device known as IBOT, which is capable of balancing on two wheels, climbing curbs, and going over uneven terrain. This represents the first study of the IBOT in a real world environment. In addition to this research, the center provides a model of care for individuals with SCI. SCI care at the University of Pittsburgh is provided in a multidisciplinary manner with a high level of communication among the constituent services. The fully implemented system of continuity of treatment begins with the emergency response at the scene of injury and continues with comprehensive treatment and rehabilitation from medical/surgical- to acute-stage rehabilitation through utilization of AT services and VR.
Model Spinal Cord Injury Systems
Texas

Texas Model Spinal Cord Injury System

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Project Number: H133N000004
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 00 $330,000; FY 01 $330,000; FY 02 $330,000
Abstract: The Texas Model Spinal Cord Injury System (TMSCIS) provides services along the entire continuum of care from emergency medical service to long-term follow-up and management of secondary conditions. TMSCIS performs an analytic longitudinal investigation of disability models to explore and quantify the interaction among various individual and environmental variables. TMSCIS operationalizes the Institute of Medicine model disability utilizing state-of-the-art measurement techniques and comprehensive statistical approaches to test hypotheses about dynamic interrelations of persons with SCI and their environment. This investigation involves following newly injured persons with SCI for two years after injury. Measurements are taken of pre-injury life conditions, enabling processes, as well as, personal, psychological, and physical environments. This project contributes to the national statistics database at the University of Alabama at Birmingham. In addition, the project develops and tests theoretically derived structural models from the national database and other existing data sources.
Model Spinal Cord Injury Systems
Virginia

VCU Model Spinal Cord Injury Center

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Project Number: H133N000015
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 00 $310,000; FY 01 $310,000; FY 02 $310,000
Abstract: This project develops and implements a Model Spinal Cord Injury System at Virginia Commonwealth University/Medical College of Virginia (VCU/MCV), with a concentrated emphasis on employment. Researchers monitor and assess the impact of interventions, advancing technology, and policy changes on employment following SCI. Collaborating partners include VCU/MCV’s Rehabilitation Research and Training Center on Workplace Supports, the Virginia Department of Rehabilitation Services, and the other SCI Model Systems delivery of care. Additionally, the project partners with the Mid-Atlantic Paralyzed Veterans Association in several training, dissemination, and other mutual outreach activities. Research studies involve use of the national statistics database, a major employment policy study across 18 states, a major study with the Virginia Department of Rehabilitation Services on employment outcomes (e.g., earning histories), and an evaluation of technology training on employment outcomes. Involvement of SCI mentors in training new vocational mentors with SCI is also an important component of the work. This project contributes to the national statistics database at the University of Alabama at Birmingham.
Northwest Regional Spinal Cord Injury System

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http://depts.washington.edu/rehab/sci

Principal Investigator: Diana D. Cardenas, MD, 206/543-8171
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Project Number: H133N000003
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 00 $330,000; FY 01 $330,000; FY 02 $330,000

Abstract: The University of Washington’s Northwest Regional Spinal Cord Injury System (NWRSCIS) serves a critical mass of patients with SCI and has all the necessary disciplines to provide state-of-the-art medical, surgical, and rehabilitation care. NWRSCIS has four objectives: (1) examine interventions to improve outcomes in the preservation or restoration of function or the prevention and treatment of secondary conditions; (2) contribute to the national database; (3) maintain specialized clinical programs; and (4) develop and maintain education programs for consumers and families, especially for those who belong to minority and disadvantaged groups. In addition, the Center provides for the widespread dissemination of research and demonstration findings through its publications and web site. This project contributes to the national statistics database at the University of Alabama at Birmingham.
Model Traumatic Brain Injury Systems
Alabama

UAB TBI Model System

University of Alabama at Birmingham
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Principal Investigator: Thomas A. Novack, PhD
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Project Number: H133A020509
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustín, MD
NIDRR Funding: FY 02 $365,000

Abstract: This project provides a multidisciplinary system of rehabilitation care specifically designed to meet the needs of individuals with TBI, and, as demonstrated over the past four years as a TBIMS, adequately enrolls subjects to complete research projects successfully. The University of Alabama at Birmingham (UAB) is maintaining and further developing a Traumatic Brain Injury Model System (TBIMS) that improves rehabilitation services and outcomes for persons with TBI. In addition to contributing data to the TBI National Database, the UAB TBIMS conducts two research projects: (1) an examination of the use of a serotonin agonist medication (sertraline) to lessen the incidence and severity of depression during the first year of recovery following TBI. (2) a study of the impact of a training program in problems solving for caregivers.
Model Traumatic Brain Injury Systems
California

Northern California Traumatic Brain Injury Model System of Care

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Principal Investigator: Tamara Bushnik, PhD, 408/295-9896, ext. 16
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Project Number: H133A020524
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $364,038

Abstract: This project conducts two studies to better characterize the type and impact of fatigue on the TBI population: (1) a cross-sectional study of people up to ten years post-TBI and (2) a longitudinal study that focuses on the evolution of fatigue over the first two years post-injury. Both studies utilize standardized measurements of fatigue, as well as those for depression/affective disorders, sleep disturbance, activity scales, and measurements of hormone levels reflective of the health of the neuroendocrine system. Two additional studies characterize the impact of late posttraumatic seizures on recovery: (1) a study utilizing data already in the TBIMS National Database that compares the functional, vocational, and medical complication outcomes of those with and without late post-traumatic seizures; (2) a study in collaboration with Denver Hospital Medical Center that interviews individuals at both sites who participated in a previously funded NIDRR grant on seizure risk identification. This study further evaluates barriers to the environment, transportation, and challenges in control of their seizures.
The Rocky Mountain Regional Brain Injury System (RMRBIS)

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Principal Investigator: Gale G. Whiteneck, PhD, 303/789-8204
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Project Number: H133A020510
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $365,000

Abstract: The RMRBIS conducts three research projects: Study 1 examines the effects of Modafinil on fatigue and excessive sleepiness after TBI. Study 2 assesses the effectiveness of a group therapy intervention for social pragmatic communication. Study 3 uses the unique database assets of Craig Hospital and investigates the environmental and clinical factors that influence outcome over a 40 year time frame to understand the process of living and aging with a TBI. In addition to clinical research and service, Craig Hospital, as the RMRBIS, documents an outstanding record of dissemination, for all customers including clinical consumers, community agencies and advocacy groups, other clinical service centers and systems, and professionals engaged in the treatment of persons with TBI.
Model Traumatic Brain Injury Systems
Georgia

Georgia Model Brain Injury System (GAMBIS)

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Project Number: H133A980028
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $345,000; FY 99 $345,000; FY 00 $345,000; FY 01 $345,000; FY 02 (No-cost extension through 12/31/2002)

Abstract: The Georgia Model Brain Injury System (GAMBIS) has the capacity to follow approximately 45 percent of the moderate to severe brain injury cases expected annually in metropolitan Atlanta, and combines the academic resources of Emory University and the Crawford Research Institute of Shepherd Center, Inc., with the clinical resources inherent in six trauma centers, two inpatient rehabilitation programs, and multiple postacute and subacute rehabilitation pathways. Project activities include: comparisons between the efficacy, cost-effectiveness, and cost per quality-adjusted life year for patients in home-based and facility-based subacute care; outcome comparisons between TBI patients grouped by injury severity to determine optimal matches between patients and service delivery methods; the impact of violence as a cause of injury on cost and outcome within all postacute treatment pathways; studying the efficacy of telecommunications technology and a consumer-directed Clubhouse Program in supporting community and vocational reentry; and the role of traditional (e.g., injury severity, level of insurance benefits) and novel (e.g., progesterone level, apolipoprotein E genotype) predictors of outcome and subjective well-being following TBI. This project contributes to the national statistics database at the Kessler Medical Rehabilitation Research and Education Corporation.
Principal Investigator: Robin A. Hanks, PhD, 313/745-9763
Public Contact: Deborah Wood, 313/745-1188; Fax: 313/966-7502

Project Number: H133A020515
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 02 $364,996

Abstract: The SEMTBIS program conducts projects developed with the help of SEMTBIS consumers, as well as other members of the Detroit community. Three studies evaluate: (1) a peer-mentoring intervention, (2) a dynamic system of survivor and significant-other well-being, and (3) resumption of driving after brain injury. Study 1 is a randomized controlled trial of a peer-mentoring program for both survivors and their caregivers. Study 2 studies 250 community-dwelling adults with TBI and their caregivers/significant others, exploring the relationship of survivor-caregiver situations with survivor distress and family dysfunction. It also studies whether or not social support acts as a moderating influence upon the well-being of persons with TBI. Study 3 examines correlates of driving after brain injury: barriers, fitness to drive, and community rapport. Participatory action is a central component of project implementation, evaluation, and dissemination. SEMTBIS participates in clinical and systems analysis studies of the TBI Model Systems by collecting and contributing data to the uniform, standardized national database.
Abstract: This project (TBIMS) focuses on three local research projects: (1) decision-making and outcomes of inpatient and outpatient rehabilitation pathways, (2) very-long-term (5-15+ years postinjury) process and outcome for people with TBI, identified through the Rochester Epidemiology Project, and (3) telehealth-based (Internet) cognitive rehabilitation. Telehealth is a potentially important innovation in this system’s region, where distance limits access to medical and rehabilitation services and many consumers have limited access to health care, insurance, employment, and viable political representation. In addition to professional publications and presentations, continuing dissemination efforts include the Mayo Clinic TBIMS web-site, the TBI Hotline, the Messenger newsletter, contributions to the COMBI web site and COMBI and TBIMS newsletters, and regular participation by Mayo Clinic TBIMS staff at all annual state BIA meetings in the extended five-state geographical region. During the next five years, the project plans to develop an advocacy training program to help people with TBI and their families and significant others in the region learn self-advocacy skills. Members of the Mayo TBI Regional Advisory Council were proactively involved in developing this project.
Model Traumatic Brain Injury Systems
Mississippi

Traumatic Brain Injury Model System of Mississippi (TBIMSM)

Methodist Rehabilitation Center
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Jackson, MS 39216
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http://www.mmrcrehab.org

Principal Investigator: Mark Sherer, PhD
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Project Number: H133A020514
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $365,000

Abstract: The TBI Model System of Mississippi (TBIMSM) is a collaborative project of Methodist Rehabilitation Center (MRC) and the University of Mississippi Medical Center. This project involves three studies. The first study investigates two medications in a parallel group, double blind, placebo controlled, randomized assignment design. The drugs under investigation have differing neurotransmitter effects, although each drug has been reported to have therapeutic benefit. The target population for this study is persons with TBI who are in a state of post-traumatic confusional state (PCS). This is considered a state of the art approach to PCS given the severe lack of controlled research to measure medication usage in PCS. The second study develops and conducts a trial of an intervention to improve the therapeutic alliances between persons with TBI and family members and professional staff serving persons with TBI in a post-acute brain injury neurorehabilitation program (PABIR). The third research project investigates the use of transcranial magnetic stimulation (TMS) to improve the characterization of motor disorders after TBI. Current research suggests that improved use and better understanding of TMS technology will lead to new intervention trials to improve interventions to improve motor function after TBI.
Missouri Model Traumatic Brain Injury System (MOMBIS)

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Project Number: H133A980008
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $344,999; FY 99 $344,999; FY 00 $344,999; FY 01 $344,999; FY 02 (No-cost extension through 9/30/2003)

Abstract: This model system, based in central Missouri, provides a continuum of TBI care to an underserved and understudied population: communities that are primarily rural. The project also completes a series of innovative research programs and contributes to the national statistics database at the Kessler Medical Rehabilitation Research and Education Corporation. MOMBIS develops a model system of care that: (1) investigates the efficacy of alternative methods of service-delivery interventions after inpatient rehabilitation discharge and after other postacute treatment pathways; (2) identifies and evaluates interventions using emerging technology that can improve vocational outcomes and community integration; (3) develops predictors of rehabilitation outcome, including subjective well-being, at hospital discharge and at long-term follow-up; (4) examines the relationships among cost of care, specific treatment interventions, and functional outcomes; and (5) examines implications of TBI caused by violence on treatment interventions, rehabilitation costs, and long-term outcomes. Individual MOMBIS projects are evaluating the efficacy of a community-based support system, the efficacy of a partial weight-bearing gait retraining program, and predictors of vocational and financial success for clients of the state VR division. MOMBIS is also piloting research in: (1) the transportation challenges of individuals with TBI in rural areas and how those challenges affect outcomes, (2) the actual amount and source of public and private financial assistance being received by individuals with TBI, and (3) the relationship between challenges in access to environmental resources and outcomes for individuals with TBI living in rural areas of Missouri.
Northern New Jersey Traumatic Brain Injury System (NNJTBIS)/NIDRR TBI Model Systems National Database

Kessler Medical Rehabilitation Research and Education Corporation (KMRREC)
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http://www.kmrrec.org/KM/nnjtbis/index.html

Principal Investigator: Mark V. Johnston, PhD, Project Director, TBIMS; Mitchell Rosenthal, PhD, Project Director, TBI National Database
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Project Number: H133A980030
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $343,381; FY 99 $343,381; FY 00 $343,381 (NNJTBIS); $250,000 (National TBI MS Database) FY 01 $343,381 (NNJTBIS) $250,000 (National TBI MS Database) FY 02 (No-cost extension through 9/30/2003)

Abstract: The Northern New Jersey Traumatic Brain Injury System (NNJTBIS) is a comprehensive set of projects designed to improve the quality of care for people with TBI in New Jersey and to answer selected research questions. In both research and development projects, the NNJTBIS emphasizes the interplay of medical, neuropsychological, social, and economic factors. Three small randomized clinical trials include: an intervention program to train caregivers to manage behavior problems in the home or other natural settings, a program of cognitive remediation and cognitive-behavioral therapy for people with TBI living in the community, and an improvement to a cognitive remediation program involving enhanced choice by the person with TBI. Other research addresses issues of: how to improve outcome measures by incorporating the expressed values and perceptions of people served, financial issues and costs, the implications of violence in the etiology of TBI, substance abuse, and consequences of delay or refusal of Medicaid coverage for people with severe TBI injuries. Demonstration projects fill gaps in VR in New Jersey by providing augmented work trials and education of VR counselors regarding TBI, develop trial cognitive remediation and social support tools for the Internet, and educate emergency room personnel regarding mild TBI. Educational offerings for people with TBI, their families, and professionals are provided through conferences, retreats, talks, support groups, and development of a TBI resource center. Local advisory boards advise System staff, and plans include a task force to improve the system of care in New Jersey. The project currently manages the national statistics database for the Model TBI System projects. Additional goals include coordinating research and dissemination activities with other NIDRR TBI grantees to optimize research output, minimize redundancy of effort, and engage in collaborative dissemination. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
New York Traumatic Brain Injury Model System (NYTBIMS)

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Principal Investigator: Wayne Gordon, PhD
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Project Number: H133A020501
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 02 $365,000

Abstract: This project advances the understanding of TBI and its consequences and improves rehabilitation outcomes. The research projects focus on depression and fatigue, impairments that limit participation in community, and vocational activities: Treatment of Post-TBI Depression is a randomized clinical trial to examine the efficacy of sertraline (Zoloft) in the treatment of depression and anxiety after traumatic brain injury. Study of Post-TBI Fatigue and its Treatment investigates the components, consequences, and correlates of post-TBI fatigue, and in a randomized clinical trial, evaluates the benefits of modafenil (Provigil) to treat fatigue in individuals with TBI.
Model Traumatic Brain Injury Systems
North Carolina

Carolinas Traumatic Brain Injury Rehabilitation and Research System
(CTBIRRS)

Charlotte Mecklenburg Hospital Authority
Charlotte Institute of Rehabilitation
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Project Number: H133A020522
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 02 $365,000

Abstract: This project investigates post-traumatic irritability, its relationship to the caregiver as a component of the environment, the reaction to amantadine hydrochloride, and the nature of the problem as experienced by those in the community. The mission of CTBIRRS is to improve care and outcomes for survivors of TBI through medical treatments, services, research, and dissemination to expand and enhance services throughout their lifetime. The system begins with prevention and emergency medical services and extends through intensive care, acute care, and comprehensive medical rehabilitation to long-term follow-up, community reintegration, and vocational rehabilitation.
Model Traumatic Brain Injury Systems
Oregon

Oregon Traumatic Brain Injury Model System

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Principal Investigator: Nancy Carney, PhD
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Project Number: H133A980027
Start Date: October 1, 1998
Length: 48 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 98 $345,000; FY 99 $345,000; FY 00 $345,000; FY 01 $345,000; FY 02
(No-cost extension through 9/30/03)

Abstract: This model system compares treatment and outcomes among people with TBI cared for within the model system versus those who follow alternative care paths. The sample: (1) includes trauma system patients who remain in Portland and those who return to rural homes after discharge, allowing for a comparison of care paths as determined by environment; (2) assesses outcomes based on the type and extent of care by evaluating payer programs by level and type of funding; and (3) develops and validates two key predictors of outcome: a measure of acute care and a social adjustment scale. This understanding of outcomes as determined by care path (model versus alternative), environment (rural versus urban), and payer program (level of funding) is used to address the three primary needs of Oregon residents with TBI and their families: information, access, and quality. Ancillary demonstration projects implement and evaluate caregiver training and home-based multidisciplinary rehabilitation as an alternative to postacute treatment interventions. This project contributes to the national statistics database at the Kessler Medical Rehabilitation Research and Education Corporation.
Model Traumatic Brain Injury Systems
Pennsylvania

The Moss Traumatic Brain Injury Model System

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Project Number:  H133A020505
Start Date:  October 1, 2002
Length:  60 months
NIDRR Officer:  Ruth Brannon
NIDRR Funding:  FY 02 $365,000

Abstract:  This project provides cutting-edge care for persons with traumatic brain injury (TBI), conducts research on treatment of TBI in 3 key areas, and disseminates new knowledge to consumer and professional audiences, uses an extensive collaborative network. Seven Trauma Centers and two nationally renowned rehabilitation facilities, MossRehab and Magee Rehabilitation, collaborate in the clinical component of the Moss Traumatic Brain Injury Model System. The Moss Rehabilitation Research Institute administers the research component, which includes collaborative longitudinal data collection, as well as three local research projects on: (1) the use of assistive technology for cognitive and behavioral disabilities, (2) validation of an observational rating scale of attention dysfunction in a psychostimulant treatment trial, and (3) use of botulinum toxin for treating severe spasticity caused by TBI. The Moss TBIMS emphasizes consumer involvement in clinical program improvement, research design and dissemination via collaboration with the Brain Injury Association of Pennsylvania and other consumers.
Model Traumatic Brain Injury Systems
Pennsylvania

University of Pittsburgh Brain Injury Model System (UPBI)

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Project Number: H133A020502
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $364,484

Abstract: The UPBI’s research focus is on innovation in rehabilitation technology for persons with TBI. The project evaluates the impact of selected innovations in technology on service delivery, functional outcome, and as a therapeutic intervention. It addresses the shortcoming in wheelchair design for persons with brain injury by evaluating a unique personalized powered mobility system. Collaboration with the Robotics Institute at Carnegie Mellon University allows researchers to perform a randomized trial evaluating the efficacy of virtual reality and robotics for persons with TBI. Finally, the project uses intelligent navigation technology to implement and evaluate a web-based virtual case manager support structure for persons with TBI and their families.
North Texas Traumatic Brain Injury Model System (NT-TBIMS)

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Project Number: H133A020526
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $364,999

Abstract: The NT-TBIMS provides comprehensive continuum of care for TBI patients from the time of arrival at the emergency department through the intensive care unit, inpatient and outpatient rehabilitation, and long-term follow-up after community integration. Additionally, the NT-TBIMS conducts two research projects aimed at obtaining predictive information regarding outcome after TBI, which is important to the goal of developing novel therapies and tailoring these therapies to individual patients: (1) to determine whether the inheritance of particular alleles in certain candidate genes is associated with a greater risk of poor outcome after TBI; and (2) to determine whether functional magnetic resonance imaging of the brain (fMRI) is predictive of functional recovery after TBI.
Principal Investigator: Jeffrey S. Kreutzer, PhD, 804/828-9055
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Project Number: H133A020516
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $365,000

Abstract: This project, utilizing rigorous scientific methods, examines the benefits of intervention during the acute and post-acute periods after brain injury. TBIMS and other researchers have primarily expended their energies on delineating outcomes. Until recently, concerns about survivors’ emotional well-being and adjustment to injury received scant attention. Yet, recent studies have identified a high prevalence of depression, with many survivors reporting feelings of hopelessness, diminished self-esteem, and social isolation. Brain injury also affects the family system; family members commonly describe emotional distress, lack of respite, financial stress, and lack of community support. Projects in two major research areas focus predominantly on survivors. One study examines pharmacological approaches to the treatment of depression, while another examines a structured approach to the treatment of acute cognitive and neurobehavioral problems. Examining the benefits of intervention programs for family members is a third major research area.
Abstract: This program conducts research relevant to TBI, enhances services to consumers, and furthers the National Database and intersystem collaboration. The program’s three research projects are: (1) a randomized controlled intervention study examining the effect of exercise on depression after TBI. This low-cost community intervention seeks to combat depression and emotional distress in persons with stable TBI, by employing exercise as a positive approach to improved emotional and physical functioning and socialization. (2) an examination of what characterizes TBI survivors who are able to return to employment and hold jobs that are stable and complex in nature, utilizing both the UW TBI longitudinal database and the Model System database. (3) an examination of the impact of the Medicare prospective payment system for inpatient rehabilitation on TBI survivors receiving access to acute rehabilitation efforts. This collaborative project uses the TBI Model Systems database and other national data for analyses. The program also contributes to the National Database.
Use of Propranolol to Manage Behavioral Dysfunction and Agitation in Persons with Postacute Brain Injury

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Principal Investigator: Jay M. Meythaler, JD, MD, 205/934-2088
Public Contact: Alice Johnson, 205/934-9494; Fax: 205/975-4896

Project Number: H133G000072
Start Date: August 1, 2000
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $123,967; FY 01 $123,967; FY 02 $112,313
Abstract: This project conducts research to confirm the empirically reported efficacy of the beta-adrenergic receptor blocker propranolol in managing behavioral dyscontrol following brain injury (BI) in the postacute phase (greater than one year). The study builds on published case reports of propranolol’s effectiveness. It implements the first-ever randomized double-blind crossover trial of propranolol with placebo control in 50 individuals who are more than one year post-BI, in an outpatient setting. The project establishes whether propranolol decreases the behavioral dyscontrol and agitation commonly seen in postacute BI; despite widespread empirical use of propranolol, such decreases have never been established conclusively. It also provides for detailed measurement of possible neurocognitive side effects of propranolol, which were not evaluated in previous studies. The study utilizes the Agitated Behavioral Scale (ABS) for valid and reliable measurement of agitation. The project utilizes functional brain imaging techniques to provide preliminary insights into possible sites and mechanisms of action. If propranolol is thus documented to be useful in the postacute BI population, functional MRI and SPECT studies exploring its mechanisms of action is warranted.
Field-Initiated Projects (FIPs)
Arkansas

Developing a Rehabilitation Service Delivery Model for Minority Farmers with Disabilities

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Principal Investigator: Ari K. Mwachofi, PhD
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Project Number: H133G000192
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 00 $150,000; FY 01 $150,000; FY 02 $150,000
Abstract: This project gathers data from farmers and service providers in Arkansas, Louisiana, and Mississippi. Using the survey data, the project constructs a model of rehabilitation service delivery for minority farmers with disabilities based on their needs, perceptions, disabilities, and the most effective methods of reaching and communicating with them. The main thrust of the project is active participation by minority farmers in research and model building. Project objectives are to: (1) identify and interview minority farm households that have members with disabilities; (2) identify and interview nonminority farm households that have members with disabilities; (3) interview rehabilitation counselors and county extension agents; (4) build a service delivery model based on analyses of responses of the farmers, rehabilitation counselors and county extension agents; and (5) disseminate model and research findings.
Improving Muscular Use and Cardio-Respiratory Demand in Spinal-Cord-Injured Patients Performing Functional Electronically Stimulated Leg Cycle Ergonometry

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Principal Investigator: Maury Hull, PhD
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Project Number: H133G020137
Start Date: January 1, 2003
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,971

Abstract: This project develops new stimulation patterns for a functional electrically stimulated (FES) leg cycle ergometer (LCE) that enable spinal-cord-injured persons to exercise with greater benefit. Greater benefit is defined as exercising for a longer period of time and at a higher work rate while involving more leg muscles than is possible with existing ergometers. To reach the general aim, the research is divided into three phases, each directed towards testing a specific hypothesis: (1) normal recumbent pedaling can be simulated using a computational musculoskeletal model of the leg; (2) minimizing muscle fatigue in a forward dynamic simulation of recumbent pedaling yields computed stimulation patterns that enable an individual with SCI to pedal the FES-LCE for longer periods of time, and at higher work rates, than is possible with current stimulation patterns; and (3) using neural stimulation patterns computed from a forward dynamic simulation of recumbent pedaling in which selected muscles of both the upper and lower leg are activated, an individual can pedal the FES-LCE to obtain a greater cardio-respiratory workout than when only upper leg muscles are stimulated.
Cardiovascular Disease in Women with Spinal Cord Injury and Its Effect on Participation in Community Activities

Los Amigos Research and Education Institute, Inc. (LAREI)  
Rancho Los Amigos National Rehabilitation Center  
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Downey, CA 90242

Principal Investigator: Yaga Szlachcic, MD
Public Contact: Rodney Atkins, PhD; Lili Thompson, PT, 562/401-7221; Fax: 562/803-6354

Project Number: H133G010160
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $141,470; FY 02 $145,835

Abstract: The goals of this project are: (1) to profile cardiovascular disease (CVD) risk factors in women with SCI, (2) to assess the relationships between CVD risk factors and “observable” CVD in this group, (3) to assess the associations of CVD risk factors and observable CVD with quality of life and with participation in community activities among women with SCI, (4) to evaluate standard interventions for lipid abnormalities and CVD in women with SCI, and (5) to assess the impact lipid and CVD interventions have on the quality of life and community activity participation of women with SCI. For these goals “observable” CVD refers to atherosclerotic burden by carotid arterial intima-media thickness (IMT).
Quantified Custom Inserts: An Amputation Prevention Program for Diabetic Patients

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Project Number: H133G020002
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $149,999

Abstract: This project identifies footwear factors that reduce plantar pressures and decrease the incidence of skin ulceration in individuals with diabetes mellitus. Reduction of skin ulceration is critical for ensuring maximum independence in living and employment and for decreasing the emotional and financial consequences associated with managing the disease process and subsequent disability. This project is designed to identify the footwear factors that reduce plantar pressures and decrease the incidence of skin ulceration experienced by the diabetic foot during walking. The footwear factors include custom contoured insoles and insole durability.
Daily Living Context and Pressure Sores in Consumers with Spinal Cord Injury

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**Project Number:** H133G000062
**Start Date:** September 1, 2000
**Length:** 36 months
**NIDRR Officer:** Kristi E. Wilson, PhD
**NIDRR Funding:** FY 00 $149,942; FY 01 $147,834; FY 02 $149,837

**Abstract:** This project examines the beliefs and practices underlying the activities, habits, and daily routines of 18 ethnically diverse consumers with SCI. The intent is to document how personality, lifestyle patterns and choices, and environmental context mutually interact within the individually constructed lives of consumers to influence the development of pressure sores. The problem of recurrent, medically serious pressure sores represents a key challenge to the ability of individuals with SCI to experience a full and satisfying life. Although prior research has documented that the development of pressure sores is in general linked to psychosocial and environmental variables, there is a need to obtain new, consumer-centered information about how pressure sores can be minimized through personally tailored adaptive strategies that are responsive to the opportunities and difficulties embedded in the unique sets of everyday circumstances that characterize individual lives. A variety of data collection procedures, including participant observation as well as interviews with consumers, their caregivers, and other associated persons, are analyzed to generate results that are comprehensive and trustworthy. These results are used to develop a series of applied products, including: (1) a consumer-oriented self-help manual; (2) a set of guidelines for rehabilitation practice; and (3) a lifestyle-oriented occupational therapy treatment model. Consumer representatives contribute to all aspects of the project to ensure that it is relevant and maximally useful to the target population.
Mortality and Life Expectancy After Traumatic Brain Injury Rehabilitation

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Project Number: H133G020182
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $150,000

Abstract: This project investigates mortality, life expectancy, causes of death, and risk factors for death in individuals with traumatic brain injury (TBI) receiving inpatient rehabilitation and surviving beyond one year post-injury. This research tests the following hypotheses: (1) that TBI increases mortality and decreases life expectancy among survivors completing rehabilitation, (2) that causes of death do not match the general population, (3) that the risk of death is greater in certain subgroups, and (4) that survival has increased over the decades of improved care. Products of this project include: (1) a consumer and professional publication on TBI mortality and life expectancy in the TBI Model Systems, (2) a consumer and professional publication on TBI mortality and life expectancy changes over four decades at Craig Hospital, (3) an interactive web site allowing entry of basic individual and injury characteristics that reports probabilities of various life expectancies, and (4) a report on the most effective strategy for expanding the TBI Model Systems mortality study to include all TBI cases rehabilitated at Model System facilities, even before they were designated as a Model System. This study, lead by the Rocky Mountain Regional Brain Injury System at Craig Hospital, involves the 17 TBI Model Systems funded by NIDRR.
Investigation of the Dynamics of Spasticity in Children with Cerebral Palsy

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Project Number: H133G010041
Start Date: November 1, 2001
Length: 36 months

NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $149,708; FY 02 $144,023

Abstract: This project creates a new assessment tool for spasticity in cerebral palsy that quantifies both the long-term changes in muscle structure and the short-term effects of the hyperexcitable stretch reflex. The result is a comprehensive testing protocol that can be used in a wide range of therapeutic interventions. The new device can apply torques about the knee and ankle of a limb with spasticity in such a way that velocity, acceleration, and the third derivative, jerk, can be varied and resistance of the limb to movement measured. The device can be used (1) to investigate the reflex resistance to movement elicited by constant velocity, constant acceleration, and constant jerk; and (2) to define the passive biomechanics of the limb by applying short duration pulses of torque to the limb combined with the limb’s position, velocity, and acceleration. This work is unique in the recognition of the limb with spasticity as a closed loop system consisting of the biomechanics of the limb and the reflexes (due to motion) feeding back on that limb. As a result of using the new tool, many therapy protocols such as hippotherapy, stretching, hydrotherapy, range of motion exercises, and others may be found to be of significant benefit to one component of spasticity over the other.
Field-Initiated Projects (FIPs)
Georgia

Aging After Spinal Cord Injury: Three Decades of Longitudinal Research

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Project Number: H133G010009
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $149,850; FY 02 $149,858

Abstract: This study performs a sixth data collection in the ongoing Minnesota longitudinal study (MLS) in order to identify how the life situation of people with SCI has changed over the past three decades, with an emphasis on evaluating the roles of aging and environmental change. This study has used a revolving prospective panel design that follows participants longitudinally over time, adding new samples at different times to counteract attrition. The study was initiated in 1973, with three subsequent follow-ups carried out over a 25-year period (1984, 1988, 1993, and 1998). A Southeastern sample was added in 1993 to add a more diverse participant sample with a larger portion of women and minorities. The 699 respondents from the 25-year follow-up and a new sample of 500 individuals with SCI are to be asked to complete materials. This sixth study stage is the most extensive follow-up yet performed, with the addition of several new measures that include: (1) portions of the Behavioral Risk Factor Surveillance System (BRFSS); (2) expanded assessment of employment history; (3) a measure of depression that was specially designed to avoid items that are confounded with health conditions (the Older Adult Health and Mood Questionnaire, OAHMQ); and (4) a standardized measure of environment, the Craig Hospital Inventory of Environmental Factors (CHIEF). This study also has the added benefit of greater consumer involvement at each step of the study. Results of the study enhance both rehabilitation professionals’ and consumers’ understanding of the consequences of aging with SCI and lay the foundation for future interventions.
The SPIRATE Project (Spinal Injury Risk Assessment for ThromboEmbolism)

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Project Number: H133G990046
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $135,244; FY 00 $139,362; FY 01 $143,645; FY 02 (No-cost extension through 6/30/2003)

Abstract: The purpose of this study is to develop a risk assessment methodology to guide the intensity and duration of antithrombotic prophylaxis. The study is performed in two parts: a retrospective analysis of 500 patients treated by the Midwest Regional Spinal Cord Injury Care System over the past decade, and a prospective analysis of 100 patients admitted for care of spinal cord injury. In the first part, archival data on the 500 patients is analyzed to identify risk factors for thromboembolism. In the second part, the 100 patients all receive prophylaxis consisting of compression leggings and Heparin, they are examined daily for clinical evidence of thrombosis, and they have bilateral contrast venography prior to discharge. Three risk scoring systems are tested. The first is based on the retrospective study. The second is expanded to include additional factors such as functional measures and emotional well-being assessments. A third risk scoring system, to be developed, includes the data from the second system as well as the day-to-day changes in the symptoms recorded over the course of the study for individual patients. The cross-generalizability of the systems is assessed, and the final instrument is used to assign patients at high risk to more intensive prophylaxis.
Secondary Prevention Trial of Exercise and Diet for Improvement of Physical Fitness, Independence, and Overall Health in Adult Paraplegics

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Project Number: H133G990143
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,959; FY 00 $149,988; FY 01 $149,659; FY 02 (No-cost extension through 5/31/2003)
Abstract: This project investigates the impact of an exercise intervention coupled with nutrition education on the strength and fitness of a sample of overweight paraplegics with chronic illnesses. This intervention improves cardiovascular fitness and strength leading to improved independence and improved overall health. The research objectives are to recruit adult paraplegics with chronic disease for involvement in the program and then to compare the effects of the program on physical fitness in participants who have completed the program to physical fitness in those participants randomized but waiting, during the same 12 weeks, to begin the intervention. The impact of the program is assessed using changes in strength and body composition, levels of independence, dietary knowledge and intakes, blood pressure, the total-to-high-density lipoprotein cholesterol ratio, bone mineral density, and fasting glucose concentrations.
Field-Initiated Projects (FIPs)
Illinois

Development of an Intelligent Therapeutic Stretching Device for Stroke Patients

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Project Number: H133G010066
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $148,822; FY 02 $148,571
Abstract: This project develops a useful and practical ankle stretching device with advanced control features that can be used by therapists and individuals who are post-stroke. Project activities include: (1) developing a portable stretching device with intelligent control to stretch an ankle joint with spasticity/contracture safely and repeatedly throughout the ankle range of motion (ROM) to reduce spasticity/contracture, (2) evaluating the outcome quantitatively, and (3) comparing it with a continuous passive motion (CPM) machine. The device stretches the joint safely to extreme dorsi- and plantar-flexion until a specified peak resistance torque is reached with precise control of stretching velocity, based on resistance torque. Outcome is evaluated quantitatively in multiple aspects during each of the stretching sessions. Changes in joint intrinsic properties are quantified by the passive ROM, joint stiffness, viscous damping, and energy loss during the controlled passive stretching, while the reflex changes are quantified by reflex gain and threshold. Functional changes induced by the stretching are evaluated through the active ROM, plantar and dorsi-flexor co-contraction, and foot-drop and walking speed during locomotion. In general, similar stretching devices can be developed to treat spastic joints other than the ankle and other neurologically impaired populations troubled by spasticity/contracture. Finally, the stretching device is portable and has a relatively low cost, making it convenient and economical for patients to use in a clinic or at home.
Field-Initiated Projects (FIPs)
Illinois

Development of a Pressure Ulcer Prevention Beliefs Instrument for Persons with Spinal Cord Injury

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Project Number: H133G010058
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $148,101; FY 02 $149,996

Abstract: This project develops a measure that clinicians can use to assess the health beliefs of persons with SCI regarding pressure ulcer (PU) prevention. The goals of the study are to: (1) develop an instrument to measure PU-prevention health beliefs that is reliable by collecting qualitative data on perceptions about PU risk and seriousness, barriers to and benefits of preventive skin care, and confidence in performing skin care; (2) develop a health beliefs instrument that is structurally and theoretically valid; and (3) describe the pressure ulcer prevention beliefs of 375 persons with recent or chronic SCI. Findings facilitate the development of health belief-based interventions that address the multifactorial basis of risk for PU development. The addition of skin care health beliefs to risk prediction instruments should increase the predictive power of such instruments.
Consumers’ Participation in Nursing Home Decision-making
Preferences and Perceptions

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Project Number: H133G000068
Start Date: June 1, 2000
Length: 36 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 00 $149,556; FY 01 $149,067; FY 02 $147,015

Abstract: This project examines decision-making about long-term care, as it relates to institutional admission and discharge, viewing these decisions as having a critical influence on the opportunities individuals have to attain valued long-term care goals. The study explores the decision-making process of a nursing home population for which little information is available—working-age residents. Current research has focused on acute care for the most part; limited attention has been given to consumer values and preferences in long-term care and the role, if any, these play in long-term care decisions. Specific objectives and analyses include describing the level of consumer participation in the nursing home admission decision and describing the perceived adequacy of participation in decision-making by consumers.
Increasing States’ Allocations of Medicaid Dollars to Community-Based Care: Where Might Policy Intervene?

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Project Number: H133G010023
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 01 $148,706; FY 02 $130,519

Abstract: This research project features two related studies. First, the project examines factors that influence community-based care expenditures for different subgroups of individuals with disabilities. Analyses focus on Medicaid 1915(c) waiver expenditures, examining the effect of a set of state-level variables shown in previous work to be related to state fiscal effort, on expenditures for five segments of the population: the frail elderly, individuals with developmental disabilities, younger people with disabilities, persons with AIDS, and children with a variety of disabling conditions. Research identifies the extent to which variables amenable to policy influence are either shared, or differ across segments of the population with disabilities. Second, the project examines the relationship between increased use of 1915(c) waiver services and total, as well as institutional, long-term care expenditures. Research examines the extent to which states can redirect institutional dollars to community-based care without increasing total long-term care expenditures. Community-based care services are, on average, noticeably less costly than institutional services; if the site of care is the community rather than the institution more individuals are able to access care. Providing greater access to long-term care in preferred community settings, without increasing total long-term care costs, is viewed as evidence of cost effectiveness. Cost concerns have repeatedly been raised in discussions to expand community-based care. By focusing on Medicaid 1915(c) waiver programs, this project provides important cost effectiveness information not presently available.
Bilateral Arm Training in Patients with Chronic Hemiparesis

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Project Number: H133G010111
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $148,579; FY 02 $148,742
Abstract: This project uses a randomized controlled study to test the validity of low intensity repetitive bilateral arm training with rhythmic auditory cuing to improve upper extremity (UE) motor function. This training program is based on principles of motor learning and control. A long-term objective of this research program is to understand the principles and mechanisms underlying UE stroke rehabilitation and to provide a scientific basis for planning treatments for stroke rehabilitation.
Field-Initiated Projects (FIPs)
Massachusetts

Development of Methods to Monitor Functional Tasks

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Project Number: H133G020108
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $150,000

Abstract: This project develops a method to identify functional activities based on combined surface-detected electromyographic (EMG) and accelerometer signals. This capability is currently unavailable, and provides an ability to discriminate between various functional activities such as feeding, grooming, dressing, ambulating, toileting, and transfers solely on the basis of information from wearable biosensors. Self-report methods currently in use are subjective or are clinically based and do not accurately portray a patient’s functional status throughout the day in their home or community. Existing monitors rely solely on accelerometers to provide continuous activity monitoring in remote locations, but they are limited to general activity assessment. This method can be combined with commercially available data loggers for a portable system that continuously and unobtrusively monitors the functional abilities of a patient in their home or community. Such objective and quantitative information can improve the effectiveness of rehabilitation services by establishing realistic goals, monitoring home-based therapy, and establishing the need for transition to other levels of care.
Repetitive Intensive Training Exercise: Effect on Upper Extremity Motor Function in Spasticity

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Project Number: H133G000058
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 00 $149,854; FY 01 $149,993; FY 02 $149,970

Abstract: Using motor control testing techniques, this project studies the effect of a repetitive, intensive training intervention on upper limb function. It investigates whether a program of repetitive, intensive training exercises designed to improve motor coordination leads to greater improvement in motor performance than either a group receiving a more typical frequency of intervention or a control group receiving a socialization intervention. A further goal is to determine if evidence exists of carry-over once the intervention is terminated. The study includes 36 subjects between the ages of 6 and 15 who have upper extremity spasticity of cerebral origin.
Field-Initiated Projects (FIPs)
Michigan

Functional Assessment and Treatment of Neurogenic Hypotension Due to Spinal Cord Injury

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Project Number: H133G020128
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 02 $116,835

Abstract: This project characterizes hypotensive phenomena associated with SCI and evaluates the effects of midodrine, an alpha-sympathomimetic medication, on them. Specifically, cardiovascular autonomic insufficiency due to SCI is manifested by (1) orthostatic hypotension, which impedes early rehabilitation efforts and causes subjective distress, and (2) exertional hypotension, which contributes to pathological fatigue and limited exercise performance. Thus, two corresponding protocols are employed to evaluate the effects of anti-hypotensive treatment with midodrine on each impairment, using two methods of hemodynamic challenge: head-up tilt table testing is used to elicit orthostatic hypotension, and arm-crank ergometry to elicit exertional hypotension. In each protocol, a randomized crossover within-subjects design allows for comparison of the effects of three interventions (compression garments, midodrine 10mg, and placebo) on subjective and objective responses. Ability to tolerate head-up tilt is assessed by heart rate, blood pressure, and symptoms during inclination; exercise tolerance is evaluated by oxygen consumption and perceived exertion in addition to the latter. Similar cardiovascular autonomic insufficiency in non-paralyzed populations responds dramatically to treatment with the midodrine, with increased ability to engage in physical activity. This project is the first controlled trial of midodrine in SCI.
Field-Initiated Projects (FIPs)  
Minnesota

Effect of Electrical Stimulation on Brain Reorganization in Subjects with Stroke

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Project Number: H133G010077
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $149,995; FY 02 $149,993

Abstract: This project studies the effects of training finger movement control in subjects with stroke using a finger movement tracking paradigm on manual skill and also on brain reorganization, as measured by functional magnetic resonance imaging (fMRI). Although brain imaging studies show evidence of brain reorganization in individuals who have recovered from stroke, these studies have not examined the subjects before and after their rehabilitation. Electrical stimulation has been found to be effective in helping recover hand function in many but not all individuals with stroke. This project instructs subjects with stroke in aggressive (six hours per day) electrical stimulation treatment to be done in their own home. Furthermore, it explores whether the sensory bombardment that occurs centrally with electrical stimulation causes an expansion of cortical activity and whether this might be the mechanism for improved manual control following treatment. Subjects with stroke are assigned randomly to either an electrical stimulation group or a control group. Appropriate tests of manual performance as well as brain imaging using a 4 Tesla magnet are conducted at pretest, post-test, and follow-up. This research has the potential of uncovering important information on recovery from stroke that invites many more studies in the future.
Personalized Health Care for Individuals with Physical Disabilities: Satisfaction with Services and Outcomes

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Project Number: H133G010064
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Dawn Carlson, PhD, MPH
NIDRR Funding: FY 01 $149,834; FY 02 $149,178

Abstract: This project demonstrates both the direct and indirect effects of the AXIS approach to health care on the lives of adults with physical disabilities. AXIS Healthcare, a joint venture of Sister Kenny Institute and Courage, Inc., was formed to bring knowledge of physical disability to the application of managed care. When dealing with health issues, people with physical disabilities often find themselves battling not only illness but also the health care system itself; this project works in partnership with persons with physical disabilities to coordinate a high-quality, cost-effective network of specialized services spanning the continuum of care. Over the course of the project, the health outcomes and satisfaction levels of individuals with physical disabilities taking part in this program are monitored on a regular basis. The health outcomes and satisfaction of a comparison group of individuals receiving care through traditional plans is also followed during this time. The project is conducted with the understanding that programs similar to this one are not likely to be established on a wide-scale basis until it can be empirically demonstrated that such programs have a significant impact on the quality of life of the people they serve. The project is a collaborative effort of The University of Minnesota, Courage Inc., AXIS Healthcare, and The Metropolitan Center for Independent Living in Minneapolis.
Field-Initiated Projects (FIPs)
Minnesota

Home-Based Tracking Training to Stimulate Neuroplasticity and Improve Function in Stroke

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Project Number: H133G020145
Start Date: September 01, 2002
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $149,929

Abstract: This project examines: (1) whether home-based Joint Movement Tracking Training is effective in promoting improved hand function and brain reorganization in subjects with chronic stroke, and (2) whether the mechanism of any such improvement is learning-dependent or use-dependent. Recent research has shown that repetitive efforts by subjects with chronic stroke using their paretic hand at a finger movement tracking task produced significant improvements in hand function and brain reorganization. The training technique requires patients to learn how to create precision movements of the index finger to track target waveforms on a computer screen. This project investigates whether home-based tracking treatment using a laptop computer and telecommunication technology can be as effective as earlier work with clinic-based treatment. Equally important, this project determines whether it is the motor learning or the repetitive movement that serves as the mechanism of improvement.
Field-Initiated Projects (FIPs)
New Hampshire

Developing and Evaluating an Interactive Tool to Support Literacy Learning in Adolescents with Severe Speech and Physical Impairments

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Project Number: H133G990501
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 99 $124,755; FY 00 $124,755; FY 01 $124,988; FY 02 (No-cost extension through 6/30/2003)

Abstract: This project creates a web-based tool, the Adolescent Literacy Learning Link (ALL-Link), which provides adolescents with Severe Speech and Physical Impairments (SSPI) with an innovative, literary learning environment. ALL-Link features age-appropriate reading and writing activities that are grounded in inclusive models of comprehension and composition that apply equally to people with and without disabilities. Projected outcomes of ALL-Link development include: (1) successful development and implementation of an innovative and interactive literacy-learning web site for adolescents with SSPI and their teachers; (2) wide dissemination of the site and parallel or related materials for classrooms without Internet access; and (3) project management that efficiently provides target groups with increased access to and use of the web site, related materials, and project findings.
Field-Initiated Projects (FIPs)
New Hampshire

Project PATH (Promoting Access, Transition, and Health)

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Project Number: H133G000150
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $149,996; FY 01 $149,996; FY 02 $149,996

Abstract: This project performs a randomized, controlled trial of Project PATH (Promoting Access, Transition, and Health), a community-based health promotion wellness program for people with new spinal cord injuries (SCIs). This health-promoting program involves a variety of interventions including wellness education, an individualized fitness program, recreation skill development with family and friends, community accessibility and advocacy, and peer advising. Working in conjunction with consumers, family, friends, and health and rehabilitation professionals, Project PATH is designed to empower people with new SCIs to make prudent and appropriate use of recreation and leisure resources and in that way, to reduce the incidence and intensity of some the most prevalent and destructive secondary conditions of SCI: e.g., pressure sores, upper respiratory and urinary tract infections, and depression. The project is a coordinated effort among the University of New Hampshire, Northeast Passage, a group of private proprietary rehabilitation hospitals, a private, nonprofit hospital, university-based research, and the New England Regional SCI Center.
**Catecholaminergic Modulation of Working Memory in Traumatic Brain Injury: An fMRI Study of the Effects of D2 Dopaminergic and Alpha-2 Adrenergic Agonistics**

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**Project Number:** H133G000136  
**Start Date:** July 1, 2000  
**Length:** 36 months  
**NIDRR Officer:** Kristi E. Wilson, PhD  
**NIDRR Funding:** FY 00 $150,000; FY 01 $150,000; FY 02 $150,000  

**Abstract:** This project determines the role of dopaminergic (DA) and alpha-2 adrenergic (A2A) mechanisms in the memory deficits experienced after a TBI. Many of the 1-2 million individuals who sustain a mild-to-moderate TBI (MMTBI) each year suffer deficits in working memory in the first several weeks after the injury. This project uses neurocognitive and fMRI measures in two populations, one with normal WM (healthy controls), and one with low working memory capacity (individuals with MMTBI) to: (1) characterize baseline working memory deficits in two domains (verbal and spatial) within one month of MMTBI, and (2) test and compare the ability of DA and A2A agonists to ameliorate working memory deficits in the two domains within one month of MMTBI. The study predicts that relative to healthy controls, individuals with MMTBI have greater deficits in verbal and spatial working memory, show greater improvement in working memory while on D2 and A2A agonists, and that DA and A2A agonists result in different profiles and degrees of working memory improvement. Furthermore, relative to controls, the fMRI of individuals with MMTBI should show less activation associated with low and high working memory load conditions, should normalize when acquired while on DA and A2A agonists, and should show selective prefrontal increased activation in response to increased working memory load.
Randomized Controlled Trial of Anti-Fatiguing Exercise to Improve Function in Multiple Sclerosis Patients

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Project Number: H133G010132
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: The goals of this study are: (1) to measure the changes in fatigue that result from a simulated workday and the next morning (incomplete recovery and residual fatigue); and (2) to study the effectiveness of a 16-week program of anti-fatiguing resistance exercises. Multiple Sclerosis (MS) is a demyelinating disease of the central nervous system; the most common symptom of MS is a generalized sense of fatigue and reduced function. Few studies have considered the role of exercise as a treatment for fatigue in people with MS. Subjects with MS are randomly assigned an exercise group and receive an individualized progressive resistance training program of anti-fatiguing exercises to perform three days per week in the lab or at home.
Acupuncture as an Adjunctive Treatment in Stroke Rehabilitation

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Project Number: H133G000120
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,556; FY 00 $149,343; FY 01 $149,655; FY 02 (No-cost extension through 6/30/2003)

Abstract: This project designs and evaluates safe and efficacious ways acupuncture may be used to benefit the functional recovery of survivors of stroke when used in addition to standard rehabilitation. The project directly addresses the medical, cognitive, and psychological sequelae of stroke, and addresses which acupuncture points and model to use, when to start acupuncture, and the use of electroacupuncture. The project also compares acupuncture with and without electrical stimulation in stroke treatment. The aim of the study is to use rigorous research methods to determine: (1) whether acupuncture has a beneficial effect on activities of daily living, motor and cognitive functioning, and quality of life in post-stroke survivors above and beyond standard rehabilitation; and (2) if so, whether the length of time after stroke, before acupuncture is begun, affects the extent to which acupuncture is effective, and optimal time to begin acupuncture therapy. In addition, it is important to determine whether there is any benefit to initiating acupuncture treatment in stroke survivors who are well past the subacute stage and who have apparently reached a plateau in their recovery.
Community Reintegration and Quality of Life Following Traumatic Brain Injury

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Project Number: H133G990221
Start Date: July 1, 2000
Length: 12 months
NIDRR Officer: Dawn Carlson, PhD, MPH
NIDRR Funding: FY 00 $194,711; FY 01 $194,711; FY 02 (No-cost extension through 9/30/2003)

Abstract: This project increases understanding of community reintegration (CI) and quality of life for people with TBI, and develops instruments that can be used in future research. CI refers to a return to the mainstream of community life, and again becoming an active and contributing member of one’s family and society. When people with TBI, their families, and professionals in rehabilitation discuss quality of life following TBI, they consider home and community roles and activities, rather than the impairments or disabilities resulting from the injury. The best currently available instrument, the Community Integration Questionnaire (CIQ) has serious limitations regarding the measurement of all aspects of CI in a comprehensive, reliable, and sensitive manner. This project: (1) produces a new version of the CIQ, and assesses its validity and reliability; (2) develops norms for the new CIQ, for subgroups defined by age, gender, and racial/ethnic group; (3) creates a life-satisfaction measure specific to people with TBI, and assesses its validity and reliability; (4) investigates the relationship between CI and subjective well-being; (5) describes the CI and quality of life of TBI survivors, with a focus on severity of injury, age, gender, socioeconomic status, and racial and ethnic group differences; and (6) disseminates the instruments and other results to people with TBI and their families, professionals, policy-makers, and researchers.
Field-Initiated Projects (FIPs)
New York

The Impact of Managed Care on Rehabilitation Services and Outcomes for Persons with Spinal Cord Injury

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Project Number: H133G990220
Start Date: July 1, 2000
Length: 12 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 00 $168,769; FY 02 (No-cost extension through 6/30/2003)

Abstract: This project examines the impact of managed care on rehabilitation services and outcomes for people with spinal cord injury (SCI). The study analyzes demographic, medical, functional, community integration, life satisfaction, and service delivery data collected from Model Systems projects to determine how managed care is altering the acute and rehabilitative management of SCI and how it affects short- and long-term outcomes, such as functional status and community integration. Objectives include: (1) describing the pathways of newly injured people with SCI through the health care system, from injury to stable community residence: acute care, rehabilitation care (including inpatient-acute, subacute, day hospital, and outpatient), home care, and readmissions for complications; (2) assessing the impact of managed care on these pathways: determining whether managed care patients differ from those with more traditional health insurance in terms of services received (providers, services, durations); and (3) assessing the effect of various pathways on the outcomes for this patient population at one and two years after injury in functional, medical, psychological, and health services utilization. The project team disseminates findings to consumers, managed care and other payer organizations, policy-makers, and SCI professionals using a variety of mechanisms. Findings are expected to contribute to the redesign of the SCI Model Systems National Database to make it correspond optimally to the organization of health and rehabilitative services in the 21st century.
Interventions to Improve Memory in Patients with Multiple Sclerosis

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Project Number: H133G990058
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 99 $147,304; FY 00 $147,816; FY 01 $148,329; FY 02 (No-cost extension through 6/30/03)

Abstract: This project: (1) tests the efficacy of interventions, specifically targeting cognitive functioning, in patients with Multiple Sclerosis (MS); and (2) uses a novel outcome measurement that may be more sensitive and ecologically valid than existing measurements. The experiments determine the efficacy of donepezil therapy and glucose administration for enhancing memory functioning, two interventions that are extremely well-tolerated and have been demonstrated to be effective for improving memory and other aspects of cognitive functioning in several populations. Verbal memory is the most common area of impairment in people with MS, and therefore a verbal memory task is the primary outcome measure. Secondary outcome measures assessing other aspects of cognitive function (i.e., nonverbal memory, conceptual thinking, processing speed) may also be improved with intervention.
Development of Valid and Reliable Measures of Postural Stability

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Project Number: H133G010024
Start Date: October 1, 2001
Length: 24 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $139,612; FY 02 $142,970

Abstract: This project validates four clinical measures of seated stability. An unresolved biomechanics problem for wheelchair users is maintaining functional trunk stability during upper extremity (UE) movement while achieving functional trunk mobility, when needed. Trunk stability is provided by the wheelchair backrest, but this trunk support is in direct conflict with trunk mobility. Back or trunk supports, which envelop the trunk, also restrict mobility. For wheelchair users, balancing sufficient trunk support with adequate trunk mobility has important functional and medical consequences. Better understanding of the posture-function relationship is needed to permit seated stability during activities of daily living while not hindering function by restricting trunk mobility. Assessing postural stability should be integral to every seating evaluation; however, clinicians have not been provided with valid measures of stability. This project tests three measures of stability previously defined in the literature (functional reach, sitting balance, and reach area) and introduces a fourth measure (bilateral reach). The predictive validity of all four measures is determined by correlating the respective measurements to results of a series of functional tasks. Concurrent validity is determined by correlating the results of the four clinical stability measures to each other. In addition, the measures undergo reliability testing. The outcome of this project is clinical measures of functional postural stability that have construct, concurrent, and predictive validity.
Empowering Persons with a Spinal Cord Injury Through a Shared Decision-Making Program

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Project Number: H133G020029
Start Date: September 1, 2002
Length: 36 months

NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $149,759

Abstract: This project systematically summarizes information concerning the various aspects of bladder management and SCI and prepares it in a format that allows persons with SCI to make more informed decisions about this issue. A panel of clinicians, experts in the care of persons with SCI, meet to develop a table of estimates concerning costs, complications, long-term risks, and effects on other aspects of care for each of the four commonly used approaches to bladder management and two emerging technologies. This panel is supported by a team that abstracts relevant literature and assists with decision analysis, when needed. These clinical estimates are shared with three focus groups of persons with SCI. The focus groups discuss the clinical findings and add relevant information about how the clinical aspects integrate with personal, vocational, and preference issues for individuals with SCI. The investigators use these two sets of information to develop a script for a multimedia presentation tailored to address the specifics of any individual’s clinical situation. The multimedia presentation is evaluated for its ability to enhance informed decisions among persons with SCI concerning bladder management.
Field-Initiated Projects (FIPs)
Ohio

The Physiologic Basis of Functional Electrical Stimulation on Muscle Atrophy in Acute Spinal Cord Injury

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Project Number: H133G80100
Start Date: May 1, 1998
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $125,000; FY 99 $125,000; FY 00 $125,000; FY 01 (No-cost extension through 4/30/02)

Abstract: This study characterizes the changes in muscle mass, morphology, and histochemistry in the first 6-7 months following acute SCI and explores the impact of early reinstitution of muscle contraction on prevention of musculoskeletal atrophy. Muscle contractions are accomplished through the application of functional electrical stimulation (FES) induced cycle ergometry, but this study is not designed to develop FES technology. Rather it leads to a better understanding of the effect of FES-induced isotonic muscle contraction with dynamic force on the musculoskeletal changes known to occur after acute SCI. It also defines the dose-response relationship of FES-induced workloads on muscle mass and quality. Finally, the study begins to explore the mechanisms for the observed changes through characterization of both systemic growth hormone and insulin-like growth factors and local insulin-like growth factor changes over the six-month FES cycle ergometry training program. A better understanding of the factors associated with the development of musculoskeletal atrophy occurring after acute spinal cord injury should lead to the development of better rehabilitation and pharmacologic interventions directed at preventing these secondary impairments of SCI.
Field-Initiated Projects (FIPs)
Oregon

Traumatic Brain Injury Rehabilitation: The Argentina Project

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Project Number: H133G000154
Start Date: August 1, 2000
Length: 38 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $149,905; FY 01 $149,645; FY 02 $149,038

Abstract: This project compares a cohort of 200 TBI patients from Argentina with a matched sample of 200 cases from the National TBI Model Systems Database. The Neurotrauma Group of the Argentina Society of Intensive Medicine (SATI) has instituted, at a group of trauma hospitals in Argentina, a level of TBI acute care equal to that found in U.S. hospitals. However, TBI patients in Argentina are discharged from this excellent acute care to no further formal treatment. This affords an opportunity to test two groups of TBI survivors who have equivalent levels of acute care but radically different postacute rehabilitation care. In the U.S. sample, all cases have had at least postacute, inpatient rehabilitation. Some have had outpatient treatment as well. Patients in both groups are case-matched for major predictive variables and are compared with respect to short- and long-term mortality and morbidity, to investigate the influence of postacute care on outcome. Additionally, the influence of acute care management practices on outcome is evaluated and regression analysis is used to establish the major predictive variables in this patient population. This project is the first to address integrated TBI management under the conditions of significant resource limitations that exist in many areas of the world.
Opening the “Black Box”: The Content and Process of Learning in Inpatient Traumatic Brain Injury Rehabilitation

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Project Number: H133G020052
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $144,312

Abstract: This project performs a systematic study of the content and process of learning events and teaching strategies in inpatient TBI rehabilitation, and develops reliable tools by which they may be characterized. Much of the content and process of rehabilitation for traumatic brain injury (TBI) remains within a “black box” of unspecified therapy approaches and modalities. This project uses a variety of innovative strategies to open the “black box,” to collect and analyze data on content and process variables for both qualitative and quantitative purposes. Following a Participatory Action Research model, the project utilizes a Project Team composed of experienced clinicians in the field of TBI rehabilitation. The Team uses converging task analysis methods including group process, interviewing, and field observation to develop a systematic, hierarchically organized classification of learning events used in inpatient TBI rehabilitation, and a classification system and operational definitions of key therapist behaviors in the areas of task setup, task guidance, and task feedback/reinforcement. Particular attention is devoted to aspects of content and process relevant to errorless learning, on the assumption that this strategy will be particularly valuable to future research efforts. The team is assisted throughout by distinguished consultants with expertise in TBI and cognitive rehabilitation, errorless learning, and rehabilitation research methodology.
Field-Initiated Projects (FIPs)
Rhode Island

Shake It Up for Alcohol and Substance Use Reduction! Health Promotion and Capacity Building for Persons with Traumatic Spinal Cord Injuries

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Project Number: H133G010094
Start Date: January 1, 2002
Length: 36 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 01 $149,783; FY 02 $148,927
Abstract: Project Shake It Up provides individualized and self-directed supports in the areas of physical activity, recreation, life skills, health promotion, and prevention, including alcohol and substance use reduction, for people with SCI. The project attempts to motivate positive life changes and build the capacities of individuals with SCI through the development of peer support networks and self-advocacy. Project Shake It Up also builds the capacity of two local nonprofit organizations controlled and staffed primarily by individuals with disabilities: Shake-A-Leg, Inc., whose focus is recreation and rehabilitation, and PARI, a center for independent living. Project objectives include: (1) developing a culturally competent training and recreation program, including a manual that addresses independent living issues such as disability rights, self-advocacy, education, employment, transportation, sexuality, alcohol and substance use, and health promotion; (2) implementing and evaluating the Shake It Up program for health promotion, physical activity, and alcohol and substance use reduction; (3) establishing peer-support networks to provide long-term support for intervention participants; (4) increasing the capacity of Shake-A-Leg and PARI to promote alcohol and substance use reduction through health promotion and empowerment; and (5) disseminating the program nationwide by making the manual the Shake It Up model widely available.
Health Promotion for Women Aging with Disability

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Project Number: H133G000226
Start Date: July 1, 2000
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 00 $149,940; FY 01 $149,998; FY 02 $150,000

Abstract: This project studies whether an intervention to improve self-efficacy and connectedness improves health-promoting behaviors, which is related to improved physical and psychological health. The research is based on two hypotheses: First, regarding the effectiveness of the intervention: women aging with physical disabilities who participate in a health promotion workshop intervention report higher levels of connectedness and self-efficacy in disability management after the intervention and at a three-month follow-up, than women aging with physical disabilities who do not participate in the intervention; and second, regarding predictors of health outcomes and the mediating effect of health promoting behaviors: connectedness in social and intimate relationships and self-efficacy in disability management significantly predict health promoting behaviors, which predict physical and psychological health outcomes among women aging with physical disabilities, when severity of disability and socioeconomic status are controlled.
Field-Initiated Projects (FIPs)
Texas

Assessment of Social Communication Abilities Following Traumatic Brain Injury

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Project Number: H133G010152
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 01 $149,657; FY 02 $146,203

Abstract: This project is guided by a model of social communication that includes cognitive components, awareness, the social environment, and receptive, processing, and expressive components. Activities include: (1) adapting social skills measures used with other populations to test the receptive, processing, and expressive social communication abilities of persons with TBI and comparing the results to those of a group of matched control subjects; (2) assessing the relationship between social communication ability and functional outcome for persons with TBI and their family members; and (3) investigating the relationship between executive functioning abilities and social communication skills, in an effort to determine the cognitive functions underlying social skills impairment. The study is expected to result in a clinically feasible and meaningful way to assess social communication abilities, which can be a guide to clinicians in developing empirically driven interventions to improve social skills.
Quantitative Study of Anterior and Posterior Walker Usage Dynamics in Children with Cerebral Palsy

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Project Number: H133G010069
Start Date: November 1, 2001
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $149,995; FY 02 $149,991

Abstract: This study enables caregivers to make more informed decisions regarding proper walker selection and follow-up by comparing the effects of anterior walkers versus the effects of posterior walkers among ambulatory patients with spastic cerebral palsy. It also provides a quantitative foundation for improving future pediatric walker designs. A hallmark of this study is the acquisition of functional performance data using standardized mobility test instruments. Each child entered into the study is evaluated using the Gross Motor Function Measure (GMFM), in addition to the Pediatric Outcomes Data Collection Instrument (PODCI) at each stage of the study. The children also undergo standardized spasticity testing with the Ashworth and Tardieu assessment scales. Final statistical comparison/correlation of the quantitative (biomechanical) and functional assessment test results is used to streamline the walker evaluation process and offer a more practical tool for assessment and walker prescription.
Enhanced Upper Limb Motor Control by Reduced Synergistic Muscle Patterns and Spasticity After Chemodenervation

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Project Number: H133G020112
Start Date: September 01, 2002
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,995

Abstract: This research project assesses the impact of chemodenervation treatment on motor control in patients with spastic hemiparesis. Moreover, the project examines the neurophysiological mechanisms of improved motor control following chemodenervation treatment by utilizing state-of-the-art biomechanical analyses of motor abilities in combination with clinical measurements and consumer feedback related to patient-specific goals. The research targets hemiparetic stroke patients with functional limitations attributed to spasticity. The study identifies changes in spasticity, limb synergy, and functional reaching tasks using clinical and biomechanical measurements. This project aims to improve chemodenervation techniques through the knowledge imparted by the research.
Web-Based Telerehabilitation for Home Assessment and Monitoring

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Project Number: H133S020046
Start Date: September 20, 2002
Length: 6 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $75,000

Abstract: This project develops CosmoWeb, a therapy home monitoring and teleassessment system. Children with disabilities perform physical and occupational therapeutic exercises while playing interactive games featuring CosmoBot, a virtual-reality robot. The therapist remotely monitors prescribed exercises embedded in the games by viewing data that are automatically recorded during home therapy sessions. CosmoWeb consists of software for remote therapist/patient communication and a child-friendly computer interface system, Mission Control, designed to interact with CosmoBot’s games. Mission Control consists of devices that record upper-extremity movements and actions the child makes to interact with CosmoBot’s games. In the course of playing these games using body movement, or gestural, interfaces, the child carries out exercises designed to meet his or her therapeutic goals.
An Innovative Dialysis Regeneration Cartridge for Portable Hemodialysis

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Project Number: H133S020011
Start Date: November 4, 2002
Length: 6 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $75,000

Abstract: This project develops an innovative portable dialyzer that uses a highly effective dialysate regeneration cartridge to remove uremic toxins from dialysate. This involves immobilizing urease onto a novel ion-selective fiber, which also acts as an adsorbent for ammonium and other uremic toxins. Many end-stage renal disease (ESRD) patients are severely limited in the mobility and freedom of their life due to the time and effort of having life-sustaining hemodialysis treatment at hospitals. This device which would greatly improve the quality of life of ESRD patients and their families by allowing for effective and comfortable treatment at home, or even at work or school. The project objectives are: (1) to prepare optimally functionalized fiber for immobilization of urease and adsorption of uremic toxins; (2) to prepare and characterize ion-selective, urease-immobilized fiber; and (3) to determine the capacity of the ion-selective, urease immobilized fiber to eliminate urea and other uremic toxins from dialysate, while maintaining dialysate ion homeostasis.
Automated Telephone Survey with Speech Recognition

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Project Number: H133S020033
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $75,000

Abstract: This project develops and tests the feasibility of a system that automates the administration and scoring of the Medical Outcomes Study Short-Form 36 (SF-36) surveys. The SF-36 measures patients’ functioning and well being, and thus addresses the potential of individuals with kidney failure to live independently and contribute to the paid workforce. With this approach: (1) patients who have difficulty completing questionnaires because of low vision or low literacy are able to complete the SF-36 by telephone, unaided, and (2) patient data are available to the social workers, nurses, therapists, and physicians on a secure web site.
Technology for Access and Function

Rehabilitation, biomedical engineering, and assistive technology research has produced results that have helped people with disabilities to achieve and maintain maximum physical function, live in their own homes, attain gainful employment, and participate in and contribute to society. NIDRR’s research addresses a broad range of technology, including systems of public technology, such as telecommunications and the built environment and orphan technology for individuals. The research program also encourages universal design practices.

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Rehabilitation Engineering Research Centers (RERCs)
California

Technologies for Children with Orthopedic Disabilities

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Project Number: H133E003001
Start Date: November 1, 2000
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $650,000; FY 01 $760,000; FY 02 $915,172

Abstract: The goal of this RERC is to improve the lives of children with orthopedic disabilities. Activities include: (1) conducting research to advance the state of knowledge; (2) disseminating this information to children and their parents, clinicians, and research investigators; (3) developing and testing prototype devices that are useful and efficacious; (4) transferring prototypes that have proven value to the marketplace; and (5) educating engineering students about the special needs of children with orthopedic disabilities. The research and development program is focused on three of the most important life activities of children: manipulation, mobility, and play and recreation. Three projects address the manipulation needs of children with upper limb deficiencies; one documents current fitting practices of children’s prosthetic clinics throughout North America, while a second develops improved elbows and prehensors for young children. A third project adds a power assist to the mobile arm support, a product developed and commercialized during the current grant period. The mobility projects address the needs of children with cerebral palsy, spinal bifida, SCI, muscle disease, and other chronic conditions that affect the child’s ability to ambulate. The RERC develops lightweight orthotic components, evaluates the effectiveness of functional electrical stimulation to correct gait abnormalities in children with cerebral palsy, and determines the appropriate time to provide children with wheeled mobility. The RERC program conducts clinical trials at Rancho Los Amigos National Rehabilitation Center, Shriners Hospital LA, and Children’s Hospital LA. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Engineering Research Centers (RERCs)  
California

RERC on Spinal Cord Injury: Keep Moving: Technologies to Enhance Mobility and Function for Individuals with Spinal Cord Injury

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Project Number: H133E020732  
Start Date: November 1, 2002  
Length: 60 months  
NIDRR Officer: Kristi E. Wilson, PhD  
NIDRR Funding: FY 02 $899,974

Abstract: This RERC improves the lives of individuals with SCI by promoting their health, safety, independence, and active engagement in daily activities. Activities include: (1) monitoring trends and evolving product concepts that represent future directions for technologies in SCI, (2) conducting research to advance the state of knowledge, (3) disseminating the information to the population, (4) developing and testing prototype devices that are useful and effective and transferring them to the marketplace, (5) advancing employment opportunities for individuals with SCI, and (6) developing ways to expand research capacity in the field of SCI. The R&D program is focused on a key issue for individuals with SCI, the need to maintain mobility for as long as possible in order to enhance independent function. A survey of the user population determines where areas of greatest need exist. An active Mobile Arm Support for adults allows those with limited arm function greater independence. The shoulder-preserving wheelchair, gait training robotic assist device, and adaptive exercise equipment are all specifically geared to preserve or enhance mobility in individuals with SCI. A project on optimized wheelchair suspension keeps people mobile by increasing comfort and reducing tissue loading.
Rehabilitation Engineering Research Centers (RERCs)
California

Smith-Kettlewell Rehabilitation Engineering Research Center

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Project Number: H133E001002
Start Date: August 1, 2000
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 00 $650,000; FY 01 $650,000; FY 02 $650,000

Abstract: This RERC conducts research and development for persons who are blind or who have visual impairments. For infants, the project explores a new objective means of identifying and differentiating vision and cognitive impairments using visually-evoked potentials (VEPs), facilitating the design of optimal rehabilitation plans for each child. For individuals who have co-existing disabilities (in addition to blindness or a visual impairment), the project explores new solutions for wheelchair travel and various technologies for wayfinding. It also investigates independent travel technology for those with combined visual and cognitive impairments. For the older age group, the project explores practical tools allowing lay personnel to screen and assess visual impairments affecting problems unique to this age group, so they can be identified and referred to appropriate clinical or rehabilitation specialists quickly. For consumers who are deaf-blind, the project develops a new generation of communication devices to expand the functions performed by existing products. It also explores novel approaches to graphics access by persons who are blind or who are deaf-blind, using virtual reality, sonification, and force feedback technologies. An innovative program of vocational and daily living technology development includes intensive interaction with service providers and applications of computer vision.
Rehabilitation Engineering Research Centers (RERCs)
District of Columbia

Rehabilitation Engineering Research Center on Hearing Enhancement

Gallaudet University
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Principal Investigator: Matthew H. Bakke, PhD, 202/651-5335
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Project Number: H133E010107
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $900,000; FY 02 $900,000

Abstract: This RERC develops and evaluates technology to accommodate the needs of people with hearing loss, and disseminates related information in a form that is understandable to consumers, service providers, employers, and community leaders. These goals are accomplished by: (1) developing and evaluating improved, cost-effective technological aids for each of the target populations identified; (2) developing and evaluating instrumentation for detecting hearing loss at an early age; (3) providing improved access to modern telecommunications; (4) developing and evaluating specialized technology for community, home, and work environments; and (5) pursuing an active program of dissemination and training to ensure effective utilization of AT. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Engineering Research Centers (RERCs)
District of Columbia

Rehabilitation Engineering Research Center on Telerehabilitation

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Project Number: H133E990007
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $890,000; FY 99 $950,000; FY 00 $950,000; FY 01 $950,000; FY 02 $950,000
Other funding: FY 01 $1,040,000 (Assistive Technology Research Center, U.S. Army Medical and Material Command)

Abstract: This RERC conducts research on various models of delivering rehabilitation services at a distance: telerehabilitation. Its development activities focus on exploiting promising technology to benefit people with disabilities. Research projects encompass the areas of: Telehomecare—telesupport to caregivers of stroke victims; Telecoaching—remote jobsite coaching of persons with mental disabilities; Telehealth pain management—psychological intervention at a distance; and Behavioral Virtual Reality—investigation and training of social and attending behaviors using virtual environment technology. Further research efforts explore integrating telerehabilitation into today’s health care delivery system and finding effective means for extending rehabilitation services to the peoples of the Pacific Rim. The center is also engaged in development projects focusing on Telemonitoring, passive sensing of functional performance and health parameters using unobtrusive instrumentation; HomeTelerehab, interactive systems for remote delivery of therapy, assessment, teaching, and demonstration at home; and Teleplay, therapeutic play, including embedded teleassessment for children with disabilities. The Center establishes the following National Resource activities: (1) a Home Care and Telerehabilitation Technology Center; (2) a Home Care and Telerehab Education/Training Center; and (3) a Virtual Library on Telerehabilitation that serves as the focal point for information dissemination on telerehab-germane practice, policy, and technology. The work of the Center spans three institutions: The National Rehabilitation Hospital, The Catholic University of America, and Sister Kenney Rehabilitation Services.
Rehabilitation Engineering Research Center on Technology for Successful Aging (RERC-Tech-Aging)

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Principal Investigator: William C. Mann, PhD, 352/392-2617
Public Contact: Kathy Locklear, Information Coordinator, 352/392-2617 (V/TTY)

Project Number: H133E010106
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 01 $900,000; FY 02 $900,000

Abstract: The RERC-Tech-Aging conducts research, development, education, and information dissemination work on technology for successful aging. Projects of the RERC focus on the closely related areas of communications, home monitoring, and “smart” technologies. The technology driving the focus for this RERC is developing rapidly and requires an understanding of current and emerging technology areas, including wireless technology, computers, sensors, user interfaces, control devices, and networking. Successful integration of this technology into products and systems for older persons requires an understanding of their complex health, independence, and quality-of-life issues. The RERC-Tech-Aging tests currently available home monitoring products and demonstrates their effectiveness in relation to independence, quality of life, and health related costs. The RERC-Tech-Aging also identifies needs and barriers to home monitoring and communication technology, and addresses needs of special populations including rural-living, elders, and people aging with disability. The RERC-Tech-Aging brings together national expertise to meet this challenge, including major universities, industry leaders working in this area, major aging or aging-related organizations, major federal agencies that relate to funding or services in this area, other NIDRR-funded RERCs and RRTCs, and service-related organizations that assist in identifying study participants.
Rehabilitation Engineering Research Centers (RERCs)
Georgia

Rehabilitation Engineering Research Center on Mobile Wireless Technologies for Persons with Disabilities

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Project Number: H133E010804
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $1,000,000; FY 02 $1,000,000
Abstract: This RERC develops appropriate and effective applications of wireless technologies that enhance the independence of people with disabilities. With an overall goal of promoting independence and autonomy of people with disabilities, the RERC has two primary aims: (1) ensure equitable access to mobile wireless products and services by people with disabilities of all ages and abilities; and (2) investigate promising applications of mobile wireless technologies in support of employment, independent living, and community integration of people with disabilities. To accomplish these aims, the RERC is organized into three main sections: The Research Section investigates needs, policies, and promising applications of mobile wireless technologies to promote independence. Research initiatives include assessment of user needs, evaluation of emerging technologies, and policy initiatives that influence the practices, policies, and regulations that affect accessibility of wireless technologies. The Development Section includes projects that address universal access, investigation of new applications of wireless technologies, and innovative design solutions to support independent living of people with disabilities. The Training and Dissemination Section promotes the synthesis of new knowledge into practice.
Rehabilitation Engineering Research Centers (RERCs)
Georgia

Rehabilitation Engineering Research Center on Workplace Accommodations

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Project Number: H133E020720
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $899,997

Abstract: This RERC identifies, designs, and develops devices and systems to enhance the workplace productivity of people with disabilities. Universal design is a primary focus of the Center—making the design of products and environments usable by all workers to the greatest extent possible, without the need for adaptation or specialized design. The RERC’s research projects evaluate existing workplace products and services and determine areas where further product development is needed. The Center also studies archival materials to identify factors that contribute to successful or unsuccessful outcomes, and analyzes policies and practices that may influence the nature and availability of workplace accommodations for persons with disabilities. The RERC’s development activities focus on Remote Services and Universal Design in the Workplace. The Remote Services projects investigate ways that remote technologies such as videoconferencing and telework can be used to facilitate employment and provide technical support services to people with disabilities. The Universal Design projects work with manufacturers to develop new generations of universally designed and accessible products. Digital human modeling tools developed by the project provide visualizations of products or systems with human interaction and movement and reduce the need for preliminary physical prototypes. Products are developed for workers in office, manufacturing, retail/sales, service industry, and other environments. Finally, training, technical assistance, and dissemination activities on workplace accommodations and universal design promote the transfer of new knowledge into practice.
Rehabilitation Engineering Research Center on Prosthetics and Orthotics

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Principal Investigator: Dudley S. Childress, PhD, 312/238-6500
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Project Number: H133E980023
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000; FY 99 $900,000; FY 00 $900,000; FY 01 $900,000; FY 02 $900,000

Abstract: This RERC studies human performance as assisted by prosthetic and orthotic systems with the aim of engineering improved prostheses and orthoses through deeper scientific understanding of their function. Research and development activities include: (1) development of automated alignment methods for prostheses and orthoses, based on characterization of foot rocker shape during walking; (2) investigations of shock absorption properties of the human locomotor system and of prosthetic/orthotic systems; (3) mechanical considerations for improved crutch ambulation; (4) studies of standard human walking; (5) determination of prosthetic foot roll-over shapes and other characterizations; (6) examination of the effects of shoes on kinematic and kinetic parameters of gait; (7) development of a portable, real-time, 3-D gait evaluation system (3-D Direct Ultrasound Ranging System) that is able to provide estimates of walking quality (outcomes) using a simple technology; (8) development of a computer-based visualization aid that displays prosthetic arms on the human body before the arms are fabricated, to assist with decision making and fitting; (9) study of factors affecting reach when using a trans-humeral prosthesis; (10) development of humeral rotators, particularly for persons with bilateral trans-humeral limb loss; (11) advancement of design of prosthetic and orthotic (P & O) components and systems to technology transfer and utilization; (12) development and delivery of validated data-gathering instruments and a prototype database for collection, storage, and processing short and long-term information concerning outcomes of P & O fitting; (13) collaboration with the RERC on Land Mines and others engaged in related research; (14) graduate education (including persons with disability) in biomedical engineering, concentrating in prosthetics and orthotics; (15) publication of research work in scholarly journals; presentations at conferences; and interaction with consumers, clinicians, engineers, scientists, and the general public through a quarterly newsletter, telephone, Internet, and through personal meetings.
Rehabilitation Engineering Research Centers (RERCs)
Illinois

Rehabilitation Engineering Research Center: Improved Technology Access for Land Mine Survivors

Center for International Rehabilitation
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Principal Investigator: William Kennedy Smith, MD; Dudley S. Childress, PhD
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Project Number: H133E980031
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 98 $850,000; FY 99 $850,000; FY 00 $850,000; FY 01 $850,000; FY 02 $850,000

Abstract: This RERC is active in research, development, and demonstration; consumer surveys; education and training; utilization activities; technical assistance; and dissemination relating to improved technology access for land mine survivors. To accomplish these activities, the project: (1) maintains a database of rehabilitation service providers and assessments of current prosthetic technologies; (2) develops or adapts technical advances in the design, production, and delivery of appropriate assistive devices; (3) designs and disseminates education, training, management, and outcome programs; (4) acts as a clearinghouse, providing researchers, educators, administrators, and funders access to resources that have been developed to facilitate service delivery to amputees in the United States and other countries; (5) disseminates information through an international newsletter and international journals, telecommunications, presentations at international meetings, training programs, consultations, open discussions, and other types of communication; and (6) develops and disseminates specific programs and products that address the needs of amputees and service providers in low-income countries where the vast majority of land mine survivors live. The RERC also establishes an Advisory Council that includes consumers and practitioners.
Rehabilitation Engineering Research Center on Recreational Technologies and Exercise Physiology Benefiting Persons with Disabilities (RERC Rec-Tec)

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Project Number: H133E020715
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $899,536

Abstract: This program researches access to recreational opportunities and physical endurance of people with disabilities, targeting four primary areas: (1) increased access to fitness and recreation environments; (2) interventions to increase physical activity and recreation participation; (3) adherence strategies to reduce physical activity relapse and dropout rates; and (4) randomized clinical trials to evaluate improvements in health and function. Research and development projects include: (1) a comprehensive needs assessment that involves ongoing assessment of consumer needs as they pertain to existing and emerging recreational and fitness technologies; (2) research on the use of information technology and a newly designed environmental accessibility instrument for facilitating access to recreational and fitness environments and promoting improved health and function; (3) exercise physiology research on the use of “teleexercise” for promoting participation and for monitoring intensity and physiological/psychological outcomes of home-based exercise programs; (4) development of broadly applicable modification kits for retrofitting cardiovascular exercise equipment and determining the efficacy of the new adaptations in improving fitness, development of virtual exercise environments to promote exercise participation and adherence and to facilitate monitoring of health outcomes; (5) development of technology to allow users adaptive control of exercise machines; and (6) development of an online Rec-Tech solutions database on currently available recreational and fitness technologies allowing the RERC to produce a rapid and sustained impact by using information technology to make available solutions more accessible to consumers. Two training projects promote capacity building for future recreation, fitness, exercise physiology, engineering, and rehabilitation professionals, and two additional training projects support professional development.
Rehabilitation Engineering Research Centers (RERCs)
Illinois

RERC on Rehabilitation Robotics and Telemanipulation: Machines
Assisting Recovery from Stroke (MARS)

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Project Number: H133E020724
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $805,453

Abstract: This program centers its research and development on restoring function in hemispheric stroke survivors. Four projects assess four different approaches that have the potential to improve performance of the upper extremity, and one project attempts to restore locomotion. These projects include: (1) Robotic Therapy for Force Training of the Upper Extremity in Chronic Hemiparetic Stroke; (2) Gait Restoration in Hemiparetic Stroke Patients using Goal-Directed, Robotic-Assisted Treadmill Training; (3) Development of a Robotic System with an Augmented Reality Interface for Rehabilitation of Brain-Injured Individuals; (4) Rehabilitation of Finger Extension in Chronic Hemiplegia; and (5) A Home-Based Telerehabilitation System for Improving Functional Hand and Arm Movement Recovery Following Stroke. In addition to these projects, the RERC develops tools for training research and development of a variety of client populations including medical students, physician residents, graduate students in engineering and neuroscience, and allied health clinicians, including physical and occupational therapists. The broad intent is to develop devices that assist the therapist in providing rationally based, intensive, and long-duration treatments. This project is a collaboration of the Rehabilitation Institute of Chicago, the National Rehabilitation Hospital in Washington, D.C., Catholic University, the University of Illinois at Chicago, and the University of California at Irvine.
Rehabilitation Engineering Research Centers (RERCs)
Michigan

Rehabilitation Engineering Research Center on Ergonomic Solutions for Employment

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Project Number: H133E980007
Start Date: August 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $800,000; FY 99 $800,000; FY 00 $800,000; FY 01 $800,000; FY 02 $800,000
Abstract: This RERC combines ergonomic interventions, work and worksite modifications, assistive technologies, and medical interventions to facilitate placement of workers with disabilities, and helps prevent development of subsequent musculoskeletal illnesses and injuries. The Model System establishes a database to include information on a broad range of interventions and case examples as well as procedures for assessing workers, analyzing jobs, identifying accommodation needs, and selecting interventions, including ergonomic technologies. The comprehensive approach involving rehabilitation medicine and ergonomics culminates in a web-based Model System that can be used by rehabilitation professionals, employers, consumers, and organizations.
Rehabilitation Engineering Research Centers (RERCs)
New York

Rehabilitation Engineering Research Center on Technology Transfer

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Project Number: H133E980024
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $900,000; FY 99 $900,000; FY 00 $900,000; FY 01 $900,000; FY 02 $900,000

Abstract: This RERC improves the quality of life for people with disabilities by: advancing the methods of technology transfer through research, transferring technologies into products through development, and facilitating the commercialization of new and improved assistive devices. These three outcomes are accomplished through collaborations with academic, industrial, consumer, and government stakeholders. The Center, a partnership of technical, marketing, and consumer expertise and networks: (1) conducts research on the technology transfer process as it is applied to the field of assistive technology, and develops, validates, and disseminates comprehensive models of technology transfer; (2) applies the research results by implementing the technology transfer process through a development program; (3) identifies and transfers breakthrough technologies to industry through a demand-pull model, transferring at least three technologies annually; (4) identifies and transfers useful new inventions to the marketplace through a supply-pull model, transferring three to five products annually; (5) delivers training, dissemination, and technical assistance programs to stakeholders in the field; and (6) develops an online technology transfer course consisting of eight training modules accessible through the project’s web site. The dissemination program includes a state-of-the-practice conference and the development of a technology transfer program to be offered for presentation in year three. The Center functions as an intermediary and a catalyst, improving the process while expanding the network of stakeholders involved with the field. The end result: new and improved AT products available in the marketplace that benefit professional service providers, family members, and people with disabilities.
Rehabilitation Engineering Research Centers (RERCs)
New York

Rehabilitation Engineering and Research Center (RERC) on Universal Design and the Built Environment at Buffalo

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Project Number: H133E990005
Start Date: November 1, 1999
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $599,965; FY 00 $599,952; FY 01 $599,932; FY 02 $799,835
Abstract: The RERC on Universal Design and the Built Environment promotes the adoption of universal design. Research programs include the Prototype Anthropometric Database Project, a research database on anthropometrics of wheelchair users for application to ergonomic design, and The Buildings in Use Project that demonstrates the benefits of universal design by conducting post-occupancy evaluations of buildings currently in use. Product development efforts include development of prototypes for innovative universally designed products, evaluation and testing of these prototypes, and commercialization assistance to facilitate bringing each prototype to market. The Visitability Initiative conducts training and action research in eight cities to develop visitability demonstration projects, and is a collaboration with Concrete Change, a consumer advocacy organization focusing on making housing “visitable” by people with disabilities. The RERC’s activities also include universal design education and technical assistance, along with publication and dissemination of universal design resources.
Rehabilitation Engineering Research Centers (RERCs)
North Carolina

Rehabilitation Engineering Research Center on Communication Enhancement

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Project Number: H133E980026
Start Date: November 1, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $899,996; FY 99 $899,990; FY 00 $900,000; FY 01 $900,000; FY 02 $900,000

Abstract: This RERC uses innovative communications technologies to benefit researchers, engineers, rehabilitation service providers, developers, and users of alternative and augmentative communication (AAC) technologies. The project: (1) investigates attitudinal barriers toward technology use by elderly people with communication disorders, their listeners, and service providers; (2) studies the organizational strategies of adult AAC users to determine if preferences are predictive of performance using AAC; (3) studies how to improve AAC technologies for young children with significant communication disorders by evaluating learning demands and functional performance (also involves development of design specifications); (4) evaluates and enhances communication rate efficiency and effectiveness through the development of procedures and software technology that simulates and measures the performance of AAC technologies; (5) identifies barriers to employment, describes strategies to overcome them, documents design specifications for AAC technologies, and describes action plans to achieve successful employment outcomes; (6) increases employment opportunities for graduates of an employment and AAC program; and (7) develops a coordinated program that monitors and seeks out technology developments in both commercial form and prerelease development stages that affect the engineering and clinical AAC field.
Rehabilitation Engineering Research Center (RERC) on Universal Design and the Built Environment at NCSU

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Project Number: H133E990002
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $399,989; FY 00 $399,967; FY 01 $399,955; FY 02 $599,914
Abstract: This RERC improves the accessibility and usability of the built environment and advances the field of universal design. To achieve its goals, the RERC conducts an integrated program of research and development programs, training programs, and a comprehensive program of information and referral and technical assistance. The major Center research project is developing multidisciplinary environmental assessment tools to evaluate the complex and dynamic relationship between the individual and the environment. Another research project is documenting a set of case studies of successful universal design implementations. Development projects include creating model architectural plans and products that demonstrate maximum universal usability. Training activities include postsecondary and continuing education and supporting the biennial international conference on universal design.
Rehabilitation Engineering Research Centers (RERCs)
Pennsylvania

Rehabilitation Engineering Research Center on Wheeled Mobility

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Project Number: H133E990001
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $900,000; FY 00 $900,000; FY 01 $900,000; FY 02 $1,064,561
Abstract: The RERC on Wheeled Mobility investigates the use of dynamic seating for reducing
spasticity and enhancing seating comfort; investigates the biomechanical characteristics of soft tissue
related to the risk of developing pressure ulcers and the relationship between pressure measurements
and pressure ulcer incidence; develops and validates the use of outcomes measures for seating and
mobility intervention; and investigates the use of the web as a seating decision support tool for
consumers. This project also develops and evaluates a comparative data source for use in decision
support of wheelchair selection; an interface for integrating external devices with powered wheel-
cars; wheelchair seating standards; standardized postural measures; injury prevention wheelchair
technologies; and enhanced controls for powered wheelchairs.
Rehabilitation Engineering Research Centers (RERCs)
Pennsylvania

Rehabilitation Engineering Research Center on Wheelchair Transportation Safety

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Project Number: H133E010302
Start Date: November 1, 2001
Length: 60 months

NIDRR Officer: William Peterson
NIDRR Funding: FY 01 $868,840; FY 02 $899,057

Abstract: This RERC aims to improve the safety of wheelchair users who remain seated in their wheelchair while using public and private motor-vehicle transportation. RERC tasks investigate and develop new wheelchair tiedown and occupant restraint system technologies, including wheelchair-integrated restraints and universal docking concepts, that enable wheelchair users to secure and release their wheelchair independently and quickly, and use an effective occupant restraint system without the need for assistance. The RERC also researches the issues and factors involved in providing improved occupant protection to wheelchair-seated drivers and passengers in rear and side impacts, and uses a multifaceted approach, including in-depth investigations of real-world accidents, to investigate the incidence, severity, and causes of injuries to wheelchair-seated occupants in different sizes of vehicles and in different types of crashes and non-impact incidents experienced during vehicle motion. In particular, this RERC explores the need for, and suitability of, using different levels of wheelchair securement and occupant restraint in larger public transit vehicles, with the goal of recommending and developing equipment and systems that provide for a safe ride using equipment and procedures that are more compatible with the operational needs of the transit environment. The program includes a comprehensive research and development effort that involves consumers, manufacturers, students, clinicians, transport providers, and rehabilitation technology experts. The RERC also has active programs of information dissemination, training, and technology transfer using personnel, mechanisms, and facilities that have been previously established at the University of Pittsburgh/University of Michigan.
Rehabilitation Engineering Research Centers (RERCs)
Wisconsin

Rehabilitation Engineering Research Center on Information Technology Access

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Project Number: H133E980008
Start Date: June 12, 1998
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $1,350,000; FY 99 $1,350,000; FY 00 $1,350,000; FY 01 $1,350,000; FY 02 $1,350,000

Abstract: This RERC improves access by individuals with all types, degrees, and combinations of disabilities to a wide range of technologies, including computers, ATMs, kiosks, point-of-sale devices and smartcards, home and pocket information appliances, Internet technologies (XML, XSL, CSS, SMIL, etc.), intranets, and 3-D and immersive environments. As one component in a larger system of consumers, researchers, industry, and policy and public agencies, the Trace Center’s program is designed to work within the existing structure, supporting other components and coordinating its efforts to address the functioning of the whole. The program identifies strategies that can be used by industry to broaden the user base for their standard products, so individuals with as broad a range of abilities as possible are able to use standard products directly. Further, the Center targets specific compatibility and interconnection standards work to ensure that people who cannot use products directly are able to operate them using assistive technologies. The Center focuses on the use of targeted projects and collaboration, both national and international, to carry out the research, development, information dissemination, training, and standard-setting activities required. The approach is intended to be flexible, forward-looking, and broad in scope, yet focused on key access issues as defined by its consumer constituency and its research programs.
Rehabilitation Engineering Research Centers (RERCs)
Wisconsin

Rehabilitation Engineering Research Center on Telecommunication Access

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Project Number: H133E990006
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $675,000; FY 00 $675,000; FY 01 $675,000; FY 02 $675,000
Abstract: This RERC identifies telecommunication access barriers in current and future technologies, work with others in the field to identify solution strategies, test them, implement any necessary standards, and assist industry in transferring the ideas into their commercial products. Activities of the Center include research, applied research and development, training and technical assistance, and dissemination and utilization. Technologies being addressed include: (1) customer premises equipment (CPE) of all types, including phones, video phones, pagers, messaging systems, etc.; (2) telecommunication systems and services, including voice mail, interactive voice response systems, etc.; (3) network topologies; (4) telecommunications standards; and (5) next-generation multimedia telecommunication systems, including telecollaboration, virtual meetings, etc. The primary focus is on making these systems directly usable by people with all types and degrees of disability. A secondary focus is ensuring compatibility with assistive technologies such as TTYs, assistive listening devices, alternative input devices, and devices with alternative displays.
Rehabilitation Engineering Research Centers (RERCs)
Wisconsin

Rehabilitation Engineering Research Center on Accessible Medical Instrumentation

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Project Number: H133E020729
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $901,131

Abstract: The RERC on Accessible Medical Instrumentation: (1) increases knowledge of, access to, and utilization of healthcare instrumentation and services by individuals with disabilities; (2) increases awareness of and access to employment in the healthcare professions by individuals with disabilities; and (3) serves as a national center of excellence for this priority topic area. Specific research projects include: (1) Needs analysis for people with disabilities as both recipients and providers of healthcare services, and for manufacturers of healthcare instrumentation; (2) usability analyses to determine what makes certain medical instrumentation either exemplary or problematic yet essential to healthcare service delivery; (3) accessibility and universal usability analysis to identify classification and measurement approaches that could be used to explore metrics for accessibility of medical instrumentation; and (4) policy analyses to explore how medical policies affect healthcare utilization and employment in the healthcare professions of persons with disabilities. Specific development projects include: (1) development of tools for usability and accessibility analysis; (2) development of modified and new accessible medical instrumentation; (3) monitoring of, and involvement in development of, emerging, accessible healthcare technologies; and (4) development of design guidelines for accessible medical instrumentation and model policies for healthcare service delivery.
Wayfinding Technologies for People with Visual Impairments: Research and Development of an Integrated Platform

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Project Number: H133A011903
Start Date: December 1, 2001
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $449,065; FY 02 $449,895

Abstract: This project develops a hardware and software platform that provides accessible location and navigation information for people who are blind or who have visual impairments who are traveling in indoor and outdoor environments. Development activities focus on creating an effective user interface and developing a common hardware and software platform that exploits the Global Positioning System (GPS) and other current and emerging navigation technologies. Specific activities include integrating navigation aids that have been developed by Sendero LLC (GPS Talk) and by the University of California-Santa Barbara/CMU group headed by Jack Loomis (the Personal Guidance System, or PGS). The platform also accesses information from other devices, including Talking-Signs® type devices, intersection signalization controls, an indoor digital sign system to be developed during this project at the University of Minnesota, a spatialized tactile stimulator to be developed at UCSB, a dead reckoning pedestrian navigation system, and cellular phones with GPS capabilities. For navigating in outdoor environments, a system could aid pedestrians who are blind at complex intersections and roundabouts, and devices could assess and prevent veer.
Disability and Rehabilitation Research Projects
California

Community Research for Assistive Technology

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Project Number: H133A010702
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Dawn Carlson, PhD, MPH
NIDRR Funding: FY 01 $299,910; FY 02 $299,893

Abstract: This project increases the capacity of the independent living community to work with its members and stakeholders to collect research data on access and use of AT to improve the lives of people with disabilities. Using a participatory research approach, the California Foundation for Independent Living Centers (CFILC) is using an ecological model to develop cumulative research data on the use of and access to AT by people with disabilities. University researchers train participants in research methods and assist with data collection and analysis. Community advocates conduct focus groups, surveys, and action research in their respective regions. Advocates also train university students in community-based research related to AT and independent living.
Information Technology Technical Assistance and Training Center (ITTATC)

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**Project Number:** H133A000405
**Start Date:** November 1, 2000
**Length:** 60 months

**NIDRR Officer:** William Peterson

**NIDRR Funding:** FY 00 $1,500,000; FY 01 $1,500,000; FY 02 $1,500,000

**Abstract:** This project provides information, training, and technical assistance to support the implementation of Section 508 of the Rehabilitation Act and Section 255 of the Telecommunications Act to industry, state officials, trainers and consumers. The Center promotes the benefits of universal design to technology manufacturers, product designers and engineers, technical writers, marketers, and purchasers of IT. It also works closely with federal regulatory agencies including the Federal Communications Commission, the Access Board, the Department of Justice, and the General Services Administration to advance understanding and knowledge utilization of approaches to the requirements of Sections 255 and 508 through training and technical assistance activities. The Information Technology Technical Assistance and Training Center is a collaborative project of the Center for Assistive Technology and Environmental Access, World Institute on Disability, University of Iowa Law, Health Policy and Disability Center in Washington DC, Trace Center at the University of Wisconsin Madison, NIDRR’s Disability and Business Technical Assistance Centers, and ITTATC’s National Advisory Council among others.
Disability and Rehabilitation Research Projects
Iowa

Technology for Independence: A Community-Based Resource Center
(TI:CBRC)

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Project Number: H133A021801
Start Date: November 1, 2002
Length: 60 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $299,965

Abstract: The CBRC builds and enhances the capacity of community-based and consumer-directed disability organizations to design, implement, and disseminate research activities and projects that promote environmental access and use of technology for independence. The CBRC uses a combination of implementation strategies such as leadership development, training, and technical assistance activities, web-assisted audioconference training, distance education, and three annual onsite symposia in Iowa City, Houston, and Washington, D.C. CBRC activities are directed to selected research teams, research centers, community-based disability organizations, and University research centers. Using multi- and inter-disciplinary models, the CBRC builds and enhances the capacity of these and other entities to conduct research that is both scientifically rigorous and relevant to real-world social, policy, and legal interests. The research team framework pairs researchers from community-based organizations with researchers from university-based research centers to improve existing and future collaborative relationships. The research pairs comprise individuals with diverse backgrounds, in terms of their disability type and severity, ethnicity, and socioeconomic experiences. The participants form close working relationships designed to advance knowledge in the areas related to technology for independence and environmental access. The project merges the national experience and expertise of ILRU regarding independent living and principles of choice and self determination, with the nationally recognized research expertise of LHPDC in the areas of technology access and use, employment policy, and civil rights.
Disability and Rehabilitation Research Projects
Kansas

Mental Retardation and Technology Disability and Rehabilitation Research Project

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Project Number: H133A010602
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 01 $299,871; FY 02 $299,778

Abstract: This project increases the ability of people with mental retardation and other cognitive disabilities to use electronic and information technology as well as assistive and universally designed technologies. It examines current technology design features, gaps that exist in its utilization, what state-of-the-art technology exists or is emerging that would provide benefits, and what modifications to existing or new technology would enhance this population's inclusion in the community and integration into the workplace. The project includes two national consensus conferences, in conjunction with the national conferences held annually or semi-annually by American Association on Mental Retardation (AAMR) and The Arc of the United States, to address these issues. Additional activities include reviewing and synthesizing the extant literature, canvassing existing disability-related technology advocates and associations (including Tech Act Centers and related entities), and conducting focused interviews of key stakeholders. The project also includes a Special Interest Group on Technology and Mental Retardation through the AAMR, which allows stakeholders in the field the opportunity to participate in all project activities. A national expert advisory panel consisting of representatives from national disability organizations, manufacturers, people with mental retardation, experts in the field, and parent/family representatives are involved in all consensus-building activities and advise the project through its duration. The project is a collaboration of the Beach Center on Disability at the University of Kansas, The Arc, the AAMR, AbleLink Technologies, the Coleman Institute on Cognitive Disabilities, the Self-Advocate Coalition of Kansas and the Joseph P. Kennedy Jr. Foundation.
Disability and Rehabilitation Research Projects
Missouri

Assistive Technology in the Community

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Project Number: H133A010701
Start Date: January 1, 2002
Length: 60 months

NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 01 $300,000; FY 02 $300,000

Abstract: This project promotes AT as a means of increasing participation in major life activities by people with disabilities. Project activities include: (1) assessing the use, disuse, injury, and effects that AT has on the participation of people with disabilities in major life activities, to determine what technologies are of the most benefit in community settings; (2) implementing a community-based AT program in collaboration with Paraquad, a nationally recognized Center for Independent Living, to improve the satisfaction of participants in their self-chosen life activities; (3) educating consumers, independent living staff, educators, health care professionals, AT industry leaders, and public policy-makers about the influence AT has on major life activities.
Disability and Rehabilitation Research Projects  
North Carolina

Advancing Assistive Technology Outcomes

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Project Number: H133A010401  
Start Date: November 1, 2001  
Length: 60 months  
NIDRR Officer: Carol Cohen  
NIDRR Funding: FY 01 $449,787; FY 02 $449,932  
Abstract: This program advances the field of AT outcomes measurement. Research activities include: (1) performing a critical analysis of existing approaches to measurement and further developing instruments that are promising; (2) identifying unmet needs and assessing barriers to AT outcomes measurement; and (3) undertaking a prospective longitudinal study of factors associated with assistive device adoption, use, and discontinuance. Development activities include: (a) developing and evaluating independent electronic data collection or computer-assisted systems for the capture, analysis, and interpretation of AT outcomes information; (b) developing and evaluating improved methods and systems for communication of outcomes information among significant stakeholders; (c) automatic log file performance data-capturing for AT outcomes assessment; and (d) development of new or improved AT outcomes tools.
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Project Number: H133A010610  
Start Date: October 1, 2001  
Length: 60 months

NIDRR Officer: Richard E. Wilson II, EdD  
NIDRR Funding: FY 01 $300,000; FY 02 $300,000

Abstract: This project improves the access and use of electronic mail by individuals with cognitive disabilities resulting from brain injury. The Internet’s email component has created an unparalleled communication network linking people for commercial and social purposes. It holds tremendous potential for lessening social isolation, one of the most pervasive and devastating consequences of brain injury. However, virtually nothing is known about what modifications are required to provide successful access to this technology to people with cognitive disabilities that result from brain injury. In addition, the diverse cognitive impairments confronting people with brain injury render an enormous challenge to the development of assistive devices that could improve accessibility to email. Activities of this project include: (1) identifying the wide range of issues critical for long-term, effective use of email by people with cognitive disabilities. (2) developing a diagnostic protocol, a cyber-evaluation of the potential of a person with cognitive disabilities to use electronic communication; (3) developing a software toolkit that allows caregivers, support persons, and professionals to fit an individual user with a customized email system; (4) creating a virtual clinic that supports widespread dissemination and use of these materials by cognitive rehabilitation professionals. An open-source software site on the web allows other worldwide researchers to use the new tools and contribute tools of their own.
Information Technology for Independence: Community-Based Research

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Project Number: H133A021916
Start Date: January 1, 2003
Length: 60 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $299,945

Abstract: This project explores methods and technologies to mitigate barriers to computer and Internet use encountered by people with disabilities. These barriers include basic ownership and availability barriers, lack of accommodations for functional limitations, psychological barriers arising from lack of coaching or mentoring, and the inaccessibility of the majority of web sites for individuals with certain disabilities such as visual impairment or dyslexia. The playing field of computer ownership and Internet availability may be leveled in part by having public computer stations, such as at centers for independent living. Functional barriers can be mitigated with AT. AT cost issues and psychological barriers may be met partially through availability of devices and coaching. Provision and evaluation of these accommodations is the first major research task of this project. Computer laboratories are maintained in two community-based locations to test the range of accommodation possibilities, including the match of correct assistive device to the individual and appropriate coaching and mentoring. The second research task in this project is to develop and evaluate a new approach to Internet accessibility through use of a gateway server. This gateway should be able to deliver the contents of any web site, whatever its level of accessibility, by transforming the contents into the most accessible format for any user, as Google does for personal digital assistant (PDA) users. The gateway will promote the accessibility of the Internet without requiring that commercial web sites follow promulgated guidelines or standards for users with disabilities, something that web developers often seem to resist.
Disability and Rehabilitation Research Projects
Virginia

Assistive Technology and Cognitive Disabilities

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Project Number: H133A010607
Start Date: November 1, 2001
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $299,982; FY 02 $299,379

Abstract: This project assesses the use of several types of information technologies by children and adults with cognitive disabilities, specifically individuals with TBI and mental retardation. Outcomes include: (1) a catalog of existing portable Devices for Memory and Organization (DMO), (2) a list of features that enhance or inhibit use of these general purpose and special-use technologies, (3) results of needs surveys regarding use of these technologies, (4) white papers describing project findings, (5) tip cards to assist families in purchasing devices, (6) stronger partnerships between the consumer and research and development communities, and (7) recommendations for memory and organization device modifications and features for individuals with brain injury and mental retardation. The Brain Injury Association, Inc. leads and administers this collaborative partnership, which includes the Traumatic Brain Injury Model Systems Projects at Moss Rehabilitation Research Institute and Spaulding Rehabilitation Hospital, the Institute on Disabilities/Center for Excellence on Developmental Disabilities at Temple University, and the University of Akron.
Disability and Rehabilitation Research Projects
Wisconsin

**ATOMS Project: Assistive Technology Outcomes Measurement System**

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**Project Number:** H133A010403
**Start Date:** October 1, 2001
**Length:** 60 months
**NIDRR Officer:** Carol Cohen

**NIDRR Funding:** FY 01 $450,000; FY 02 $450,000

**Abstract:** The ATOMS Project (Assistive Technology Outcomes Measurement System) targets the definition and pre-development phases of a next-generation AT outcomes measurement system. A comprehensive needs assessment, prototype instrument development, and consensus building activities frame an integrated set of research and development activities to address urgent needs to identify components of a future AT outcomes measurement system. In addition, these activities generate information about the relationships of AT outcomes factors that produce a better understanding of AT use and abandonment.
The Effect of Ankle-Foot Orthotic Design on Hemiplegic Gait

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Project Number: H133G000004
Start Date: June 1, 2000
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 00 $149,686; FY 01 $149,686; FY 02 $149,686

Abstract: This project defines the clinical criteria for optimal orthotic prescription in persons who have had a stroke. The study originates from the identification of significant lower extremity weakness in a recent study of recovery of walking in patients after stroke. A pilot survey of 10 patients who had been prescribed an ankle foot orthosis (AFO) after discharge from inpatient rehabilitation found 40 percent of the respondents were no longer using their orthosis. Reasons for the abandonment included improved walking capability, inability to don the AFO independently, and lack of improvement in walking. The results of this pilot indicate that the orthoses are not fully meeting the needs of this patient population. There is a need to develop criteria for orthotic prescription based on the patient’s lower extremity strength and muscle tone. In concert with the development of definitive prescription criteria, patients need to be provided with information as to the purpose of the orthosis and what changes in their walking are realistically expected.
Robust, Low-Cost, Refreshable Braille Display

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Project Number: H133G000047
Start Date: July 1, 2000
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 00 $149,930; FY 01 $149,900; FY 02 $149,905

Abstract: This project conducts research to develop a refreshable braille cell that is inexpensive, environmentally robust, and extensible to two-dimensional (page) braille displays. The project capitalizes on microelectromechanical systems (MEMS) fabrication methods and novel electroactuation technology to make braille cells that are significantly lower in cost than those currently available. The purpose of the work is to establish a process for the construction of refreshable braille displays that is not limited to a single line of braille characters and that creates more affordable devices than existing refreshable displays, which often cost $5,000 or more. Goals include: (1) demonstrating braille dot actuation that meets essential force, response time, power dissipation, and other requirements; (2) designing and building several prototype braille cells; and (3) testing the braille cells with experienced braille readers.
Development of a Transitional Ortho-Therapeutic Walker (TOTWalker) for Preschool Children with Physical Disabilities

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Project Number: H133G990103
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $149,941; FY 00 $149,978; FY 01 $149,998; FY 02 (No-cost extension through 3/31/2003)

Abstract: This project develops and evaluates a new and innovative support walker that allows children with physical disabilities to maneuver in the indoor environments of home and school and to approach people and manipulate objects. The Transitional Ortho-Therapeutic Walker (TOTWalker) is designed primarily for children with cerebral palsy, TBI, or developmental delay, who are 12 months to 5 years of age and who have no means for self-directed, upright mobility. The TOTWalker provides a highly maneuverable and efficient means for achieving indoor mobility. It also provides an efficient means for achieving mobility as measured by distance and speed of travel, and increases a child’s accessibility to the environment.
Optimizing Assistive Technology Service with Video Teleconferencing

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Project Number: H133G990087
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $150,000; FY 00 $149,997; FY 01 $150,000; FY 02 (No-cost extension through 3/31/2003)

Abstract: This project develops an interactive video teleconferencing (VTC) protocol to provide expert AT evaluations to individuals with significant physical and speech disabilities and their local support teams living in rural or underserved areas. The VTC protocol includes methods, equipment, and materials specific to the provision of augmentative communication, environmental control, and computer access evaluations to improve independent functioning in daily living, academic settings, employment, and leisure activities. The VTC protocol is developed during video teleconferencing evaluations by a specialized team with extensive experience in these types of AT.
The Learning and Transfer of Prosthetic Control

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Project Number: H133G000024
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $149,011; FY 01 $149,011; FY 02 $148,900

Abstract: By studying the use of a simulated body-powered upper-extremity artificial limb, this project hopes to reduce the learning time required to use a prosthetic limb effectively and to decrease the unusually high rejection rates for people with amputations fitted with a new prosthesis. Project objectives include: (1) describing how people learn to control and coordinate body-powered upper-extremity prostheses, by assessing tasks related to daily living, in regard to changes in movement strategies, the rate at which learning occurs, and the degree to which changes in performance are maintained over a retention interval; (2) understanding bilateral transfer of movement components used to reach, grasp, transport, and apply appropriate pressure to objects; and (3) determining whether the type of prosthesis (i.e., voluntary opening and voluntary closing) influences the rate at which an individual achieves functional control of activities related to prosthetic manipulation. After a thorough understanding of how people learn prosthetic control is developed, the simulator could be successfully employed after amputation, up to prosthesis fitting, to familiarize patients with prosthesis use and control skills. Findings could also provide therapists with new strategies for training people with amputations to regain functional independence with a newly acquired artificial limb. Finally, the experiments contribute to the development of a theoretical knowledge base for clinical practice.
Automatic Generation of Optimal Tactile Graphics

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Project Number: H133G020103
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $149,700

Abstract: This project develops and implements image manipulation algorithms optimal for generating binary tactile graphics. Specifically, the following methods are optimized for the automatic translation of images to binary representations appropriate for tactile display: (1) Edge Detection—boundaries in images often represent important context queues; extracting edges allows these queues to be tactiley represented. This can be accomplished in a multi-resolution approach allowing the user to control the detail level presented. (2) Region Segmentation—graphic content can often be separated into distinct regions, or objects. While edge detection operations frequently yield broken boundaries, resulting in confusing tactile representations; segmentation can produce closed boundaries optimized to retain object integrity that can be combined with texturing procedures. (3) Tactile Texturing—binary texturing can be introduced to yield tactile information on the image gray level or color; such texturing, or halftoning, methods can be adopted from the literature on visual halftones and optimized specifically for tactile representations. The efficacy of each method is tested utilizing human subjects and the results are utilized in the optimization of each algorithm. Software conversion routines and printing algorithms are also developed that allow the methods to be used with existing software packages, such as word processors and web browsers, and to enable direct printing on existing hardware, such as the TIGER printer and microcapsule paper.
Personalized Synthetic Speech Using ModelTalker: Development and Evaluation

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Project Number: H133G990182
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 12/31/2002)

Abstract: This project allows a sample group of consumers with ALS to capture their own voice for use in an experimental alternative and augmentative communication (AAC) device called ModelTalker. The new “corpus-based” speech synthesizer is capable of capturing voices and producing speech that can range in quality from that of recorded natural speech to high quality synthetic speech and produce synthetic speech that can sound like the individual, and can additionally “play back” utterances that were not actually recorded, but have been constructed (synthesized) from bits of recorded speech. The project goals are: (1) to improve the voice capture procedures for creating personalized voices, (2) to modify aspects of the synthesis and voice capture software to make them more user friendly, (3) to prepare documentation and tutorial materials to allow people who are not speech scientists to prepare their own personalized voices, and (4) to evaluate the voice capture procedures and the synthesizer itself with one population of people who can benefit (people with ALS). The project is developing an optimal list of utterances for talkers to record for ModelTalker, a list that is as short as possible without compromising the quality of the resulting synthetic speech. Once the list is optimized, the output from ModelTalker is compared to other synthesizers commonly used in AAC devices. Based on the results of this evaluation, the list, the ModelTalker, or both are modified as needed.
Specifying the Facilitative Effects of Animation on the Understanding of Action Word Representatives

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Project Number: H133G990115
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $149,964; FY 00 $149,920; FY 01 $149,979; FY 02 (No-cost extension through 5/31/2003)

Abstract: Using a customized computer-based assessment protocol, this project examines the differential ability of several types of graphics (static and animated) to convey the meaning of action word representations. Picture-based language representations afford access to augmentative and alternative communication (AAC) options for many individuals who otherwise would be unable to benefit from communication enhancement approaches. Some new products in the AAC marketplace offer consumers the feature of animation. While it has been presumed that animation would make the meaning of verb representations more salient, this position has not been proven, and it may in fact be the case that the complexity of the linguistic task is affected by the complexity of the representation. Six varied representational types are investigated with children with typical development, children with disabilities, adults with developmental disabilities, and adults with acquired cognitive disabilities. Further, the investigators attempt to determine which characteristics of action representation positively affect performance.
An Upper Limb Orthosis for People with Muscular Dystrophy

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Project Number: H133G000117
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: William Peterson

Abstract: This project develops an orthosis that provides a full range of movement for people with upper-limb weakness while still supporting their arms against gravity. For a person whose sensory system is intact, the orthosis uses their sensory system to augment their residual motor ability. It provides proprioception, an essential part of an effective interface between the human and the orthosis. Five prototypes are developed and clinical trials with twenty consumers are performed. Upon completion of the evaluation and analysis phases, the technology is transferred to a private company. The expected result is a relatively inexpensive, functional, and well-concealed assistive device that provides the opportunity for educational, vocational, and social interaction for thousands of individuals with upper-extremity motor disabilities.
The Development of a Tool to Enhance Communications Between Blind and Sighted Mathematicians, Students, and Teachers: A Global Translation Appliance

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Project Number: H133G010046
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $149,540; FY 02 $134,111
Abstract: This project builds a translator for several mark-up notations used in scientific, mathematic, engineering, and technological fields. The primary difficulty encountered by students with visual impairments in pursuing studies in science, mathematics, engineering or technology is how to read and write mathematics. To overcome the limited expressiveness of six-dot braille characters, a plethora of notations for marking-up mathematics have been devised, including Nemeth Math code, Marburg code, the French standard, the Stuttgart standard, and others. These notations are braille-based and designed specifically for people with visual impairments, and are not known to sighted individuals; as a result, written technical communication between individuals who are sighted and individuals who have visual impairments is quite difficult. Further, communication between individuals who have visual impairments is also difficult when different notations are used. The new tool allows free conversion among the Marburg code, Nemeth code, Latex and MathML by developing a common intermediate format (CIF) for representing mathematics, and uses logic programming and denotational semantics to translate between supported notations and the CIF. The CIF is also used to develop a mark-up notation independent auditory browser for the understanding of complex mathematical expressions by users with visual impairments. The auditory browser conveys the structure of a mathematical expression as well as its content via speech output. The user also has the ability to navigate the expression interactively and focus on its subparts in order to understand the expression better.
Field-Initiated Projects (FIPs)
Illinois

Neuromuscular Reorganization to Improve the Control of Artificial Limbs

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Project Number: H133G990074
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $149,900; FY 00 $149,512; FY 01 $149,780; FY 02 (No-cost extension through 5/31/2003)

Abstract: This project is concerned with improving myoelectric control of powered prostheses using nerve-muscle grafts. Currently, people with upper limb amputations can only control one joint at a time with myoelectric prostheses. By grafting the residual nerve endings to muscles in or near an amputated limb, it may be possible to produce additional, independent surface electromyographic (EMG) signals. The muscle would essentially be used as a biological amplifier of the nerve signals. These additional myoelectric signals could be used to control multiple joints simultaneously in externally powered prostheses. This approach has great potential for improving the functional use of upper limb prostheses.
Cost Effectiveness of a Computerized Oral Reading Treatment for Aphasia

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Project Number: H133G010098
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $149,470; FY 02 $149,892

Abstract: This study evaluates the efficacy and cost-effectiveness of an innovative, computerized treatment program for individuals with aphasia, a communication disorder and chronic condition. Aphasia requires long-term treatment to ensure that individuals can participate in a full range of vocational, recreational, and social activities. However, recent health care changes have seriously curtailed the amount of treatment received by patients with aphasia. In this environment effective treatments should be developed that can be easily administered and delivered at minimum cost. Oral Reading for Language in Aphasia (ORLA) was originally developed to improve reading comprehension in individuals with aphasia. Preliminary studies indicate that (ORLA) is effective in improving reading comprehension in patients with all types of aphasia. In addition to improvements in reading comprehension, cross-modal generalization occurs in some patients, with improvements in auditory comprehension and oral expression evident. The present study compares changes in communication performance for a group of aphasic individuals receiving ORLA from a speech-language pathologist and a group receiving a computerized version of the ORLA treatment.
Field-Initiated Projects (FIPs)
Iowa

Computer Training Materials for Deaf-Blind Individuals

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Project Number: H133G020196
Start Date: August 1, 2002
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $148,870

Abstract: This project creates a comprehensive array of computer training materials tailored to the needs of people who are deaf-blind. Objectives include: (1) developing 45 computer tutorials written for people who are deaf-blind; (2) conducting three seminars to provide information and training to VR professionals and others regarding computer access by people who are deaf-blind; and (3) disseminating training materials to agencies serving people who are deaf-blind. The tutorials use an innovative approach that trains people who are deaf-blind or blind to use a computer with assistive technology. This includes a keyboard-only approach to the graphical Windows interface and information and step-by-step exercises that specifically address the screen reader-braille display combination the individual is using to operate mainstream or communications programs (each screen reader and braille display uses unique keystrokes, configurations, and feedback). This project provides people who are deaf-blind with computer skills they need to obtain and retain good jobs and to pursue computer-based communications and recreational activities. It also provides VR professionals, consumer organizations, and other private and public agencies with professionally developed tutorials they can give to clients for independent work or use in one-on-one or group computer training.
Field-Initiated Projects (FIPs)
Kansas

Reusing AT/DME Acquired Through Public Funds: Developing a Cost-Neutral, Consumer-Driven Program

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Project Number: H133G010102
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $149,740; FY 02 $149,991

Abstract: This project builds a consumer responsive, cost-neutral program to reuse and redistribute durable medical equipment. The project addresses state and national needs in three critical ways. First, it increases access to durable medical equipment and AT (including previously used technology) that promotes the likelihood that people are able to reach personal goals related to independent living, employment, and improved social lives. Second, using previously owned equipment in good condition spreads the benefit of limited state and federal resources across more people. And finally, the reuse program reduces the consumption of natural resources such as aluminum, glass, plastics, and fuel. The Reuse Program is composed of four interrelated components, including a data tracking system, a consumer follow-up system, a reuse system through a network of statewide equipment providers, and marketing. This project is a collaboration of the Technology Act grantee for Kansas, the Assistive Technology for Kansans project (ATK), Kansas Medical Policy (Medicaid), Durable medical equipment providers, and consumers.
Access to Convergent Media

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Project Number: H133G990105
Start Date: August 1, 1999
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 7/31/2003)

Abstract: This project attempts to make it possible for people who are blind or who have visual impairments to use convergent media effectively, by influencing industry standards and developing new media delivery technologies. “Convergent media” refers to programming and services growing out of the intersection of broadcast and cable television, digital television, PC, and Internet technologies. The project objectives are: (1) to propose and develop standard approaches to tag, parse, and present data so that electronic program guides and advanced services are accessible; (2) to develop software/hardware specifications for a prototype system or systems, that enables orientation, navigation, and feedback when using electronic program guides; (3) to collaborate on development of the prototype access system and integrate it into an alpha advanced cable set-top box; and (4) to identify barriers to using convergent media, outline solutions, and suggest methods for carrying out such solutions.
Access Solutions for Rich Media: Tools, Pathways, and Resources

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Project Number: H133G000109
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 00 $150,000; FY 01 $150,000; FY 02 $150,000

Abstract: The Access to Rich Media Project was established to ensure that people with visual or auditory impairments can access rich media that is made available online. Project staff work with researchers, technology developers, web designers, and consumers to develop, test, and disseminate solutions to facilitate improvements in the accessibility of rich media. The project: (1) provides web designers, multimedia developers, and access technology researchers with version 2.0 of MAGpie, a captioning and description tool for use with a variety of media technologies; (2) runs the Rich Media Accessibility Resource Center, with examples of accessible rich media, information about available tools for rich media, links to a range of relevant resources, and discussion about multimedia access issues and solutions; and (3) generates research findings from annual focus groups with web users who have visual impairments or who have auditory impairments.
Access to Digital Television

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Principal Investigator: Gerry Field
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Project Number: H133G010170
Start Date: August 1, 2001
Length: 36 months

NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: In the transition of the nation’s television system from analog to digital television (DTV) broadcasts, this “DTV Access” project represents the needs of people with sensory disabilities. Serious technical challenges may prevent Americans from participating in the pending transformation of communications and program delivery technologies if they are deaf, hard-of-hearing, blind or if they have low vision. This project leads the effort to ensure that the next-generation of DTV equipment does not replicate current problems or create new ones in the need to comply with the Federal Communications Commission-mandated digital transition. Project staff are working with broadcasters and standards-setting bodies to develop standards and open protocols, and to support implementation of captions and descriptions in DTV broadcasts. The DTV Access project addresses additional challenges that arise when broadcast programming is delivered via cable, satellite, Internet or wireless technologies. It also works to include people with sensory disabilities in the audience for the wealth of new program enhancements, interactive capabilities, and public and private data services that DTV promises to deliver. The project unites industry, standards-setting bodies, regulatory agencies, and consumers who have disabilities in a national, high-profile collaboration to provide equal access for people with disabilities to DTV programming, enhancements, interactive components, and data services.
Beyond the Text: Access to Images, Audio, and Multimedia in eBooks

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Principal Investigator: To be announced
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Project Number: H133G020091
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $150,000

Abstract: This project researches, develops, and disseminates recommended practices and demonstration models that enable access to and understanding of images, audio, and multimedia presented within electronic book (eBook) formats for users who are blind or deaf. The eBook format offers online and portable access to all manner of traditional print products, including fiction, nonfiction, textbooks, professional journals, and other content, via personal computer, laptop, library systems, dedicated devices, and personal digital assistants (PDAs). Educators, trainers, and publishers are beginning to explore the learning potential of interactive web-based textbooks that include multimedia (audio and video) and study tools such as highlighting, note-taking, bookmarking, and direct Internet connections to references and other online learning resources. All of these features in the eBook format hold great promise to enhance and improve access to information for users with disabilities. Accessible eBooks could offer learners of all ages who are blind or deaf equal and ready access to trade, text, or scholarly books, training materials, online research libraries, and all manner of electronically published resources—a major leap forward in leveling the playing field for people with disabilities at home, at work, and at school. In order to accomplish this, eBook standards and systems must be designed to facilitate accessible navigation as well as caption and audio description displays, and eBook materials must be properly formatted for screen readers and/or refreshable braille displays. eBook content must include ancillary audio and text information to enable navigation, and to make images, audio, and multimedia accessible.
Field-Initiated Projects (FIPs)
Massachusetts

Word for Word: Developing an Enhanced Tool for Individuals with Disabilities

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Project Number: H133G000204
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 00 $149,998; FY 01 $149,996; FY 02 $150,000

Abstract: This project creates, documents, and tests new speech recognition technology. Tasks include: (1) designing an innovative software product, Word for Word, that addresses the writing needs of people with a wide range of disabilities by integrating two powerful text entry modes, speech recognition and word prediction, in an interface based on principles of universal design; (2) working in collaboration with Don Johnson, Inc., a leading producer of special needs software, on the manufacture and marketing of this product, based on the prototype; (3) working in collaboration with a producer of speech recognition software (i.e., Dragon Systems or IBM Corporation) on the design and implementation of the proposed product based on the prototype; (4) developing materials to support the use and dissemination of the product; and (5) testing the educational outcomes associated with the use of the product.
The Use of Virtual Reality Technology for Assessment of Driving Skills Following Acquired Brain Injury

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Project Number: H133G000073
Start Date: July 1, 2000
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $116,732; FY 01 $144,010; FY 02 $145,781
Abstract: This project develops a virtual reality driving system (VRDS) for the assessment of driving ability in persons with acquired brain injury (ABI), specifically TBI and stroke, and examines the device’s efficacy and validity. The primary objectives are: (1) to evaluate the concurrent validity of a virtual reality driving protocol by comparing it to a traditional rehabilitation-hospital-based driving evaluation; (2) to examine the effects of the addition of complex and challenging driving factors, including nighttime and traffic congestion, on driving performance within a virtual reality environment; and (3) to elucidate the effects of demographic and medical factors that may impede or facilitate driving performance within a virtual reality environment. To achieve the first and third objectives, approximately 80 participants with ABI are administered both the traditional hospital-based driving evaluation and the VRDS. To address the second objective and allow comparison and interpretation of VRDS performance, an additional group of 20 age-and-education-matched, healthy control subjects are administered the VRDS.
Optimizing Posture, Trunk Control, and Reach of Wheelchair Users

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Project Number: H133G990048
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 99 $149,489; FY 00 $149,489; FY 01 $147,548; FY 02 (No-cost extension through 6/30/2003)

Abstract: The study’s objective is to improve function via better postural support by developing clinical guidelines and prototype devices that accommodate to the varying needs for trunk stability and mobility throughout the day. To meet this objective, the study has two aims: (1) to determine the effects of posture and postural supports (cushion, backrest height and supports) on the trunk control and upper extremity function of wheelchair users, and (2) to determine if optimizing back height and cushion type permit people to sit with an erect posture without hindering function. For wheelchair users, balancing sufficient trunk support with adequate trunk mobility has important functional and medical consequences. Better understanding of the posture-function relationship and improved design concepts are needed to improve trunk control of wheelchair users. Improved control permits stability during activities of daily living while not hindering function by restricting mobility.
ABC-Link: A Web-Based Literacy Assessment Tool for Students with Significant Disabilities

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Project Number: H133G020133
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 02 $149,733

Abstract: This development project is designed to create a web-based assessment tool, ABC-Link, that provides accessible reading assessment tasks via an innovative interface that simultaneously supports students with severe speech and physical impairments (SSPI) and the adults who assess them. Through its use of state-of-the-art technology, ABC-Link is an interactive site that: (1) guides the assessment as it progresses based on a model of behavioral and test-administration efficiency, (2) feeds the assessment results back to an expert team for interpretation, (3) guides the adult in conducting further assessment as necessary, and (4) provides a suggested plan of intervention.
Promoting the Practice of Universal Design

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Project Number: H133G80060
Start Date: June 1, 1998
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 98 $124,970; FY 99 $124,955; FY 00 $124,993; FY 01 (No-cost extension through 12/31/2002)

Abstract: This project promotes the practice of universal design by developing and implementing a self-supporting product design evaluation and marketing program that responds to consumer and industry needs. Universal design is the design of products and environments that are usable, to the greatest extent possible, by everyone regardless of their age or ability. The critical next step toward increasing the practice of universal design is adoption and application of its principles both by consumers and by industry. The three objectives of this project are to improve consumers’ ability to recognize universal design, to improve designers’ ability to meet the needs of a diverse consumer base, and to recognize and support industry efforts to market universal design successfully. Ways these objectives are achieved through this project include: (1) developing a set of performance measures that reflect the Principles of Universal Design, (2) confirming the reliability of these measures and pilot testing the evaluation program, (3) developing a plan of self-support for the universal design evaluation program, and (4) disseminating the results to appropriate audiences. The project develops a sound universal design program based on information gathered directly from future users—consumers, designers, and marketers—as well as the universal design research community.
Information Technology Access for Adults with Cognitive Disabilities: Participatory Development of a Model for Software Accessibility, Training, and Support

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Project Number: H133G010162
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 01 $149,996; FY 02 $149,994

Abstract: This project improves IT access for persons with significant cognitive disabilities through participatory development of a model incorporating accessible life skills software, effective consumer training, and innovative methods for ongoing technical support. Many persons with significant cognitive disabilities are excluded from the benefits of IT because software interfaces are too complex, the content is not relevant to their life management requirements, and not enough is known about their training and technical support needs. This project builds on previous efforts in development of life skills software to produce a field-tested and expanded array of applications along with a replicable model for training and technical support in home, community, and educational settings. Based on the project’s participatory development approach, persons with cognitive disabilities are integrally involved in research, development, and dissemination activities.
The Efficacy of Computer and Sense Wear Technologies for Promoting Health in Adults with Fibromyalgia: A Randomized Clinical Trial

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Project Number: H133G020159
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $149,996

Abstract: This study uses a cognitive-behavioral intervention to facilitate adoption of a wellness lifestyle in people with fibromyalgia. Specifically, researchers test the efficacy of an Internet-based health promotion computer program used in conjunction with a wearable sensor (SenseWearTM) for developing a wellness lifestyle and improving the quality of life of adults with fibromyalgia. Consumers are assisted in: (1) establishing goals in the areas of physical activity, nutrition, participation in meaningful, productive activities, sleep, stress-reducing activities, and emotional state; (2) monitoring progress toward established goals; and (3) assessing the relationship between these areas in one’s daily life. In addition, based on consumer input, the program offers suggestions for developing a wellness lifestyle. SenseWearTM provides objective data about activity level and stress level for consumers to use in combination with the self-assessment data provided by the Internet program.
Factors Affecting Directional Hearing Aid Performance in Children

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Project Number: H133G020097
Start Date: September 1, 2002
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $149,576

Abstract: This project investigates quantification of the angular position of children’s heads in classroom environments and measurements of speech understanding and classroom performance in environments that simulate the most common listening situations children experience. Directional hearing aids represent one of the few technologies that have the potential to positively impact children’s speech understanding in classroom environments without requiring hardware external to the child. These instruments work by reducing amplification for sounds arriving from behind the child, relative to that provided for sounds arriving from the front. Therefore the intensity level delivered to a child’s ear for sound sources of interest will be greater than that of other sounds, if the assumption is made that the child will face the sound source of interest. Unfortunately, the angle at which children position their heads in classroom environments is unknown. In addition, the magnitude of improvement in speech intelligibility and classroom performance afforded by directional hearing aids in comparison to their traditional, omnidirectional counterparts in real classroom environments is unknown.
The Braille Power Reader Program

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Project Number: H133G010028
Start Date: August 1, 2001
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $149,839; FY 02 $149,565

Abstract: This project develops hardware and software that provides people who are deaf-blind or blind with access to much of the digital media and technology that is available to sighted people in academic and employment environments. Development efforts include both newly designed hardware and software and improvements on legacy products previously designed by Science Applications International Corporation (SAIC) and Tactilics. These products integrate enhanced hardware and software and provide 40-character electronic braille access to computers and all forms of IT. Development of the braille Reader system is initially focused on the needs of people who are deaf-blind because of the close relationship between SAIC and the Helen Keller National Center (HKNC), but the display technology is also important to people who are only blind. The teaming arrangement of SAIC, Tactilics, and HKNC assures that the needs of all people who may benefit from using the system—blind and deaf-blind—are met.
Development of a Collapsible Folding Manual Wheelchair

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Project Number: H133S020103
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 02 $74,950

Abstract: This project creates and tests a prototype of a compact, forward-folding, ultra-light manual wheelchair. This wheelchair maximizes mobility in a variety of environments and eases the demands of travel on wheelchair users. The wheelchair improves access to and maneuverability in narrow environs such as those encountered in compact dwellings, offices, restroom facilities, and transportation means. The innovative design enables the wheelchair to fit down the aisle of airplanes, and be collapsed and stowed in the overhead compartment. It is more easily placed in the trunk of a car than standard wheelchairs. The wheelchair is designed with an adjustable axle, adjustable backrest and seat angle, a suspension element, and a rigid frame environment. The prototype is tested to insure that: (1) its dimensions meet targeted space constraints, (2) it meets or exceeds currently approved ANSI/RESNA Standards, and (3) it performs equivalently or better than other comparable manual wheelchairs on ANSI/RESNA tests.
**Absolute Head Pointing for Accessing Assistive Devices**

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**Project Number:** H133S020106

**Start Date:** October 15, 2002

**Length:** 6 months

**NIDRR Officer:** Kristi E. Wilson, PhD

**NIDRR Funding:** FY 02 $75,000

**Abstract:** This research investigates the feasibility of a new “absolute” head-pointing strategy for people who require an assistive device to manipulate a computer cursor. This “absolute” system links the position of a computer cursor to the direction the user’s head is pointing, and stays aligned with the user’s head regardless of repositioning movements. This system enables a user to guide a cursor by aiming his or her head at a desired target location, potentially simplifying the task of learning and utilizing such a system. The design takes advantage of new, low-cost, infrared cameras, and requires only three passive sensors to be attached to the user.
Assessing, Teaching, and Testing Young Children with Disabilities

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Project Number: H133S020148
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $75,000

Abstract: This project examines the feasibility of creating a suite of coordinated software programs designed specifically for children with disabilities. The programs assess sensory preferences, provide a system for acquiring new information, teach children to take tests, and test knowledge. They have a central data collection system to ensure that the optimal stimulation, feedback, task, and content are presented to the child. The programs have a choice of using the provided content or importing graphics and sounds to match the child’s interest or curriculum.
Personal Digital Memories for Individuals with Memory and Cognitive Disabilities

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Project Number: H133S020030
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 02 $74,960

Abstract: This project develops a computer program that enables individuals with memory and cognitive disabilities to preserve and access their personal digital memories, helping them improve their performance in learning, memorizing, social interaction, decision making, and integration with their family and community. The program allows people with cognitive disabilities to store, organize, access, display, print, and share their personal digital memories as personal digital photos. Users can take digital photos of objects and situations they want to remember and transfer the photos to the computer easily. Computer-assisted instructions assist users in manipulating their digital memories. Web pages with their memories can be automatically generated, posted to the web, or downloaded from the Internet by the program, helping to increase the participation of family and friends in their lives and enhancing their social interaction with the community.
Pocket Money Coach: A Portable Money Management System to Facilitate Community Access for Individuals with Mental Retardation

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Project Number: H133S020013
Start Date: September 1, 2002
Length: 6 months
NIDRR Officer: David Malouf
NIDRR Funding: FY 02 $74,999

Abstract: This project develops and field-tests Pocket Money Coach, a portable system for assisting individuals with mental retardation with money-related tasks necessary for independent living and community access. The project develops requirements for the system, designs and builds a software prototype, and conducts a pilot study to evaluate the utility of the system for improving independence and self-determination in personal money management for individuals with mental retardation. Independent living for individuals with mental retardation depends on many factors including, but not limited to, the extent of the cognitive limitation and the effectiveness of teaching skills necessary for independent living. Money management is one of the most difficult skills for individuals with mental retardation to master, and attainment of the skill is key to independent living. Inability to perform basic living skills, such as money management, can be a crucial factor for not achieving greater independence.
Pocket Accessible Communication Enabler (Pocket ACE): Providing Access to Palmtop Computer Wireless Communication Technologies for Individuals with Mental Retardation

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Principal Investigator: Steven E. Stock
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Project Number: H133S020010
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $74,996

Abstract: This project involves the design, development, and evaluation of the Pocket Accessible Communication Enabler (ACE). Pocket ACE is a multimedia software application designed for operation on Pocket PC Phone Edition palmtop computers to provide a format for independent access to cell phone technology and wireless email for students and adults with mental retardation. Many individuals with mental retardation cannot use telephones due to deficits in literacy, numerical comprehension, and complexity of telephone interfaces, especially in regard to wireless cell phones. The recent development of smart phone technology via palmtop computers provides an opportunity to make cell phones, emergency assistance, and wireless email communications accessible to this population.
SafetyNet: Supported Independence and Safety for People with Cognitive Disabilities

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Principal Investigator: Stephen M. Sutter
Public Contact: 970/391-8843; Fax: 970/635-0049

Project Number: H133S020149
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $75,000

Abstract: This project researches and develops natural support mechanisms for people with severe cognitive disabilities that facilitate independent living, without compromising safety. It demonstrates the technical merit, feasibility, and cost efficiency of combining state-of-the-art, portable wireless technology, Internet services, and sensor technology with an innovative approach to develop the first system designed specifically for this audience that has the ability to detect the status of specific factors in the environment and then dynamically adjust the delivery of task prompts to properly coach the individual with a cognitive disability based on these factors. This greatly facilitates freedom and independence without compromising safety. Specific objectives include: (1) determining the end user requirements, (2) developing a prototype of the SafetyNet system, and (3) performing a usability analysis with actual users.
VCAT On-Demand Transcription Services for Individuals Who Are Deaf or Hard of Hearing

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Principal Investigator: Stephen M. Sutter
Public Contact: 970/391-8843; Fax: 970/635-0049

Project Number: H133S020155
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 02 $75,000

Abstract: Portable wireless technology offers promising new approaches for the delivery of transcription services for individuals who are deaf or hard of hearing (HOH). This project demonstrates the technical merit, feasibility, and cost efficiency of combining commercially available equipment and wireless services with state-of-the-art software to deliver Virtual Computer Assisted Transcription (VCAT) services. A companion, web-based scheduling system connects the end user with a nation-wide pool of captionists and voice writers, maximizing the flexibility and availability of transcription services, independent of location. Specific objectives for this project are: (1) determining end user requirements, (2) developing the prototype software and web site, and (3) performing a usability analysis with actual users and transcription service providers.
Emergency Preparedness Training Software with Universal Access

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Project Number: H133S020076
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 02 $74,830

Abstract: This project develops a web-based software program that assists people who are deaf or hard of hearing in learning self-advocacy and survival skills for life threatening situations. The software uses 3D animated signing characters employing SigningAvatar™ technology in an interactive virtual reality environment. Effectiveness and user acceptance is evaluated in school environments.
SignSync: Software Tools for Synchronizing Sign Language Access to Digital Multimedia

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Project Number: H133S020104
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $74,980

Abstract: This project creates a multimedia authoring tool that gives people who are deaf or hard of hearing access to digital multimedia, by combining features of Sign Smith™ Studio software with Media Access Generator (MAGpie) software. Currently it is technologically feasible to synchronize and display sign language animations with streaming multimedia, but the process of manually synchronizing can be overwhelming. As digital multimedia becomes more dynamic, powerful software tools are needed to make information accessible. Vcom3D’s commercial Sign Smith Studio Authoring Tool provides a practical way to embed 3D animated signing characters on static web pages, and the Corporation for Public Broadcasting/WGBH National Center for Accessible Media’s software, Media Access Generator (MAGpie), provides a practical way to add text captions to multimedia. By integrating and extending features of the two products, this project develops a powerful tool to automate synchronization and publish content integrated with accessibility options of both captioning and sign language.
Small Business Innovative Research (SBIR), Phase I  
Illinois

Wearable Computing System to Promote Total Knee Arthroplasties (TKA) Recovery

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**Principal Investigator:** Michael C. Garrett  
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**Project Number:** H133S020020  
**Start Date:** October 1, 2002  
**Length:** 6 months  
**NIDRR Officer:** Theresa San Agustin, MD  
**NIDRR Funding:** FY 02 $75,000

**Abstract:** This project develops a system that consists of a wearable computer containing a touch pad for user input, an LCD providing visual feedback, a tone generator providing audio feedback, and a knee orthosis with an innovative goniometer that measures the flexion and extension of the knee joint. The system provides positive feedback to the patient by letting them know when they have achieved specified range of motion goals. It can provide negative feedback by reminding patients that they need to perform a certain task within a given time frame. The system is capable of storing data for review by the treatment team. Finally, the system can monitor the patient’s knee angle for extended periods, thus providing valuable information about the patient’s activity to the treatment team.
Integrating TTYs into PDAs

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Project Number: H133S020049
Start Date: September 1, 2002
Length: 6 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $74,996

Abstract: This project takes the concept of a software TTY a step further, to design a new software TTY package specifically for use in a personal digital assistant (PDA). The text telephone system commonly used by U.S. residents who are deaf relies on five-bit Baudot code transmitted at 45-baud. Until recently, this required expensive special TTY equipment, but the situation changed with the release of myTTY, a totally software-based TTY. myTTY is inexpensive and allows a PC desktop or laptop computer to communicate with a Baudot TTY. The current project provides a true pocket-sized TTY and expands the telecommunications capability of people who are deaf with a software TTY in a PDA running under the Windows CE operating system. The project also explores the use of TTY software with other operating systems and the creation of a TTY in a PDA connected to a cellular telephone.
Development of CD-ROM-Based Cued Speech Instructional Materials

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Project Number: H133S020048
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $74,995

Abstract: This project develops a self-taught, self-paced, interactive computer program to teach cued speech, with a basic first-draft of a cued speech instructional computer program and subsequent materials in the current project phase. Children who are deaf or hard of hearing often struggle to establish communication with their hearing parents, relatives, friends, classmates, and others. One of the best ways to establish such communication with the least training is through cued speech. Unfortunately, there are relatively few self-taught cued speech instructional materials available and almost nothing is available on a CD-ROM for computer administration. The resulting instructional program is to be distributed on a CD-ROM.
Development of a High Bandwidth Individualized Wireless Network

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Project Number: H133S020043
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $75,000

Abstract: This project researches the feasibility of a high bandwidth individualized wireless network that is personalized to maximize flexibility and capacity for individual users and minimize interference, crosstalk, and extraneous information. The system is developed in connection with experts on deafness and visual impairments. It is evaluated and tested in schools specializing in education of students with disabilities.
More Accurate Voice Control Systems for the Disabled Using Improved Speech Recognition

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Project Number: H133S020107
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 02 $74,200

Abstract: This project designs and tests interface software that, in combination with an innovative speech recognition system, can improve current recognition maxima for non-spontaneous utterances from approximately 85 percent to approaching 100 percent. The project tests statistical and grammar-driven recognition models in a series of bench trials designed to quantify accuracy, speed of use, and overall productivity as compared to existing adaptive technology. Bringing accuracy as close as possible to 100 percent should allow the software to overcome a major obstacle in the use of speech recognition by people who are blind or who have other disabilities: the tendency to become lost and unable to complete computer-assisted tasks. A secondary goal is research into the development of a closely coupled series of resets integrated with applications designed from the ground up for speech input/output, intended to support command and control and to eliminate the “getting lost” problem.
Small Business Innovative Research (SBIR), Phase I
Michigan

Development of a Portable Reading Device for the Blind

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Project Number: H133S020071
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 02 $75,000

Abstract: This project develops a portable reading device that allows people who are blind or who have visual impairments to perform routine reading tasks. Such a device meets a desperate need for individuals who are severely limited by current reading methods. It empowers these individuals by providing on-demand access to everyday reading materials that they encounter in their community, workplace, and educational settings. It helps to restore independence by providing access to information needed to exist in modern society.
Development of an Authoring Tool to Allow Teachers to Create Audio-Tactile Materials for Blind or Visually Impaired Students

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Principal Investigator: Steven Landau
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Project Number: H133S020147
Start Date: September 30, 2002
Length: 6 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 02 $74,082

Abstract: This project conceptualizes, implements, and evaluates a prototypical authoring tool that allows teachers of individuals who are blind or who have visually impairments to create their own customized audio/tactile educational materials. The authoring tool creates embossed sheets that students mount on a touch-sensitive tablet connected to a computer. They then interact by pressing regions on the tactile surface to instigate audio responses.
Diagnostica K-12: A school-centered collaborative framework for mental health monitoring

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**Project Number:** H133S020032  
**Start Date:** September 15, 2002  
**Length:** 6 months  
**NIDRR Officer:** Bonnie Gracer  
**NIDRR Funding:** FY 02 $74,948

**Abstract:** This project develops an application framework that allows schools, family members, and community professionals to collaborate in identifying mental health conditions that impact a child’s education. Identification of mental health impairment in children and adolescents is critical for evaluation of learning problems in school. Using a standard knowledge framework, the Diagnostic and Statistical Manual of Mental Disorders (DSM-IV), and any DSM-IV-derived information source, the application enables rapid collection, integration, and analysis of mental health information from multiple informants. This project focuses on the development of a prototype capable of collecting DSM-IV symptom information from families, school personnel, and community providers, and processing the data to provide impairment information for DSM-IV categories, diagnoses, and symptoms. Usability of the system is demonstrated with simulated data and by feedback from local regular and special education providers.
Developing a Versatile, Affordable, Wheelchair-Mounted Robotic Arm Based on the Arlyn FeederBot Design

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Project Number: H133S020121
Start Date: September 30, 2002
Length: 6 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $74,096

Abstract: This project modifies the existing prototype Arlyn FeederBot and uses it as a test bed to investigate the use of that design as a general-purpose wheelchair-mounted robot arm. Researchers develop methods of handling objects in structured and unstructured environments and incorporate the ability to use many different control methods. The resulting product permits many people with severe paralysis to have greater independence and quality of life and to become employed or better employed.
Small Business Innovative Research (SBIR), Phase I  
Pennsylvania

The Next Generation of Audio-Based Assistive Technology: An Instantaneous Customizable Audio Pegging System

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Project Number: H133S020027  
Start Date: September 30, 2002  
Length: 6 months  
NIDRR Officer: William Halloran  
NIDRR Funding: FY 02 $74,750

Abstract: This project develops an Audio Pegging System that not only addresses many of the limitations of current audio-based assistive technologies, but also provides a comprehensive tool for students with disabilities to use in an educational setting. This Audio Pegging System allows for the lacing of an audio source to its corresponding transcript or vice versa, using a human voice rather than a computer synthesizer, and enables the user to click on any part of the text and hear its matching audio instantly. It is akin to a word processor with audio processing capabilities, allowing the user to create a customized text-and-audio-laced file which can be searched, cut and pasted, and e-mailed just like a Word document.
Simplifying Automated Braille Music Production: Integrating the GOODFEEL Braille Music Translator with Mainstream Software

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Project Number: H133S020081
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $75,000

Abstract: This project improves the GOODFEEL Braille music translator. While GOODFEEL produces high-quality music braille its usability, technical complexity and the training time should be improved so music educators or vision professionals have more motivation to employ it to benefit students of music who are blind. The following will be addressed: (1) making the process of preparing music files to be transcribed less labor-intensive, (2) making the interface and its relationship to mainstream music software more useful to overworked or unsophisticated potential users, (3) adding a proofing feature that delivers a description of each braille music character created so sighted non-specialists can confidently instruct beginners new to braille music reading, and (4) making editing functions accessible to users who are blind.
Nemeth Math to LATEX Backtranslator System

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Principal Investigator: Deepa Gopal
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Project Number: H133S020130
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $75,000

Abstract: This project conducts research to enable the development of a commercial-quality PC-based system for automatically translating mathematical expressions encoded in the Nemeth Math Braille notation to LATEX, a typesetting software program. The system greatly facilitates communication between students, scientists, and engineers with visual impairments and with their sighted instructors and colleagues. Translation of Nemeth Math Braille to LATEX is known to be a difficult undertaking; this project applies novel approaches of denotational semantics, logic programming, and definite clause grammar to translation problems. The goal is to show that this technology is powerful enough to cover all of Nemeth Math Braille.
Small Business Innovative Research (SBIR), Phase I
Utah

Practical Force Feedback System for Upper Limb Prosthesis Users

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Project Number: H133S020006
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $75,000

Abstract: This project develops a practical grip-force feedback system for upper-limb prosthesis users that enables wearers to sense the grip force of their terminal device (TD). Prototypes of a grip force sensor and a method of direct force feedback to the wearer are developed, as well as a method for gravity compensation of a body-powered version of the Utah Arm. Previous experiments have demonstrated that force feedback can improve the prosthesis wearer’s control of an electric TD. By developing a practical system to implement force feedback into a myoelectric hand, the next generation of myoelectric hand wearers will potentially have greatly improved control, more natural sensation of their prehension, and reduced dependence on visual feedback to moderate grip force. Growing use of myoelectric devices by amputees is causing growth in the prosthetics market. Adding a practical feedback system will greatly enhance the prostheses for this population.
Small Business Innovative Research (SBIR), Phase I  
Virginia

Internet-Based Beginning Sign Language Course for Hearing Adult Learners

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Principal Investigator: Daniel D. Burch, PhD  
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Project Number: H133S020051  
Start Date: October 1, 2002  
Length: 6 months  
NIDRR Officer: Ramon Rodriguez  
NIDRR Funding: FY 02 $75,000

Abstract: This project determines the feasibility of an Internet-based beginning Sign Language course for hearing adult learners using Ready! Set! Sign! content, which is based on research demonstrating the effectiveness of using the iconic characteristics of signs as a major instructional teaching tool. This study examines the course design and development as a continuous effort to deliver the necessary instructional content to the learner based upon the technological realities faced by learning constituents: users with 56k dialup modems, users with broadband cable, and users of future technology similar to Internet 2 functionality. These technologies and media can improve communication between individuals with disabilities and their non-disabled peers, including coworkers, teachers, and employers/supervisors.
Development of the Remote Access Screen Reader Architecture Math System (RA SRAMS)

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Project Number: H133S020108
Start Date: September 1, 2002
Length: 6 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $75,000

Abstract: The Remote Access Screen Reader Architecture Math System (RA SRAMS) is to design, develop, and test a computer based system that enables remote access to math by students and teachers. RA SRAMS uses successful screen reading architecture to enable students with visual impairments to independently manipulate math expressions to solve math problems. Access is via a network, so the student and teacher may be at different locations when using RA SRAMS. Many students with visual impairments have difficulty learning mathematics, and because the technical skills required by many professions are increasing, a lack of higher math skills limits educational and job opportunities for many people with visual impairment.
A Real-Time Spatial Environment Navigation and Description System for the Visually Impaired

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Project Number: H133S020003
Start Date: September 30, 2002
Length: 6 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 02 $75,000

Abstract: This project tests the feasibility of an enhanced Location-Based Services system used by people with visual impairments for navigation and description assistance of a physical environment through an innovative, real-time, wearable, assistive technology. The system is an environment description tool that delivers critical information at the ‘point-of need,’ providing instant description and navigational data about a location. It enhances traditional GPS, augmented reality, and wireless technologies to create a tightly coupled relationship between the user, location, and contextually relevant environmental information. Such data includes key building information, entrances and exits, number of floors, stairs, and location of pertinent features like elevators, doors, restrooms, reception areas, and telephones. Through lightweight wearable computing technologies, environmental data intelligently finds and adapts itself to the user, instead of the user having to adapt and find information in obscure locations. Thus, a user is immediately empowered by accessing interactive “mediapoints” virtually and spatially positioned throughout the physical environment, providing a user-centric organized description and navigational methodology. The technology is based on a unique, real-time 3D spatial data network system delivering intelligent mediapoints derived from online databases, sensors, and communications through a multi-user wireless network.
QwikClick: An Intelligent Scanning Keyboard That Maximizes the Capability of Single-Switch Users

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Project Number: ED-01-CO-0122
Start Date: September 17, 2001
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project completes Phase I research on the QwikClick intelligent scanning system, a highly flexible and intelligent scanning keyboard technology that helps single-switch users optimize their performance and enjoyment in using a personal computer. Several important features and capabilities are added to the base software to take advantage of physical and cognitive abilities as well as the preferences of the user. System parameters and display options facilitate the minimization of two conflicting issues: while the population of single-switch users has a wide range of abilities and disabilities, studies have shown that barriers are created rather than minimized when features and sophistication are added. The project also designs and implements a companion product, QwikClickAdvisor. This environment allows the caregiver to make informed choices when modifying system parameters so the system can be customized for a particular user. QwikClickAdvisor is a “wizard” type environment that provides: (1) pre-defined templates that customize the system based on the user’s profile; (2) full control of all programmable system parameters and display options; and (3) statistical feedback of the user’s performance and recommendations for parameter adjustments for improved performance. Finally, the project includes extended field testing of the system to evaluate its utility in a range of vocational, educational, and recreational activities.
Gesture Recognition System for Personal Computing Applications

Future of Technology and Health
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Project Number: ED-01-CO-0124
Start Date: September 17, 2001
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project develops a low-cost gesture recognition system that uses existing PC hardware and digital camera hardware to recognize head gestures. The new system recognizes multiple head and face gestures to access computers, to be used by people with mobility impairments or other disabilities, including cerebral palsy, ALS, stroke, SCI, and repetitive stress injury. Many people use alternative input devices rather than the standard keyboard and mouse; the availability of powerful personal computers and inexpensive digital video cameras create the opportunity to develop a new type of practical computer interface: gesture recognition. The system is designed to use standard, low-cost digital video cameras (under $100) and standard personal computers. One application to be developed is the capability to “surf the web” hands-free using head gestures to navigate web pages, including selecting and activating desired links. This has the potential to greatly improve the speed of computer access, filling the gap between switches, speech recognition (which has a number of disadvantages in work and school settings), and expensive head tracking systems. The technology could be used to replace or augment existing computer switches (such as those activated by head, foot, or hand).
TalkTiles: A Multi-Sensory Language Development Tool and Communication Aid

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Project Number: ED-02-R-0012 (3-6)
Start Date: October 1, 2002
Length: 24 months
NIDRR Officer: Jane Hauser
NIDRR Funding: FY 02 $150,000

Abstract: This project develops and field tests a device that serves as a language development tool for children with speech- and language-related disabilities as well as preliterate children. Through manipulation of electronically enhanced wooden letter tiles, children experience visual, auditory, and kinesthetic representations of letters and words. Project objectives include: (1) improve functionality of the Phase I prototype; (2) conduct single case studies to determine whether TalkTiles promotes letter recognition and/or phonemic awareness in children with autistic spectrum disorder; (3) design and develop ten fully functional TalkTiles units; (4) conduct field tests to determine whether TalkTiles promotes letter recognition and/or phonemic awareness among preliterate children more effectively than approaches that are not “multisensory;” and (5) develop demonstration software to accompany the TalkTiles device. This unique tactile context for language development addresses the concept that young children connect most strongly with their world through touch.
Development of an Audio/Tactile Atlas of the World for Use by Individuals Who Are Blind or Visually Impaired

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Project Number: ED-01-CO-0125
Start Date: September 1, 2001
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 01 $148,907; FY 02 $148,907

Abstract: This project creates a new and innovative Atlas of the World that is fully accessible to readers who are blind, who have visual impairments, or who have other print disabilities. The atlas is an accessory application for the Talking Tactile Tablet created by Touch Graphics, a computer peripheral device on which raised-line and textured (tactile) plastic overlay sheets can be mounted. Users press shapes, regions, and icons on the tactile surface to instigate interactions with a human-voice narrator. A menu system allows the user to select from a number of operational modes that provide access to a database of sociopolitical and geographical map information. National Geographic Maps provide cartographic content and associated information at no cost to the project, and act as advisors to the project to ensure that the product meets current standards for print Atlases.
Small Business Innovative Research (SBIR), Phase II
New York

Development of an Audio/Tactile Accommodation for Delivery of Standardized Math Tests to Students Who Are Blind or Visually Impaired

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Project Number: ED-01-PO-3667 (3-4)
Start Date: September 1, 2002
Length: 24 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 02 $148,190

Abstract: This project includes the design, implementation, and evaluation of a system for delivering standardized math tests, and other assessments that include references to graphic material, to individuals who are blind, have a visual impairment, or who have other print disabilities. This system allows a user to scroll through test items, listen to a trained human-voice narrator read questions and answer choices, and refer to interactive raised-line and textured (tactile) diagrams. When the user presses various regions and shapes on these diagrams, the narrator describes the feature of the drawing or illustration that is touched. The test delivery accommodation also incorporates a talking calculator, a timer, and a database for automatically capturing statistics on student performance. The system is based on standards already established and proven effective for audio-tactile computer applications; it is designed to be used in conjunction with the Talking Tactile Tablet, a simple, durable, and inexpensive computer peripheral.
Online Instruction Tools for Teaching Mathematical Problem Solving to Learning Disabled Students

Learnimation
53 West 90th Street #4
New York, NY 10024

Principal Investigator: Sarah Manning

Project Number: ED-02-R-0012 (3-5)
Start Date: September 30, 2002
Length: 24 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $159,068

Abstract: This project builds a bundled set of web-based validated intervention tools to improve mathematical problem-solving outcomes of middle school students with learning disabilities. Utilizing instructional strategies proven by educational researchers to be effective in addressing the needs of students with learning disabilities, this software application focuses on the full set of cognitive processes, metacognitive activities, and affective factors required to attain proficiency in mathematical problem solving. In order to develop students’ mathematical problem solving skills, interventions designed to address this scope and sequence of skills and abilities is presented within the context of motivating, life-based animated word problems. The application teaches general problem-solving strategy and explicit cognitive mathematical sub-skills.
Omnidirectional Wheelchair to Greatly Increase Mobility in Vocational Rehabilitation and Independent Living Daily Activities

Lincoln Laboratories
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College Ward, UT 84339
mel@autonomoussolutions.com

Principal Investigator: Mel Torrie
Public Contact: 435/755-2980; 435/757-5480; Fax: 435/752-0541

Project Number: ED-01-CO-0310
Start Date: September 1, 2001
Length: 24 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $150,000; FY 02 $150,000
Abstract: This project develops a prototype omnidirectional wheelchair that is simple, light, inexpensive, and capable of outdoor navigation. Translation and rotation in any direction is accomplished. This retrofit requires only one additional motor and two sensors and effectively overcomes the obstacles others have had in trying to commercialize this needed capability. This work draws from the extensive experience the collaborators have had in VR, and in developing omnidirectional vehicles and control systems.
A Low-Cost, High-Performance Physical Activity Monitor (PAM)

Barron Associates, Inc.
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Charlottesville, VA 22901
barron@bainet.com
http://www.barron-associates.com

Principal Investigator: B. Eugene Parker Jr., PhD
Public Contact: 434/973-1215; Fax: 434/973-4686

Project Number: ED-01-CO-0123
Start Date: September 17, 2001
Length: 24 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project focuses on health-related physical fitness assessment and physical activity monitoring. In particular, the team of Barron Associates, Inc. and the University of Virginia work to develop a miniature, lightweight, low-profile, low-cost, high-performance multifunctional Physical Activity Monitor (PAM) to collect, store, and analyze translational and rotational motion in children and other subjects. The system addresses the deficiencies of current commercial activity monitors. Monitoring of both motion and heart rate allows assessment of health-related physical fitness via computation of the Energy Expenditure Index in ambulatory children both with and without disabilities. All information collected and stored on the PAM device is uploadable to a PC for off-line data analysis.
Independent Living and Community Integration

Independent living recognizes that each person has the right to independence through maximum control over his or her life, based on an ability and opportunity to make choices in performing everyday activities. These activities include: managing one’s personal life; participating in community life; fulfilling social roles, such as marriage, parenthood, employment, and citizenship; sustaining self-determination; and minimizing physical or psychological dependence on others. Community integration incorporates ideas of both place and participation, so that a person is physically located in a community setting, and participates in community activities. Issues of consumer direction and control also are integral to concepts of community integration. NIDRR’s research program encourages independent living and community integration to achieve more successful outcomes for people with disabilities, and it fosters the development of innovative methods to achieve these outcomes and to measure achievement.

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Rehabilitation Research and Training Centers (RRTCs)
California

Rehabilitation Research and Training Center on Personal Assistance Services (PAS)

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mailpas@wid.org
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Principal Investigator: Deborah Kaplan, JD
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Project Number: H133B70008
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 97 $500,000; FY 98 $500,000; FY 99 $500,000; FY 00 $500,000; FY 01 $500,000; FY 02 (No-cost extension through 9/30/2003)

Abstract: This project furthers the understanding that Personal Assistance Service (PAS) systems design can promote the economic self-sufficiency, independent living, and full integration of people of all ages and disabilities into society. The project explores the models, policies, access to, and outcomes of, personal assistance services, through: (1) gathering perspectives of consumers, program administrators, policy-makers, and personal assistants using a state of the states survey and database development; (2) a policy study; (3) a study of workplace PAS; and (4) a study on the conditions to improve the quality and quantity of the Personal Assistant workforce.
Rehabilitation Research and Training Centers (RRTCs)
Florida

Rehabilitation Research and Training Center on Positive Behavior Support

University of South Florida
Division of Applied Research and Educational Support (DARES)
Department of Child and Family Studies
13301 Bruce B. Downs Boulevard
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Principal Investigator: Glen Dunlap, PhD
Public Contact: Teresa White, 813/974-4612; Fax: 813/974-6115

Project Number: H133B980005
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 98 $600,000; FY 99 $600,000; FY 00 $600,000; FY 01 $600,000; FY 02 $600,000

Abstract: This project acquires and disseminates new knowledge to advance the field of behavior support in school, home, and community settings. Through research and training projects, the Center increases and enhances the effectiveness of behavior support strategies, expands the applicability of effective practices to broader and more diverse populations, and addresses the need for effective training, technical assistance, and widespread dissemination. The three primary research projects: (1) expand the applicability of effective interventions, (2) increase and enhance the effectiveness of interventions, and (3) understand and describe the long-term impacts and processes of effective behavior support. Embedded within these research projects are systematic studies of nonaversive interventions, etiology and prevention, maintenance, self-management, and functional assessment. The three primary training projects focus on: (1) in-service and pre-service training, (2) dissemination, and (3) technical assistance. The Center is conducted as a consortium that includes the University of South Florida, the University of Oregon, State University of New York (SUNY) at Stony Brook, the University of Kansas, the University of California at Santa Barbara, and the University of California at Hayward.
Rehabilitation Research and Training Center for Children’s Mental Health

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Principal Investigator: Robert Friedman, PhD, 813-974-4640
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Project Number: H133B990022
Start Date: September 28, 1999
Length: 60 months
NIDRR Officer: Bonnie Gracer

NIDRR Funding: FY 99 $750,000; FY 00 $750,000; FY 01 $875,000; FY 02 $750,000
Other funding: FY 01 $520,000 (Center for Mental Health Services), $198,911 (Children’s Board of Hillsborough County Florida), $188,932 (Florida Dept. of Children and Families), $131,250 (USDE - OSERS), $37968 (Texas A & M University), $22,500 (Panhandle Area Educational Cooperative), $64, 210 (Other); FY 02 $216,326 (Florida Department of Children and Families), $169,659 (Florida Department of Education), $150,000 (US Department of Education), $132,124 (Children’s Board of Hillsborough County), $63,750 (NIH/NIDA)

Abstract: This program conducts an integrated set of field research projects, employing multiple methods to examine policies affecting children with emotional disturbances and their families in order to enhance the understanding of policy development, its implementation and effects. The research program builds on an analytic framework for understanding variables related to translation of policy into community-level actions. The consistency of state-level policy with system-of-care principles is examined through a series of related studies that address: family perspectives, interagency collaboration, school reform in urban communities, local theories of change and their relationship to services and outcomes, Medicaid managed care and the State Children’s Health Insurance Program, the impact of managed care and system-of-care policies on access to care for children of color and their families, and development of a new instrument to assess interagency collaboration. The Center’s dissemination approach includes conferences and meetings, peer-reviewed journal articles, research briefs, presentations, the world wide web and other electronic media, and technical assistance. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Research and Training Centers (RRTCs)  
Illinois

Rehabilitation Research and Training Center on Aging with Developmental Disabilities

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Principal Investigator: Tamar Heller, PhD
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Project Number: H133B980046
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 98 $699,934; FY 99 $699,987; FY 00 $699,985; FY 01 $699,983; FY 02 $699,934

Abstract: This project promotes the independence, productivity, community participation, full citizenship, and self-determination of older adults with intellectual disabilities (mental retardation) and related developmental disabilities (I/DD) through a coordinated program of research, training, technical assistance, and dissemination activities. The research program aims to increase knowledge about the age-related physical and psychosocial changes older adults with I/DD and their family experience. It examines how these changes affect their ability to function in the community, including home, work, and leisure settings. The research program also aims to increase the effectiveness of innovative approaches, public policies, and program interventions that provide needed supports, and to identify best practices and public policies that promote the successful aging of these adults and their families. Current research priorities include promoting health and wellness, understanding women’s health issues, understanding family (including sibling) caregiving roles across residential settings, developing effective approaches that support individuals and their families in making future plans, identifying gaps in age-related health care and employment resources, and using assistive technologies and universal design to maintain employability and enhance functioning in the community. The project’s Clearinghouse on Aging and Developmental Disabilities, ADD/VANTAGE newsletter, and web site disseminate its research findings and their practical applications to an international audience of researchers, service providers, administrators and policy-makers, students, families, people with disabilities, and the general public.
Rehabilitation Research and Training Center on Full Participation in Independent Living

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Principal Investigator: Glen W. White, PhD, 785/864-0590
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Project Number: H133B000500
Start Date: January 1, 2001
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 01 $499,876; FY 02 $661,864
Other funding: FY 02 $299,999 (NIDRR Dissemination & Utilization)

Abstract: Through research, training, and dissemination, this project makes available person-environment strategies that enable full participation in society by persons with disabilities from diverse cultures, varying socioeconomic strata, and emerging disability populations. This mission is implemented through multiple research and training activities that are influenced by independent living (IL) philosophy and values; for example, participatory action research is emphasized, in which consumers take an active role throughout the research process. The RRTC develops, tests, and uses measurement tools to investigate the interactional relationship between personal and environmental factors and their effects on full participation in IL by the designated populations. Based on the project’s Analytical Research Framework, the four core areas of intervention development and testing include: (1) increasing the knowledge base about the emerging universe of disability, (2) community participation and wellness, (3) cultural IL accommodations, and (4) personal and systems advocacy. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Rehabilitation Research and Training Centers (RRTCs)
Massachusetts

Rehabilitation Research and Training Center in Rehabilitation of Persons with Long-Term Mental Illness

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Principal Investigator: Marianne Farkas, ScD; E. Sally Rogers, ScD, 617/353-3549
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Project Number: H133B990023
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 99 $749,990; FY 00 $749,990; FY 01 $350,000; FY 02 $749,990
Other funding: FY 00 $300,000 (Center for Mental Health Services); FY 01 $300,000 (CMHS)

Abstract: This Center studies the recovery and rehabilitation of people with long-term mental illness and the individual and environmental factors that promote recovery. It is linked by its programmatic focus on three specific core areas, Recovery Dimensions, Rehabilitation Interventions, and Alternative Interventions; is strengthened by the use of the appropriate research strategies; and is assisted by a vigorous program of training, technical assistance, and dissemination activities designed to maximize the impact of the RRTC at all levels in the field of psychiatric rehabilitation. The research projects are designed to have an impact on the field, at the personnel, program, and system levels. Research projects use a participatory research process with significant input from consumers and other stakeholders, and culminate in dissemination, training, or technical assistance activities to maximize the impact of the research program. The Training, Dissemination, and Technical Assistance (TDTA) projects are designed to provide exposure, experience, and expertise to knowledge transfer. The TDTA component produces new technologies in recovery and rehabilitation, and increases the likelihood that researchers, service providers, and others use the cumulative knowledge developed by this Center.
Rehabilitation Research and Training Centers (RRTCs)  
Minnesota

Rehabilitation Research and Training Center for Community Integration of Persons with Mental Retardation

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RRTC/Institute on Community Integration  
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Principal Investigator: Charlie Lakin, PhD, 612/624-5005  
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Project Number: H133B980047  
Start Date: October 1, 1998  
Length: 60 months  
NIDRR Officer: Dawn Carlson, PhD, MPH  
NIDRR Funding: FY 98 $700,000; FY 99 $700,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000  
Other funding: $560,000 (Administration on Developmental Disabilities); $150,000 (Health Care Financing Administration); $50,000 (additional NIDRR funds); $60,000 (University of Minnesota); $60,000 (other)

Abstract: The Center conducts research, training, technical assistance, and dissemination to enhance inclusion and self-determination of citizens with mental retardation and related developmental disabilities (MR/DD). The research program has six outcome areas: support to families, state system reform, Medicaid services, policies and practices for full participation, consumer controlled services, and direct support personnel. The approach to each priority area includes: (1) research syntheses of the state of knowledge and practice; (2) secondary analyses of high quality, topically relevant national and state data sets; (3) case studies of best practices; (4) evaluation of demonstration efforts to improve policy and practice; (5) survey and interview studies of critical issues; and (6) group process studies with key constituencies. An integrated intramural training program addresses the development of skilled disability researchers and rehabilitation professionals, including graduate students, postdoctoral associates, and research interns. Outreach training programs provide training and technical assistance to agencies and individuals providing support to people with MR/DD, including members of their families. Outreach programs include conferences and workshops for a wide variety of national, regional, and state audiences, a state of the art conference, and intensive technical assistance with community organizations, including advocacy and self-advocacy organizations. The Center disseminates practical information to targeted audiences (i.e., IMPACT, Policy Research Brief, Frontline Initiative) and maintains high standards for scholarly productivity (i.e., books, journal articles). The Center provides print and web site access to a variety of other information including descriptions of best practices, national statistics on services and expenditures, resource guides, and distance learning training.
Rehabilitation Research and Training Center on Independent Living Management (RRTC- ILM)

The Western New York Independent Living Project, Inc.
3108 Main Street
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http://www.rrtcilm.org

Principal Investigator: Douglas J. Usiak
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Project Number: H133B000002
Start Date: November 1, 2000
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 00 $600,000; FY 01 $600,000; FY 02 $600,000

Abstract: To help Centers for Independent Living (CIL) become integrated more fully with their communities, this project identifies and applies best practices, finding examples from both inside and outside the CIL network. The work is conducted embracing, supporting, and emulating the principles of the independent living philosophy, which encompass consumer control, self-help, advocacy, peer relationships, peer role models, and empowerment. The seven projects of the RRTC-ILM are: (1) developing a database of CIL profiles, aggregating the information required to develop and implement a set of related research, training, and dissemination projects whose best practices help to build a secure economic foundation for CILs; (2) designing and testing options for generating funding from alternative sources, through collaborations with others that include building business development strategies and analyzing the policy-related and programmatic consequences of various funding options (such as those independent of public financing); (3) identifying best practices and developing test programs that allow CILs to expand their services to youth with disabilities and their families, including those from diverse cultural backgrounds, and to interface with existing educational and transitional programs to prepare children and youth for independent living; (4) modifying and testing management models of other successful community-based organizations so those strategies benefit CILs; (5) investigating CIL and VR agency policies related to collaborations, and designing strategies for innovative partnerships that promote employment outcomes for individuals with disabilities; (6) coordinating activities with the Rehabilitation Services Administration (RSA) and providing them instruments, curricula, methodologies, resource guides, and research findings; and (7) providing training and information for CIL policy-makers, administrators, and advocates on the RRTC’s research findings and identified strategies.
**Rehabilitation Research and Training Centers (RRTCs)**  
New York

**Rehabilitation Research and Training Center on the Community Integration of Individuals with Traumatic Brain Injury**

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**Principal Investigator:** Wayne A. Gordon, PhD  
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**Project Number:** H133B980013  
**Start Date:** October 1, 1998  
**Length:** 60 months

**NIDRR Officer:** Constance Pledger, EdD  
**NIDRR Funding:** FY 98 $800,000; FY 99 $800,000; FY 00 $800,000; FY 01 $800,000; FY 02 $800,000

**Abstract:** The RTC is a product of participatory action research, emphasizing the empowerment of individuals with TBI both in setting and carrying out its research agenda, and in implementing a program aimed at strengthening the voices of individuals with TBI. The program includes four evaluation projects and three basic research projects: (1) evaluating a measure of community integration that assesses both the individual’s level of participation and his or her experience of daily activity; (2) evaluating an innovative approach to person-centered, community-based VR; (3) evaluating a peer mentoring program; (4) screening for TBI in individuals identified with substance abuse disorders; (5) researching longitudinal studies of the emergence and resolution of behavioral/emotional challenges post-TBI; (6) researching factors associated with healthy aging after injury; and (7) validating a brain injury screening approach used in school children. The RRTC is also active in providing technical assistance and in training and dissemination activities.
Rehabilitation Research and Training Centers (RRTCs)
Oregon

Rehabilitation Research and Training Center to Improve Services for Children with Serious Emotional and Behavioral Disabilities and Their Families

Portland State University
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School of Social Work
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Principal Investigator: Barbara Friesen, PhD
Public Contact: Rachel Elizabeth, Public Information and Outreach Coordinator, 503/725-8118; Fax: 503/725-4180

Project Number: H133B990025
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 99 $725,000; FY 00 $725,000; FY 01 $300,000; FY 02 $725,000
Other funding: FY 99 $150,000 (Center for Mental Health Services (CMHS)); FY 00 $155,000 (CMHS); FY 01 $570,000 (CMHS)

Abstract: This project conducts an integrated set of research, training, and technical activities to: (1) develop and evaluate service delivery models for children with an emotional disturbance and their families, including family-centered and culturally sensitive services; (2) define and evaluate the formal and informal components of family support and identify successful family support interventions; (3) identify and evaluate early intervention strategies; and (4) identify, develop, and evaluate communication skills to enable families and service providers to communicate effectively with each other. Research issues include caregivers and employment, inclusive care, early intervention, education, service delivery, training, and mentoring. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Leadership Development: A New Generation of Effective Leadership

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Principal Investigator: Sylvia Walker, EdD
Public Contact: 202/806-8086; Fax: 202/806-8148

Project Number: H133A990020
Start Date: October 1, 1999
Length: 60 months
NIDRR Officer: Delores Watkins
NIDRR Funding: FY 99 $175,000; FY 00 $175,000; FY 01 $175,000; FY 02 $175,000
Abstract: This project improves services provided under the Rehabilitation Act as amended, especially services provided to individuals from minority populations. The goal of the project is to increase the leadership competencies of individuals with disabilities from underserved and underrepresented communities, thereby maximizing the full inclusion and integration of people with disabilities from underserved and underrepresented groups into society, employment, independent living, family support, and economic and social self-sufficiency. All activities are focused on promoting and ensuring full participation of members of groups who have traditionally been underserved by the VR system. Community-based rehabilitation, disability, and educational organizations and entities work as collaborators to the project in nominating people from underserved and underrepresented groups to participate in the training and to provide assistance to the participants in the implementation of a follow-up plan of action. Individuals participate in a leadership development training program that provides a broad range of technical assistance, consultation, and support services to them during implementation of their individual action plans.
Field-Initiated Projects (FIPs)
California

Parents with Disabilities and Their Adolescent Children

Through the Looking Glass
2198 Sixth Street, Suite 100
Berkeley, CA 94710-2204
rolkin@lookingglass.org
http://www.lookingglass.org

Principal Investigator: Rhoda Olkin, PhD
Public Contact: 800/644-2666; Fax: 925/944-1859

Project Number: H133G990130
Start Date: October 1, 1999
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 6/30/2003)

Abstract: This project: (1) defines the national population of parents with disabilities with adolescent children and their demographic characteristics; (2) compares family responsibilities, i.e., household tasks and personal care tasks of adolescents in families in which a parent does or does not have a disability; (3) furthers the understanding of key disability-related concerns for the parents and their adolescent children; (4) furthers the understanding of family responsibilities within the context of families in which a parent has a disability; (5) furthers the understanding of the influence of a parental disability on family togetherness and rituals; (6) develops a task analysis model that can be used to evaluate the degree to which adolescents assist their parents with personal care tasks; (7) generates hypotheses for further research on parents with disabilities and their children; and (8) develops and documents methods of reaching underrepresented groups of parents with disabilities.
Occupational Therapy Evaluation and Training Module to Guide Practice with Parents with Physical Disabilities

Through the Looking Glass
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Project Number: H133G010054
Start Date: November 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000
Abstract: This project develops an evaluation tool and an evaluation training module that helps occupational therapy students and clinicians in their work with parents with physical disabilities, a currently underserved population. The training module, which consists of a clinical evaluation tool, a manual, and a videotape, guides clinical reasoning and the ability to provide appropriate recommendations and options that take into consideration the baby care roles and adapted baby care equipment needs of parents with physical disabilities who care for (or want to care for) their children. The training module provides a guide to evaluation of baby care needs and intervention in a variety of settings. Parents who have physical disabilities who also have children birth to age 3 inform production, piloting, and field-testing. Further, occupational therapy expertise is needed nationally regarding AT related to parenting. This is especially true as regards evaluation of parents with disabilities whose capability is being questioned, for example in custody, child protection, or adoption situations. This module paves the way for more inclusion of occupational therapist expertise in these evaluation circumstances.
The Relationship Between Early Experiences and Development in Young Children with Severe Visual Impairments: A Cross-Cultural Perspective

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Principal Investigator: Jamie Dote-Kwan
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Project Number: H133G80119
Start Date: August 1, 1998
Length: 36 months

NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 98 $116,910; FY 99 $117,539; FY 00 $120,969; FY 01 (No-cost extension through 7/31/02)

Abstract: This longitudinal project examines the relationship between early experiences and the development of infants and toddlers who are blind. Subjects consist of 60 caregiver-child dyads divided equally into four different ethnic groups (i.e., African-American, Hispanic/Latino, Asian-American, and Euro-American). The children, approximately 12 months old at the onset of the study, are examined for approximately 16 months, with data collection occurring at four-month intervals. Major objectives include: (1) to describe the home environment and early experiences of young children with severe visual impairments; (2) to examine the differences in home environment and early experiences between African-American, Hispanic/Latino, Asian-American, and Euro-American families; (3) to examine the relationship between caregiver-child interaction and home environment to the development of young children with severe visual impairments; (4) to identify within-group variables that positively influence the developmental outcomes of young children with severe visual impairments; and (5) to identify culturally accepted practices and strategies that facilitate the developmental outcomes of young children with severe visual impairments.
Field-Initiated Projects (FIPs)
California

Total Community Immersion Model for Postsecondary-Age Students with Significant Disabilities: An Outcome-Based Approach to Transition

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Principal Investigator: Nicholas Certo, PhD
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Project Number: H133G020184
Start Date: October 01, 2002
Length: 36 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 02 $150,000

Abstract: This project develops, implements, and evaluates a Total Community Immersion Model for transitioning students who are 19 and 20 years old. The Oakland Unified School District, in collaboration with San Francisco State University, has spent the last three years establishing the Transition Service Integration Model, which has produced a seamless transition to adulthood by integrating services with adult service providers functioning as receiving agencies and the rehabilitation and developmental disability systems at the point of transition. However, that model focuses exclusively on the needs of pending graduates, that is, 21-year-old students during their last year of school, and could benefit from receiving students with well-developed preferences for community living and employment. A new model, developed through this research, eliminates the use of a fixed school site and develops initial work and non-work activities that facilitate inclusion into each individual’s neighborhood, as well as other communities in Oakland and the metropolitan Bay Area.
Field-Initiated Projects (FIPs)
Colorado

Evaluation of Voucher Alternatives for Early Intervention Developmental Disability Services

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Principal Investigator: Steven Rosenberg, PhD
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Project Number: H133G80121
Start Date: July 1, 1998
Length: 36 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 98 $119,687; FY 99 $124,411; FY 00 $124,940; FY 01 (No-cost extension through 6/30/02)

Abstract: This study compares the effect of Block (traditional) and Flexible (fee for service) funding of Part C early intervention services on parent satisfaction, costs, and service utilization. Flexible funding allows families to obtain services from multiple providers and programs. Block funded services are provided through a single program that provides all Part C services for the child at a fixed monthly rate. Preliminary findings indicate that children in Flexible funding receive fewer educational services and more therapy than children served through Block funding.
Home-Based Video-Counseling for Rural At-Risk Adolescents with Epilepsy and Their Parents: An Accessibility and Outcome Analysis

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Project Number: H133G990500
Start Date: December 1, 1999
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 99 $149,900; FY 00 $149,900; FY 01 $149,900; FY 02 (No-cost extension through 12/31/2002)

Abstract: This project is evaluating the impact of issue-specific, video-system counseling on the psychosocial and educational functioning of at-risk teens with epilepsy and their parents who reside in rural areas. Objectives include: (1) assessing the difference between home-based video counseling and office-based counseling on the level of improvement, severity, and frequency of specific problems identified by at-risk teens and their parents; (2) assessing the difference between home-based video counseling and office-based family counseling on the therapeutic relationship between family member and counselor, and on overall consumer satisfaction; (3) examining the effects of home-based video counseling and office-based counseling on overall family functioning; and (4) testing for differences in adherence to intervention and in attrition rates between families in the two counseling conditions.
Field-Initiated Projects (FIPs)
Illinois

Determining the Effectiveness of a Capacity-Building Program for Individuals with Chronic Fatigue Syndrome

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Principal Investigator: Renee Taylor, PhD
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Project Number: H133G010136
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Dawn Carlson, PhD, MPH
NIDRR Funding: FY 01 $149,908; FY 02 $149,804

Abstract: This project evaluates the efficacy, replicability, and sustainability of peer-based intervention strategies applied to individuals with chronic fatigue syndrome (CFS) as implemented within a Center for Independent Living (CIL). The project applies theoretical frameworks of empowerment theory, participatory action research, control theory, and the new paradigm of disability. The predicted outcome is that such community-based intervention improves overall quality of life, functional capacity, illness severity, coping, and service utilization among individuals with CFS. In addition, the study predicts that the intervention serves to increase knowledge and awareness of CFS among CIL staff. The resulting findings, curriculum, and resource manual are disseminated to other individuals with CFS, researchers, treatment providers, policy-makers, self-help groups, and to CILs nationwide. These findings have important implications in the design of future studies for people with CFS, and for individuals with other emergent disabilities, such as fibromyalgia, multiple chemical sensitivity, and Gulf War Syndrome.
University of Illinois at Chicago Mental Health Services Research Program Medication Adherence Program Study (UIC-MAPS)

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Project Number: H133G010093
Start Date: September 1, 2001
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project examines the effects of a multifaceted curriculum designed to improve adherence to medication and treatment regimens, explore attitudes regarding physical health and treatment planning, and improve the ability of participants to return to work. The UIC-MAPS intervention comprises several components, including: (1) developing an educational workshop consisting of three one-hour modules regarding health information, use of anti-retroviral medications, treatment planning, maintaining health, detecting early symptoms of illness progression, and other topics; (2) developing individualized medication plans; (3) meeting with clients and their identified sources of social support to address medication and services issues; and (4) hosting monthly peer-led support groups on medication adherence, attitudes toward health and medication regimens, and issues related to health, well-being, and quality of life. The project includes a comprehensive evaluation designed to make significant contributions to the state-of-the-science literature regarding employment and adherence among people living with HIV/AIDS. In addition, information from peer support group leaders regarding their role(s) in working with other individuals living with HIV/AIDS is examined. The Mental Health Services Research Program (MHSRP) at the University of Illinois at Chicago is collaborating with Chicago House, a community-based HIV/AIDS services organization on this project.
Field-Initiated Projects (FIPs)
Illinois

Moving Out of the Nursing Home and to the Community: Examining and Effecting Social Change

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Project Number: H133G010033
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $149,989; FY 02 $149,993

Abstract: This project develops, evaluates, and disseminates a social action and networking program with people with disabilities who are transitioning from nursing homes to communities of their choice. The majority of community reintegration program research has focused on individual functional skill development as delivered by professionals. This new social action program, based on disability studies research and disability narratives, targets four major unmet needs for: (1) sustained networking with peers, mentors, and activists who have disabilities who can share experiences and strategies; (2) joining meaningful social reference groups, especially those in which disability identity, pride, community membership, and collective activism are valued and modeled; (3) using information technologies, such as computers and the Internet, to gain knowledge, socialize, and network with identified communities of choice; and (4) gaining access to consultative services and resources to access these technologies and the community environment over time. The project uses a participatory action research collaboration approach to create and research the impact of this social action program on long-term community living, participation, quality of life, social networking, and individual and collective identity development processes and outcomes. The project involves a collaborative partnership to effect social change among two Centers for Independent Living, two departments within the Joint Doctoral Program in Disability Studies at the University of Illinois/Chicago (UIC), the Center on Disability Research at UIC, and state agencies and disability organizations involved in community reintegration and resource allocation to support community living.
Field-Initiated Projects (FIPs)
Illinois

Integration at Home: Strengthening Family Relationships of Adults with Disabilities

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Project Number: H133G020146
Start Date: September 01, 2002
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $149,957

Abstract: This study investigates the family relationship issues of adults with physical or mobility disabilities and adults with chronic fatigue syndrome. Phase I involves focus group interviews with adults with disabilities for an open exploration of family relationship issues. Phase II involves in-depth case studies of families experiencing disability who exemplify positive family integration. Phase III involves a randomized control group study to test the impact of a family “intervention” based on the social model of disability.
Field-Initiated Projects (FIPs)
Illinois

Enabling Self-Determination for People Living with AIDS

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Project Number: H133G020217
Start Date: January 1, 2003
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 02 $149,032

Abstract: This project implements and studies a model program of peer-facilitated, empowerment-oriented services for people with AIDS within five supportive living facilities. The facility-based program provides individualized and group services that are tailored to each client’s needs and provides clients with necessary environmental supports. The program also empowers clients to access additional resources and services that support their self-determination. This model program, Enabling Self-Determination, is initially offered to clients in three supportive living facilities. Researchers study: (1) the independent living, employment, and community participation outcomes of the model program, and (2) the three facilities’ efforts to sustain the program. These two conditions are compared to a control group comprised of individuals from two other facilities who receive basic educational services. Participatory research methods are used to identify potential obstacles and solutions to program implementation and efficacy, and to evaluate how the services impact upon and are viewed by the clients. Researchers work closely with the two control group facilities to build their capacity to implement the model program. In this way, the five transitional living facilities in Chicago that serve persons with AIDS are empowered to sustain the Enabling Self-Determination program. Finally, the project creates extensive resources for program replication and vigorously disseminates the model program so that community-based supportive living facilities can replicate the program nationwide.
Independent Living for People with Psychiatric Disabilities: Using Contextual Cues to Remove Environmental Barriers

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Project Number: H133G000152
Start Date: August 1, 2000
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 00 $148,765; FY 01 $136,107; FY 02 $148,672

Abstract: This project examines an intervention that reduces environmental barriers by teaching contextual cues. The grocery store, an exemplar of a complex community-based environment, is the focus, and grocery shopping is the designated skill. The hypotheses tests the effectiveness of the intervention in improving knowledge, performance, and application of grocery shopping skills, and the relationship of cognition to skill acquisition. Individuals with psychiatric disabilities from five community-based sites are randomly assigned to either the grocery shopping intervention or a waitlist control group. Outcome measures address all levels of skill acquisition: knowledge, performance (including generalizability and maintenance), and application of grocery shopping skills. In addition, measures of basic cognitive processes and executive functioning determine whether cognition predicts skill acquisition. Consumer collaborators are included in all aspects of the program. The findings provide direction for enhancing this and other skills training interventions.
Field-Initiated Projects (FIPs)
Louisiana

**Louisiana’s Self-Determination Research Project**

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**Project Number:** H133G990169
**Start Date:** April 1, 1999
**Length:** 36 months
**NIDRR Officer:** Roseann Rafferty
**NIDRR Funding:** FY 99 $149,999; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 7/31/2002)

**Abstract:** This project investigates short- and long-term effects that self-determination instruction, participation in a Youth Leadership Forum (YLF), or both have on the self-determination abilities, IEP involvement, and adult outcomes of adolescents with disabilities. The curricula and the YLF are based on these premises: (1) self-determination is a critical factor for successful transition into adulthood, (2) individuals with disabilities do not easily achieve desired adult outcomes because they generally do not possess self-determination skills, and (3) self-determination instruction improves these students’ adult outcomes. The target population for this study is adolescents with disabilities attending high schools throughout Louisiana, beginning in their junior year, until one year after exiting high school.
Field-Initiated Projects (FIPs)
Louisiana

Louisiana Community Housing Advocacy Network (LA-CHAN)

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Project Number: H133G020211
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $150,000

Abstract: This project recruits, hires, trains, and supports two individuals with significant disabilities to serve as housing advocates. These individuals are the primary point of contact between the project and the communities they serve. The goals of the project include: (1) establishing an array of community housing options for individuals with disabilities and low incomes, (2) establishing programs and supports/services necessary to ensure that individuals with disabilities and low incomes have access to community housing options within participating communities, and (3) a network of key stakeholders concerned with community housing issues.
Field-Initiated Projects (FIPs)
Michigan

Identifying Social Integration Needs During Transition to Adulthood Following Traumatic Brain Injury

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Project Number: H133G000038
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 00 $148,363; FY 01 $136,590; FY 02 $143,034

Abstract: This study identifies specific social rehabilitation and integration needs of persons with TBI. Social functioning is a core domain of quality-of-life, a key predictor of well-being, and is critical to the development of independence. Earlier work has demonstrated that persons with TBI are at risk for social isolation and impaired social problem-solving (SPS) skills including the ability to be assertive in achieving desired social outcomes in school, work, and other settings. SPS skills have been shown to be powerful predictors of social success and integration in noninjured individuals. The specific aims of this study are to: (1) examine SPS skills as key predictors of social integration and quality of life in a sample of young adults with TBI; (2) examine the mediating role of SPS in the relationships between age of onset of TBI and outcome variables; (3) examine predictors of SPS following TBI; and (4) examine SPS following childhood TBI as predictors of social integration and subjective well-being in adulthood.
Stress and Coping over the Life Course: A Perspective on Women with Spinal Cord Injury

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Project Number: H133G020060
Start Date: September 01, 2002
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 02 $149,995

Abstract: This investigation describes the challenges to independent living faced by women with SCI and the strategies they use to manage the stresses of everyday life. The ratio of men to women who sustain SCI is approximately four to one, with current national prevalence of women estimated to be 36,900. Much of the research on SCI has focused on men and may not reflect the experiences of women with SCI. Even more than their male counterparts, women with SCI endure multiple minority status, poverty, lack of education, job discrimination, and restricted choices, and are often burdened by extra care-taking responsibilities, all of which may elevate their risk for stress-related disorders. This study: (1) documents, from a contextual life perspective, the ways women with SCI perceive and respond to stressful life events; (2) explores, in depth, effective and ineffective ways of coping; and (3) assesses the impact these strategies have on quality of life.
Quality of Life for Persons with a Spinal Cord Injury: A Qualitative Longitudinal Study

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Project Number: H133G990219
Start Date: July 1, 1999
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $148,565; FY 00 $148,565; FY 01 $148,565; FY 02 (No-cost extension through 6/30/03)

Abstract: This qualitative, longitudinal investigation increases understanding of the experience of quality of life (QOL) of people with SCI. The study focuses on changes in self-rated QOL from before injury (retrospectively) through 30 months post-SCI. Project objectives: (1) to collect longitudinal data on QOL as experienced by various groups of people with SCI, based on multiple unstructured interviews starting soon after injury; (2) to analyze this information with specific attention to subjective QOL differences between groups, changes, and consistencies over time, and the interplay of internal factors such as personality and the will to live, with external factors such as neurological recovery, equipment, and resources; and (3) to disseminate information on QOL after SCI to consumers, professionals, and other concerned audiences. Analyses of the data address a number of specific hypotheses on the process of change in subjective QOL.
Community Participation After Spinal Cord Injury: Idioms of Beliefs and Behaviors

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Project Number: H133G020151
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,959

Abstract: This study identifies and describes the self-defined forms of community and the modes of community participation found meaningful to persons living with SCI. The five specific aims are to: (1) discover and describe the self-defined forms of community that people with SCI envision and pursue in daily life; (2) identify and describe the cultural and individual idioms of beliefs and behaviors by which people with SCI create a sense of identification and participate in personally valued communities; (3) identify the barriers to participation in desired communities, and strategies and techniques (if any) that persons with SCI use to overcome these barriers; (4) compare and contrast persons in two groups (new onset SCI and more longstanding duration) in terms of the forms of community, idioms of identification, and strategies used to overcome barriers and achieve meaningful community participation; and (5) evaluate preliminary qualitative hypotheses about the nature and modes of community participation actually envisioned by persons with SCI themselves.
National Study on the Impact of SSI Redetermination of 18-Year-Old Youth with Disabilities on Employment, Independent Living, and Community Participation Outcomes

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Abstract: This project performs three specific types of studies and analyses on the impact of SSI redetermination: (1) individual and family case studies: in-depth case studies in three or four states, to understand better the impact of SSI redetermination policies and practices on individuals and families; (2) research integration/synthesis: previous post-school outcome, policy, and service delivery research studies and reports focusing on SSA policies and practices, reviewed, synthesized, and reported in a comprehensive monograph; and (3) an expert panel/best practices review: “promising” or “best” practices related to SSA’s SSI redetermination policies and practices, identified and reviewed.
Field-Initiated Projects (FIPs)
Missouri

**PeerLink: Empowering Persons with Disabilities to Manage Their Own Information**

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**Project Number:** H133G020065
**Start Date:** September 01, 2002
**Length:** 36 months

**NIDRR Officer:** William W. Schutz, PhD
**NIDRR Funding:** FY 02 $145,379

**Abstract:** This project develops an information management system that allows users to share personal and local community resource information instantaneously and selectively, according to their own specifications. The PeerLink team provides expertise in disability issues, informatics, and adaptive computing. PeerLink creates information innovation in three major goal areas: (1) peer-to-peer information transfer model: developing, seeding, and implementing a highly disseminated, agile information system to promote effective service integration by enabling efficient consumer-directed information transfer; (2) knowledge management: converting implicit local resource information held by knowledgeable community members with disabilities in order to make vetted information more broadly available to other community members when and where they need it; and (3) graphic representation: capitalizing on an existing information dissemination user interface to allow access to geographically based visualization of data for local disability resources.
Field-Initiated Projects (FIPs)
New Hampshire

Survey of Home Ownership Nationwide

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Project Number: H133G000034
Start Date: August 1, 2000
Length: 36 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 00 $149,999; FY 01 $149,999; FY 02 $150,000

Abstract: This project systematically investigates the quality-of-life outcomes of home ownership for people with severe disabilities, and the personal, service system, financial system, and support network variables associated with achieving and maintaining successful home ownership. Five interrelated studies are conducted: (1) a home ownership outcome study, using in-person structured interviews across six states, conducted by individuals with disabilities, in collaboration with the Temple University Institute on Disabilities, to examine the effect of home ownership on quality-of-life and quality-of-service provision; (2) a study of facilitating and inhibiting factors in home ownership, based on telephone interviews with disability service system personnel, financial personnel, and informal support persons assisting the successful and unsuccessful home seekers identified in the outcome study above, in collaboration with the UNH Center for Survey Research; (3) an investigation of the predictors of mortgage company underwriting decisions to test the effect of differences in disability, assistance, and income sources on mortgage lending; (4) an intensive case study of selected home owners to examine the personal meaning of home ownership and the process of overcoming barriers; and (5) a follow- along study of the variables associated with long-term success by successful home owners.
Improving the Health Care Encounter for Persons Who Have Developmental Disabilities

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Project Number: H133G010153
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 01 $125,515; FY 02 (No-cost extension through 9/30/2003)

Abstract: This project develops an integrated set of methodologies and materials to improve the quality of the health care encounter for persons who have developmental disabilities, by increasing the readiness of medical students and other health care students to work with this population. During their training, physicians and other health care professionals typically receive little exposure, either in lecture or clinical settings, to persons with developmental disabilities. Consequently, many enter their professions with little understanding of the needs and potentials of persons with developmental disabilities, and unfortunately, with varying degrees of willingness and comfort when serving those individuals. The project uses a computer-based module and standardized patient profile to train health care students regarding developmental disability. The module has a particular focus on communication between the health care professional and the person with a developmental disability.

This work capitalizes on The Matheny School’s extensive experience as a rotation/orientation site for University of Medicine and Dentistry of New Jersey (UMDNJ) medical students, nursing students, dietary students, and students in the therapies.
Field-Initiated Projects (FIPs)
New York

Evaluating Independent Living Outcomes for Blind and Visually Impaired Older People: Development of a Nationally Standardized Minimum Dataset (NSMD)

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Project Number: H133G010183
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project develops and pilot tests a Nationally Standardized Minimum Dataset (NSMD), through which research can be conducted on the outcomes of services for older persons with visual impairments. This population has traditionally been underserved by public programs including the VR system and the aging network. The NSMD is piloted in several agencies throughout the country and includes: (1) pre-service consumer data, (2) a post-service consumer profile, (3) a functional outcomes assessment, and (4) a consumer satisfaction and perceived outcome survey. Public agency administrators and staff are the primary audience. Secondary target audiences are private agencies for the blind, centers for independent living, and consumers.
A Family Intervention Following Traumatic Brain Injury in Children

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Project Number: H133G990069
Start Date: April 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $149,008; FY 00 $147,765; FY 01 $147,509; FY 02 (No-cost extension through 3/31/03)

Abstract: This project operates an outpatient intervention program that studies the impact on caregiver functioning of moderate to severe TBI in children. It seeks to reduce psychological disability in caregivers, thereby enabling the family to support the child’s recovery from TBI in an optimal way, through development and testing of an intervention adapted from established problem-solving and communications skills training protocols that have been used successfully with families of children with chronic illnesses and behavior disorders. The study is a randomized, controlled trial comparing the effects of standard medical and psychosocial care to standard care plus the individualized problem-solving and communication intervention on the following outcomes: (1) injury-related stress and burden, and (2) caregiver psychological distress. Participants include the families of children, aged 6-14, who have experienced a moderate to severe TBI between 6 and 18 months prior to study participation. Families are randomly assigned to the standard care or problem-solving/communication skill groups. Group differences are examined using a multivariate approach to analysis of covariance, controlling for injury severity, age, gender, sociodemographic status, and time since injury. The hypothesis is that better problem-solving and communication skills means less injury-related stress and better caregiver functioning among the intervention group compared to the standard care group.
Neuropsychological Functioning and Psychosocial Adjustment in Adolescents with Spina Bifida and NLD

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Project Number: H133G000134
Start Date: September 1, 2000
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 00 $147,750; FY 01 $149,958; FY 02 $147,623

Abstract: This study examines the relationship between type and severity of neuropsychological impairment, in particular the nonverbal learning disability (NLD) profile, and psychosocial functioning in adolescents with spina bifida. Adolescents with spina bifida exhibit a variety of neurocognitive deficits that are thought to undermine psychosocial adjustment. Between 40 and 50 percent have neuropsychological impairments indicative of NLD, which is strongly associated with poor social adjustment and internalizing behavior problems (e.g., depression). In general, adolescents with spina bifida display problems in behavioral, social, and personality adjustment, although there is considerable variability in this population. Primary goals of the study are to: (1) identify differential patterns of psychosocial management at different points in adolescent development; (2) determine the predictive utility of the NLD profile to subsequent psychosocial functioning and determine if psychosocial problems increase with age in those with NLD; and (3) test whether family functioning moderates the association between neuropsychological impairment and psychosocial adjustment. Results from this study elucidate causal relationships between neuropsychological impairment and psychosocial functioning in adolescents with spina bifida, delineate risk factors that contribute to early identification and the design of effective interventions, and reveal patterns of psychosocial functioning across age in adolescents.
Field-Initiated Projects (FIPs)
Oregon

Getting A Life: Research on Individual and Person-Centered Planning Processes in Oregon

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Project Number: H133G010167
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 01 $149,999; FY 02 $149,999

Abstract: This project researches the relative merits of forms of Person-Centered Planning (PCP), including the Individualized Support or Service Plan (ISP) system, Essential Lifestyle Planning (ELP), and others. Activities include the following three studies: (1) surveying the features of individual planning systems used in Oregon at the start of the project and in Year 3 after large scale systems change efforts have occurred; (2) creating a causal-comparative 3-by-2 factorial group design, where study participants are assigned to groups based on whether they are experiencing a defined set of significant life challenges and the types of service planning they receive, with groups balanced or blocked based on demographic variables; and (3) creating a multiple-baseline single subject design in which the outcomes of three service planning approaches (ISPs, ELPs, and PCP) are compared related to specific outcomes for six individuals who experience challenging behavior.
Men’s Personal Assistance Services Abuse Research Project

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Project Number: H133G010040
Start Date: October 1, 2001
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project focuses on prevention and management of personal assistance service (PAS) abuse carried out against men with disabilities who are living independently in the community, who are abused by their formal or informal PAS providers. It increases identification, assessment, and response by: (1) developing a knowledge base regarding men’s definitions, perceptions, and experiences of PAS abuse; (2) designing a culturally sensitive screening and assessment approach that can be used by men, Centers for Independent Living (CILs), and health and disability services providers to identify PAS abuse; and (3) identifying culturally appropriate response strategies that can be used by men, CILs, and health and disability services providers to prevent and manage PAS abuse. The project is collaboratively conducted by the Center on Self-Determination at the Oregon Institute on Disability and Development of Oregon Health Sciences University, the World Institute on Disability, and Berkeley Planning Associates.
Community Environmental Assessment Project: A Multi-Method Approach to Identify Barriers, Assets, and Engage Communities for Change

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Principal Investigator: Charles Drum, JD, PhD, 503/494-8047
Public Contact: 503/494-3331; Fax: 503/494-6868

Project Number: H133G020125
Start Date: October 1, 2002
Length: 12 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 02 $150,000

Abstract: This project develops a multi-method approach to measure a community’s level of accessibility. The project measures accessibility of communities through a process of community engagement and use of extant data. Effectively measuring community accessibility through the explication and depiction of extant data at the local level can provide the means for participatory social change at low cost, using available resources. The project’s major objectives and activities include: (1) identifying access issues in different communities through a call-back survey of people with disabilities, summarizing results by type and location of community; (2) engaging community members to identify local needs and resources and measurable indicators of barriers and facilitators; (3) developing community profiles based on measurable indicators (including statistical data and maps with geographic information systems); (4) evaluating community access at the local community level by reviewing all data and maps to address future plans, policies, or interventions to improve access with disability experts, community leaders, service and government agencies, and planners; and (5) developing and disseminating a handbook that summarizes the multi-method approach. The project summarizes procedures and findings and disseminates them nationally.
Field-Initiated Projects (FIPs)
Oregon

Healthy Lifestyles Evaluation Project

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Principal Investigator: Charles Drum, JD, PhD, 503/494-8047
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Project Number: H133G020231
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 02 $150,000

Abstract: This project evaluates the effectiveness of the Healthy Lifestyles for People with Disabilities training curriculum. To achieve this goal, the project: (1) conducts ten Healthy Lifestyles training events for persons with disabilities through local Centers for Independent Living within the Portland metropolitan area and statewide; (2) assesses the level of wellness and the healthy lifestyles attitudes, knowledge, and skills of participants over the course of the project (before and after participating, and over time, to evaluate the effectiveness of the curriculum in establishing and maintaining long-term lifestyle changes); (3) assesses participants’ completion of lifestyle change goals; and (4) compares participants’ wellness and healthy lifestyles attitudes, knowledge, and skills to that of controls.
The Transition of Pediatric Burn Survivors into Adulthood

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Project Number: H133G990052
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 (No-cost extension through 5/31/2003)

Abstract: This study examines the long-term adjustment of pediatric burn survivors as they undergo the transition from adolescence and burn induced dependency to the independence and autonomy of adulthood. It is hypothesized that individuals burned as children have increased difficulty with the transition from home to independent living. They expect that for these individuals, psychosocial difficulties with the transition to adulthood increase with larger burn size. The study completes a baseline assessment of 150 individuals ages 18 to 26, burn size 30 percent or greater, and at least 2 years postburn, who have been treated at the Shriners Burns Hospital as children. This assessment includes a physical disability determination and intelligence testing as well as interviews focusing on psychiatric disorder, psychosocial adjustment, living arrangement, and family relationships. The data is analyzed against age, with special attention to gender, burn size and viability, age of burn, physical handicaps, intelligence, and initial family environment.
Field-Initiated Projects (FIPs)
Virginia

Middle School Phonemic Awareness Study

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Project Number: H133G000142
Start Date: August 1, 2000
Length: 36 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 00 $149,920; FY 01 $149,957; FY 02 $149,986

Abstract: This project focuses on the role of phonemic awareness in adolescents with low reading skills, in two primary areas of concentration. The first focuses on a cost/benefit analysis of a computer-driven phonemic awareness program of elongated tones and speech sound called Fast ForWord (FF). FF intervention has been provided during school, after school, while adolescents attended a summer camp alternative to summer school, and in speech and language clinics. The second area of concentration identifies psycho-physiological differences in low readers as a result of phonemic awareness, word recognition, and reading comprehension instruction provided by teachers during school hours. This in-school EEG/ERP/phonemic awareness and reading project includes four groups of sixth graders reading below fourth grade level.
Multi-Family Group Intervention for Traumatic Brain Injury and Spinal Cord Injury Patients and Families

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Project Number: H133G020006  
Start Date: October 1, 2002  
Length: 36 months  
NIDRR Officer: Richard E. Wilson II, EdD  
NIDRR Funding: FY 02 $150,000

Abstract: This project establishes two SCI and two TBI multi-family group (MFG) interventions to support and teach families and patients about the disability process and management strategies. MFG is a structured management strategy that has been extensively tested in the management of chronic schizophrenia and more recently adapted for other chronic disabling conditions. This strategy brings together groups of six to eight families with two MFG group clinician/facilitators in a psycho-educational problem-solving format, over a period of 18 months. Families are given the opportunity to discover and share problems and solutions about the process of living with other families and patients through the implementation of practical guidelines for effective coping. The intervention has been highly effective in reducing relapse and hospitalizations, and improving symptom control and quality of life, for persons with schizophrenia. This project compares TBI and SCI MFG groups for ease of implementation, efficacy (process and outcome), and cost, adapting measures previously studied in schizophrenia with those used in assessing family stress in SCI and TBI.
A Photo-Real Interactive Virtual Teacher

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Principal Investigator: Barnabas Takacs, PhD
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Project Number: H133S020009
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: David Malouf
NIDRR Funding: FY 02 $74,929

Abstract: This project develops a photo-real, interactive, virtual teacher to engage and motivate students to learn. The system creates an intelligent and animated digital person that is capable of expressing subtle emotions and expressions as part of the meta-communication stream supporting the verbal content. It is implemented on a PC-based interactive computer animation platform running over the Internet. The 3D interactive environment goes beyond the state-of-the-art and delivers a visually rich multi-media environment complete with content editing tools.
Internet-Based System for Transdisciplinary Assessments of Infants and Toddlers

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Principal Investigator: Toni W. Linder, EdD
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Project Number: H133S020118
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Glinda Hill
NIDRR Funding: FY 02 $74,960

Abstract: This project develops the Play Assessment Learning System (PALS) for holistic assessments of infants and toddlers with disabilities. The resulting assessment is transdisciplinary, strengths-based, and involves parents as integral members of the team. PALS facilitates and guides teams through conducting transdisciplinary play-based assessments. It provides teams with on-line parental preassessments, individualized guidelines for conducting play sessions, on-line forms for teams to record observations, graphical output to assist team and family discussions of strengths and needs, and personalized web sites to coordinate care for each child. The resulting strengths-based assessments are qualitative (to plan successful interventions), as well as quantitative (to assist in qualifying children for services). PALS encapsulates knowledge of child development in the on-line system, demonstrating the interrelationships of various subareas of development across domains. In addition to assisting teams performing assessments, PALS can also be used as a training tool, whereby professionals or preprofessionals can learn about domains of development outside their own disciplines and enhance their knowledge of transdisciplinary practice.
Scenario-Based e-Learning for Behavioral Parent Training

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Project Number: H133S020141
Start Date: September 23, 2002
Length: 6 months
NIDRR Officer: Kelly Henderson
NIDRR Funding: FY 02 $74,988

Abstract: This project investigates the application of Wisdom Tools Scenarios, a web-based e-learning tool, to Behavioral Parent Training (BPT), a scientifically validated treatment for behavior disorders in early childhood. Behavior disorders are common and interfere with social-emotional development, academic success, and later vocational adjustment. The WisdomTools Scenarios e-learning tool combines realistic scenarios with learning activities and facilitator-led group discussion. Teaching strategies include direct instruction, modeling, cooperative learning, role-play, practice, coaching, and positive reinforcement, which are established best practices for BPT.
Abstract: This project designs a technology-enhanced assessment and teaching rubric to be used by parents and others involved with children, ages birth to three, with and without special needs. “Baby Rubrics” provides the framework for a video-based CD-ROM and curriculum. The CD-ROM contains user-friendly, visually depicted developmental sequences providing examples of milestones within five rubric domains: cognition, language, perceptual-motor development, vocational development, and social development. “Baby Rubrics” provides an assessment tool to help parents and professionals determine a child’s developmental patterns in order to plan programs and intervention strategies to enhance and support the child’s development in the five domains.
Development of a Prototype Illustration-Based Computer Textbook for LD/LEP Students

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Project Number: H133S020101
Start Date: October 1, 2002
Length: 6 months
NIDRR Officer: Bonnie Jones, EdD
NIDRR Funding: FY 02 $74,086

Abstract: This project develops computer textbooks for people with learning disabilities (LD) and limited English proficiency (LEP). Current text-heavy computer textbooks make it difficult to learn computer subjects. Visibooks develops simple, illustration-based computer books that have been well received by people with dyslexia and those just learning English. By refining and expanding this approach, Visibooks is developing computer textbooks tailored to the exact needs of LD/LEP learners.
Role Models for Youth with Disabilities: Career Exploration for Youth in Transition

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Project Number: ED-01-CO-0127
Start Date: September 1, 2001
Length: 24 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $150,000; FY 02 $150,000
Abstract: In this project InfoUse develops a series of multimedia products featuring adults with disabilities as role models for transition-age students with disabilities. The products, developed for students, their parents, and professionals who work with them, provide students with both an ongoing opportunity for career awareness and exploration, and an aid to eventual career selection. The multimedia products depict adult role models, including people with different disabilities, from different ethnic groups, who are working in a range of careers that require a variety of postsecondary education and vocational preparation. The materials include a web site, CD-ROM, videos, and curriculum guide.
Small Business Innovative Research (SBIR), Phase II  
Colorado

NutraNet: An Internet-Based, Self-Directed Multimedia Software System for Nutritional Education, Planning, and Implementation for Individuals with Mental Retardation

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Principal Investigator: Steven E. Stock
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Project Number: ED-01-CO-0126
Start Date: September 17, 2001
Length: 24 months

NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: This project develops a set of multimedia software modules to provide opportunities for greater independence and self-direction in nutrition planning, grocery shopping, and meal preparation for individuals with mental retardation and other significant cognitive disabilities. For most Americans, understanding, planning, and implementing healthy daily diets is a multifaceted and potentially confusing process. The cognitive challenges faced by people with mental retardation create even greater barriers in understanding the complexity of healthy diets, including nutritional concepts such as the food groups, caloric values, saturated fats, cholesterol, daily recommended allowances, comparison grocery shopping, and food portion sizes. This has resulted in a high level of dependency on others in meal planning and execution, and high rates of weight-related health problems for people with mental retardation. Phase I addressed the problems of dependency on others and healthy meal planning by developing and testing NutraNet, an Internet-based multimedia software system for independent and self-directed menu planning by individuals with mental retardation. Menus created with NutraNet by individuals with mental retardation were finished with significantly greater independence (p <.001) than those created by the same individuals using their current menu planning form. Additionally, the NutraNet menus were significantly better at meeting the recommended minimum daily requirements of the five food groups (p <.003) and in producing lower-cholesterol diets (p <.004). Phase II builds on these results by identifying and developing additional nutritional health-related technology tools designed to be more independently useable by non-reading students and adults.
Pocket Compass: A Palmtop Computer-Based Intelligent Aid for Individuals with Mental Retardation to Increase Independence and Self-Determination in Decision Making

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Project Number: ED-01-PO-3664 (5-2)
Start Date: September 17, 2002
Length: 12 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,997

Abstract: This project develops and evaluates Pocket Compass, a decision-making aid for people with mental retardation. Achieving greater independence and self-determination for individuals with mental retardation depends upon the ability to make appropriate decisions independently. The portable software system uses an expert-system approach combined with intelligent audio and visual cues to help individuals navigate the cognitive process of making appropriate decisions. This device is useful in acquiring decision-making skills relating to community involvement in areas such as work, recreation, and independent living, where available choices can be rationally predicted. This project completes Phase I of the Pocket Compass intelligent decision aiding system, builds a companion desktop software utility to help set up and manage decision assistance scenarios for multiple individuals, and performs expanded field testing of the system to evaluate its applicability in supporting a wide range of types of decisions.
Pocket Voyager: Making Palmtop Computers Accessible to Individuals with Mental Retardation

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Project Number: ED-01-PO-3665 (5-1)
Start Date: September 17, 2002
Length: 24 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,997

Abstract: This project researches and develops Pocket Voyager, a specially designed multimedia application that makes the features and programs on palmtop computers more independently accessible to individuals with mental retardation. Palmtop computers are becoming an increasingly common platform for AT developers, in part because of their portability, integrated touch-screens, multimedia capabilities, removable storage options, and PC slot accessories that extend the capacities of the system. Also, mainstream production makes them a more desirable development platform than specially designed hardware units, with lower costs due to high-volume production runs and significantly more research and development attention. Software products are being developed for use by individuals with mental retardation in areas such as communication, schedule maintenance, and task completion, to overcome the problems encountered when a user exits the closed environment of a specialized software application and must use the palmtop computer’s interface to, for example, launch another desired application. This project includes full development of Pocket Voyager’s navigational interface, the system’s setup interface (which is used by caregivers to customize the environment to mirror the needs of different end users), database development and integration, design and development of other software utilities to provide access to typical functions of palmtop computers such as phone contact lists, calculator functions, and emergency information.
Associated Disability Research Areas

Related disability research emphasizes knowledge areas that are cross-cutting and essential to the support and refinement of disability research generally. The common theme linking disability statistics, outcome measures, and the emerging fields of disability studies, rehabilitation science, and disability policy research is that they all provide essential frameworks and building blocks for the research and address important issues in a meaningful way.

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American Indian Rehabilitation Research and Training Center

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Project Number: H133B980049
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Joyce Y. Caldwell
NIDRR Funding: FY 98 $595,000; FY 99 $605,000; FY 00 $605,000; FY 01 $739,500; FY 02 $600,000

Abstract: This Center, in a collaboration that includes the Consortia of Administrators for Native American Rehabilitation (CANAR) and other Rehabilitation Research and Training Centers, develops, implements, and conducts research and training activities around four core areas. Eight research projects and six training projects focus on: (1) investigating and analyzing existing disability and employment data, and recommending methodology for planning and evaluating employment services for American Indians and Alaska Natives; (2) recommending successful strategies to improve employment outcomes, including existing employment and VR service practices for American Indians and Alaska Natives with disabilities on or off reservations; (3) developing and evaluating innovative and culturally appropriate VR services for the employment of American Indians and Alaska Natives; and (4) disseminating results of the data collection and evaluation of model employment services to a range of relevant audiences, using appropriate accessible formats. Consultation with researchers, CANAR, and the training team helps develop a dissemination method that is accessible and acceptable for each respective target community. Information and resources are developed and disseminated to providers, tribal and state vocational rehabilitative agencies, consumers, and Regional Continuing Education Programs. This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Disability Statistics Rehabilitation Research and Training Center

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Project Number: H133B980045
Start Date: December 1, 1998
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 98 $700,000; FY 99 $750,000; FY 00 $700,000; FY 01 $700,000; FY 02 $700,000

Abstract: The Center conducts research in the demography and epidemiology of disability including costs, employment statistics, health and long-term care statistics, and statistical indicators. Statistical information is disseminated through published statistical reports and abstracts, journals, professional presentations, and a publications mailing list. Training activities and resources (such as a predoctoral program) disseminate scientific methods, procedures, and results to both new and established researchers, policy-makers, and other consumers, and assist them in interpreting statistical information. A National Disability Statistics and Policy Forum is conducted periodically to foster dialogue between people with disabilities and representative organizations, researchers, and policy-makers.
Rehabilitation Research and Training Centers (RRTCs)
Kansas

Rehabilitation Research and Training Center on Policies Affecting Families of Children with Disabilities

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Project Number: H133B980050
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 98 $650,000; FY 99 $650,000; FY 00 $650,000; FY 01 $650,000; FY 02 $650,000

Abstract: This project assesses policies and services and their impact on families’ quality of life, focusing on four priorities: (1) developing an analytical framework for policy and service analysis; (2) developing measurement tools that apply state-of-the-art legal and policy analysis methodologies to the assessment of policies, service systems, and family outcomes; (3) identifying impacts of partnership (including interagency collaboration and coordination) on family outcomes; and (4) conducting research with families from diverse backgrounds in several communities and states (Kansas, Louisiana, and North Carolina). This research agenda is composed of five comprehensive training projects, six dissemination projects, and five technical assistance projects. Training activities include: (a) pre-service training and the preparation of three textbooks; (b) in-service training that helps service providers and families form community coalitions using the measurement toolkit; and (c) sponsorship of an international state-of-the-science conference. Dissemination activities include: (a) networking with federal agencies; (b) developing and disseminating the measurement toolkit, six users’ manuals, and a management information software package; and (c) publishing articles in peer-reviewed newsletters, research briefs, fact sheets, a web site, and a newsletter. Technical assistance focuses on: (a) enhancing federal and state policies; (b) conducting summer institutes with state-local partners on policy and service analyses; and (c) developing partnerships with federal agency liaisons, grantees, and key family and professional organizations to mentor them in using the results of project research to enhance policies and services.
Rehabilitation Research and Training Centers (RRTCs)
Massachusetts

Rehabilitation Research and Training Center on Measuring Rehabilitation Outcomes

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Project Number: H133B990005
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $699,736; FY 00 $699,868; FY 01 $699,745; FY 02 $698,812
Abstract: This Center develops new, more effective outcomes measurement tools and applies these tools to determine the effectiveness of medical rehabilitation interventions. Research components include: (1) identifying gaps in existing outcome measures and developing new instruments that address these gaps as part of a rehabilitation outcomes system; (2) critically evaluating the newly developed instruments against tools currently in use; (3) implementing the newly developed outcome instruments across impairment groups and across rehabilitation settings to assess their feasibility, responsiveness, and validity; (4) investigating the extent to which specific rehabilitation interventions affect outcomes following the onset of a stroke; and (5) applying modern psychometric techniques to develop dynamic outcome instruments that can also be used with individual patients in a clinical setting. Several components have been designed to enhance the translation of research findings into rehabilitation practice and to provide stakeholders with the opportunity to provide input into the Center including surveys of the use of medical rehabilitation outcomes data, consensus conferences, institutes, fellowships, a web site, and a consumer guide to choosing postacute care services.
Emergent Disability, Systems Change, and Employment of People with Disabilities

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Project Number: H133A021503
Start Date: December 1, 2002
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 02 $300,000

Abstract: This project examines state service systems to document the impact of federal policies and practices on systems change and how such changes affect people with disabilities. Research activities include: (1) analysis of national, state, and local data collection systems and actual employment outcomes for people with disabilities; (2) documentation of data sets being used by state agencies to measure effectiveness and how these could be used to examine outcomes for people with disabilities; and (3) examination of how people with disabilities fare within the existing system and challenges they may face through direct consumer research. The goals of the project are: (1) to develop a clear description and presentation of how federal policies impact systems change efforts; (2) to identify how these policies and practices affect the lives of people with disabilities; (3) to identify procedures for a more integrated approach to gathering data that better explains the consumer outcomes of these services; and (4) to document how people with disabilities progress within the service system.
Disability Rights and the Independent Living Movement: The Formative Years Nationwide

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Project Number: H133G000083
Start Date: August 1, 2000
Length: 36 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 00 $150,000; FY 01 $150,000; FY 02 $150,000
Abstract: This project creates a national platform for comprehensive research on the origins and leadership of the independent living and disability rights movement in the United States. An experienced team collects and preserves oral histories and archival records of pivotal leaders and key organizations across the country, before they are irretrievably lost. The documentation that is generated about the formative years of the movement is to be made widely available for research use, both on the Internet and in appropriate archival repositories. The project includes three main components: (1) oral history interviews with 50 to 60 national and regional leaders of the movement, (2) collection and preservation of historical records in archival repositories, and (3) the creation of an Internet-based Disability Rights and Independent Living Movement Digital Archive that includes oral histories, selected documents, and finding aids for collected materials at all repositories.

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Project Number: H133G000227
Start Date: June 1, 1999
Length: 36 months
NIDRR Officer: Dawn Carlson, PhD, MPH
NIDRR Funding: FY 00 $149,459; FY 01 $148,388; FY 02 (No-cost extension through 9/30/2003)
Abstract: This project develops an efficient and precise activity measurement system that is accessible and useful to individuals with disabilities, consumer groups, health care service providers, and policy-makers. In the context of people with musculoskeletal/connective tissue disorders or orthopedic impairments, Rasch analysis and Computerized Adaptive Testing (CAT) techniques are used, applying equiprecise measurement to the categories of movement, moving around, and daily life activities as defined in the Activity dimension of the ICIDH-2. CAT achieves efficiency by selectively presenting questions at the individual's ability level, and equiprecise measurement refers to the potential to have high precision in measuring a trait or construct across the entire range of that trait or construct.
Re-Defining Wholeness: Formulating a Minority Group Model of Disability Identity Development

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Project Number: H133G990110
Start Date: May 1, 1999
Length: 36 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 99 $149,915; FY 00 $146,732; FY 01 $148,293; FY 02 (No-cost extension through 4/30/2003)

Abstract: The project constructs and validates a theoretical model of disability identity development analogous to models formulated for ethnic, racial, gay/lesbian, and women’s identity development. The model has significant value in generating testable hypothesis in disability research by contributing a more refined and differentiated understanding of intragroup developmental differences. The goals of the project are: (1) to illuminate the process by which people with disabilities develop a positive identity that integrates their disability status, resulting in a sense of wholeness that fortifies both their resilience to social devaluation and their efforts to live fully in society; (2) to formulate a comprehensive model of disability identity development that takes into account the experiences of people with various disabilities from a range of social/cultural backgrounds; (3) to validate the model by testing predicted relations between disability identity categories and other variables that are theoretically relevant to identity development; (4) to use the model to investigate how people with disabilities who also have other minority group status (based on race, ethnicity, gender, or sexual orientation) develop disability identity, and organize their intersecting identities and multiple group affiliations; and (5) to disseminate this information to people with disabilities, their families, professionals, and advocates so it can be used to support positive identity development in children, adolescents, and adults with disabilities.
Field-Initiated Projects (FIPs)
Illinois

A Multilevel Analysis of the Relationship Between Domestic Violence and Disability

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Principal Investigator: Christine Helfrich, PhD
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Project Number: H133G990144
Start Date: September 1, 1999
Length: 36 months
NIDRR Officer: Constance Pledger, EdD
NIDRR Funding: FY 99 $149,853; FY 00 $149,949; FY 01 $149,944
Abstract: This project studies the interaction between domestic violence and disability. Detailed case studies are developed for 15 women who are domestic violence victims with a disability, who are interviewed and observed in routine activities of daily living over a two-year period. This project is designed to begin building an understanding of the relationships and consequences of domestic violence and disability through a multimethod approach. Research objectives are: (1) to document the extent and nature of impairment/disability among women who are identified as victims of domestic violence in a municipal hospital; (2) to document the disability-related characteristics of women who present to an emergency shelter for domestic violence; (3) to document the long-term service needs of women with disabilities who are victims of domestic violence; and (4) to disseminate project findings in appropriate formats to policy-makers, service providers, and consumers.
Field-Initiated Projects (FIPs)
Illinois

An Analysis of the Demography of Living Standards, Health, and Poverty of Persons with a Disability Living in Third World Nations Based on Data from the World Bank

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Principal Investigator: Glenn T. Fujiura, PhD
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Project Number: H133G010139
Start Date: November 1, 2001
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 01 $150,000; FY 02 $150,000
Abstract: This project analyzes World Bank economic development data in 24 developing nations of the world. The goal of the analysis is to describe basic demographics and their relationship to the living standards of persons with a disability. The overall goals of the project are to elevate awareness of disablement issues globally, to assist local advocacy efforts in raising awareness of disability as a basic development issue, and to stimulate a dialogue regarding the international role in the evolving paradigm of disability. Primary areas of emphasis are: (1) characterization of employment, economic status, and social well-being (i.e., access to health services, supports, assets); (2) estimation of the magnitude of disablement within nations; (3) identification of subgroups within each nation that are most vulnerable to disablement; (4) analysis of the status of women with disabilities; (5) identification of unique regional concerns; and (6) broad comparisons of the living standards in the developing world to those of the U.S. The project employs systems initiated by the World Bank in 1980 called the Living Standards Measurement Survey (LSMS) project, which involves sophisticated population-based household surveys on economic behavior and living standards in underdeveloped nations. This project is a collaborative effort by the Department of Disability and Human Development at the University of Illinois/Chicago (UIC) and Disabled Peoples’ International (DPI). The project operationalizes the principles of participatory action research by employing the expertise of regional representatives of the DPI, a consumer-driven, cross-disability network with member organizations in more than 158 countries, of which more than half are in the developing world.
Differences in Mental Health Service Satisfaction Among Clients Interviewed by Consumer and Non-Consumer Researchers Using Computer-Assisted Personal Interview (CAPI) Technology

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Principal Investigator: Susan Pickett-Schenk, PhD  
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Project Number: H133G020027  
Start Date: September 1, 2002  
Length: 36 months  
NIDRR Officer: Bonnie Gracer  
NIDRR Funding: FY 02 $150,000

Abstract: This study compares differences in service satisfaction ratings made by clients interviewed by researchers who are and are not mental health consumers to better understand mental health consumers’ evaluations of the services they receive. In a randomized design, 400 clients complete satisfaction surveys administered by mental health consumer researchers and 400 clients complete satisfaction surveys administered by non-consumer researchers. Computer-assisted personal interview (CAPI) technology is used to administer the satisfaction surveys. Study results provide important information on clients’ satisfaction with community mental health programs, the effect of researchers’ consumer status on program satisfaction ratings, and the use of CAPI technology in mental health program evaluation.
Field-Initiated Projects (FIPs)  
Massachusetts

Rehabilitation Readiness Tool for Latinos with Psychiatric Disabilities

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Latino Initiatives at the Center for Psychiatric Rehabilitation  
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mertoro@bu.edu  
http://www.bu.edu/cpr

Principal Investigator: Maria Restrepo-Toro, MS; Marianne Farkas, PhD  
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Project Number: H133G020181  
Start Date: September 1, 2002  
Length: 36 months  
NIDRR Officer: Bonnie Gracer  
NIDRR Funding: FY 02 $149,776

Abstract: This project develops a Spanish Guide to Assessing and Developing Rehabilitation Readiness for Latino Consumers with Serious Psychiatric Disabilities. Due to various service barriers, Latinos often do not benefit from vocational rehabilitation innovations. Individuals of Latino descent typically do not access services, or disengage quickly from existing services; they turn to families or other natural supports for assistance. The present proposal addresses several barriers related to Latino service underutilization, including a lack of understanding of how to begin services in a way that matches the Latino clients’ needs (i.e., readiness to engage) and the absence of accompanying readiness educational materials in Spanish. The guide aids in self-assessment of readiness to engage in rehabilitation, makes suggestions for determining future services based on level of readiness for rehabilitation, and includes a series of activities to help individuals develop rehabilitation readiness. The project is supported by the Center for Psychiatric Rehabilitation at Boston University in collaboration with Casa Primavera, a program from Center House, Inc. in Boston, and Maria Sardinas Center (MSC) and South Bay Guidance Center (SBGC), both programs of Community Research Foundation (CRF), a private nonprofit organization in San Diego, CA.
Secondary Analyses of Persons with Disabilities in the 1994-1995
Disability Supplement to the National Health Interview Survey and in
1999 and 2000 NHIS Surveys

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Principal Investigator: Sheryl Larson, PhD; K. Charlie Lakin, PhD, 612/624-6024 (Larson); 612/624-5005 (Lakin)
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Project Number: H133G020037
Start Date: August 01, 2002
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 02 $135,670

Abstract: This project conducts and disseminates the results of focused secondary analyses of data on persons with developmental and other disabilities within the 1994-1995 Disability Supplement to the National Health Interview Survey (NHIS-D) and within 1999 and 2000 NHIS surveys. The combined 1994 and 1995 NHIS-D is the most comprehensive survey of non-institutionalized persons with disabilities ever conducted in the United States and is the first national survey to include persons with disabilities of all ages. The analyses focus on the 3,076 sample members with mental retardation (MR) and/or developmental disabilities (DD) and on the 12,078 adults and 1,536 children who have one or more substantial functional limitations but who do not have MR or DD. The analyses build on earlier research using the NHIS-D in which operational definitions for mental retardation, developmental disabilities, and functional limitations were developed and used for estimating prevalence, demographics, and service use of persons with MR and/or DD. Data analysis topics include: (1) demographic, functional, and health characteristics; (2) in-home services and supports; (3) access to health care; (4) services, devices, and technology; (5) households with parents who have disabilities; and (6) social roles and experiences of adults. In each of these areas, four disability groups are examined: those with mental retardation only, those with developmental disabilities only, those with mental retardation and developmental disabilities, and those with substantial functional limitations but not mental retardation or developmental disabilities. Of particular interest is the comparison between working-age adults with developmental disabilities and those with three or more functional limitations whose disabilities first occurred in adulthood.
Utilization and Analysis of Census 2000 Data to Inform Disability Advocacy and Employment Policy

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Program on Employment and Disability
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Principal Investigator: Andrew J. Houtenville, PhD
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Project Number: H133G020117
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 02 $150,000

Abstract: This project analyzes and disseminates disability employment statistics gleaned from the long-form dataset of the 2000 U.S. Census. A unique feature of the statistical summary is the disaggregation of data at the state and if possible, county level. The project generates a “user friendly” report and web site designed for advocacy groups and other end users of disability employment statistics. The web site is designed in a “question-and-answer” format, based on a model currently employed by Cornell’s RRTC for Economic Research on Employment Policy. The project also analyses and disseminates Public Use Microdata Sample files, which allow the summary and reporting of data at the state and local level. Research also includes testing of statistical models purporting to describe the “disablement process” and barriers to employment.
A Six-Year Longitudinal Study of Community Integration, Subjective Well-Being, and Health After Spinal Cord Injury: Relationship with Gender, Race/Ethnicity, and Environmental Factors

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Principal Investigator: James Krause, PhD, 843/792-1337
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Project Number: H133G020218
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Theresa San Agustin MD
NIDRR Funding: FY 02 $149,734

Abstract: This longitudinal study identifies changes in quality of life and health outcomes over a six-year period as a function of gender, race/ethnicity, and environmental factors. Follow-up data are collected from 466 participants from three collaborating sites that include the Shepherd Center, Rancho Los Amigos National Rehabilitation Center, and Craig Hospital. The same core outcome measures that were used during the preliminary data collection in 1997-98 are being re-administered by phone. Measures include the Craig Handicap Assessment Reporting Technique, the Older Adult Health and Mood Questionnaire, the Reciprocal Support Scale, the Behavioral Risk Factor Surveillance Survey and the Life Situation Questionnaire. In addition, newly developed measures are being used to identify the relationship between environmental factors and adverse outcomes. These measures include the Craig Hospital Inventory of Environmental Factors; the Acculturation, Integration, Marginalization, and Segregation; and the assimilation factor of the Community Integration Measure. A 2x4x2 longitudinal factorial design is being used to analyze the data. A mediational model is being used to identify the extent to which differences in environmental factors explain any associations of gender and race-ethnicity with participation, subjective well-being, health behaviors, and health outcomes.
Knowledge Dissemination and Utilization

Dissemination and utilization are the tools through which to ensure that people with disabilities become fully integrated and participating members of society. NIDRR’s dissemination and utilization efforts ensure the widespread distribution, in usable formats, of practical scientific and technological information generated by research, demonstration, and related activities. NIDRR’s challenge is to reach diverse and changing populations, to present research results in many different and accessible formats, and to use technology appropriately.

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Disability and Rehabilitation Research Projects
Alabama

National Spinal Cord Injury Statistical Center

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nscisc@uab.edu
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Principal Investigator: Michael J. DeVivo, DrPH, 205/934-3320
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Project Number: H133A011201
Start Date: July 1, 2001
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 01 $349,988; FY 02 $350,000
Abstract: The Statistical Center has the following objectives: (1) establish the appropriate IT system; (2) train and provide technical assistance to the Model SCI centers; (3) communicate with NIDRR and the centers to ensure quality of the items in the database; (4) demonstrate the capacity to conduct and facilitate research from the database; (5) link to other related databases; (6) incorporate culturally appropriate methods of data collection and dissemination, including culturally sensitive measurement approaches; (7) demonstrate the capacity to provide technical assistance to the Model SCI centers and other related projects regarding database development and maintenance.
Disability and Rehabilitation Research Projects
California

National Resource Center for Parents with Disabilities

Through the Looking Glass
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http://www.lookingglass.org

Principal Investigator: Megan Kirshbaum, PhD; Paul Preston, PhD
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Fax: 510/848-4445

Project Number: H133A980001
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 98 $500,000; FY 99 $500,000; FY 00 $500,000; FY 01 $500,000; FY 02
$500,000

Abstract: The National Resource Center for Parents with Disabilities focuses on the 10.9 percent of
U.S. families with children in which one or both parents have a disability—nearly 9 million parents. The Center provides: (1) accessible and disability-appropriate information regarding parenting with a disability to parents, potential parents, disability advocates, and legal, medical, and social service providers; (2) training to parents with disabilities, potential parents, and service providers; (3) technical assistance that increases informed practice and informed decisions; (4) program consultation that increases local and regional services that are accessible and disability-appropriate. To accomplish these goals, project researchers: (1) consolidate and disseminate information and resources, (2) synthesize and disseminate materials from other agencies and organizations, (3) develop and disseminate new materials tailored to address the specific needs of parents with disabilities and service providers, (4) expand the national availability of training and technical assistance to parents with disabilities and service providers, and (5) develop curricula to train future service providers. Parenting areas designated as highest priority are: custody, pregnancy and birthing, adoption, adaptive parenting equipment, and general parenting information. The project is staffed by nationally recognized experts regarding parents with disabilities, the majority of whom are parents with disabilities or family members of parents with disabilities.
Ideas for the New Millennium

World Institute on Disability
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http://www.disabilityworld.org

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Project Number: H133A990006
Start Date: October 1, 1999
Length: 60 months

NIDRR Officer: Eva M. Gavillán, EdD

NIDRR Funding: FY 99 $400,000; FY 00 $400,000; FY 01 $400,000; FY 02 $400,000

Abstract: This project creates a productive international exchange of information and expertise on disability and rehabilitation, connecting disability research and advocacy leadership in ten target countries with their peers in the United States. At the heart of this exchange is an online information system that captures innovation, links government officials, policy-makers, disability leaders, rehabilitation specialists, researchers and innovators in a lively exchange of ideas, networks, resources, and contacts. This sustainable network of information and resources on substantive disability issues is available across professions, cultures, and communities. The issues critical to the information exchanges are: (1) disability rights and independent living, (2) employment and entrepreneurial activity, (3) access and technology, (4) mass media images, and (5) influence through governance. Using a civil rights perspective, the project addresses disability policy, law, advocacy, research, and related developments in the ten countries. The project systematically promotes international exchange, reports results, and analyzes their significance in consumer-friendly formats and forums, including a comprehensive database, five annual symposia, as well as a monthly Webzine and online exchange of information in English and Spanish. The project collaborates with five disability-led organizations with substantial international experience.
Disability and Rehabilitation Research Projects
California

Disability and Rehabilitation Research Project to Disseminate Independent Living Research Information Through the Mass Media to Persons with Disabilities

Center for an Accessible Society
Exploding Myths, Inc.
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http://www.accessiblesociety.org

Principal Investigator: Cynthia Jones
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Project Number: H133A980045
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,991; FY 99 $299,994; FY 00 $299,988; FY 01 $299,996; FY 02 $299,992

Abstract: This project disseminates research information on Independent Living (IL) through the popular mass media. Like many groups who rely on well-planned programs of media dissemination involving media relations firms, this project hires and works proactively with a media relations firm and selected researchers to obtain coverage of IL issues in the popular mass media. The goal is to create the recognition that the target population and its issues require ongoing, in-depth coverage. The project conducts a proactive “media watch” to identify opportunities to insert an IL perspective into public debates on policy issues in the popular mass media. As part of that watch, the project establishes a “rapid response” program to provide members of the popular mass media with resources among IL researchers, and to generate a response from the IL community to stories that omit the IL perspective. The project manages an interactive web site to provide information and resources about IL research to members of the popular mass media, researchers, and consumers.
TECH CONNECTIONS: Improving the Utilization of Existing and Emerging Rehabilitation Technology in the State Vocational Rehabilitation Program

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http://www.techconnections.org

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Project Number: H133A980052
Start Date: October 1, 1998
Length: 60 months
NIDRR Officer: Richard Johnson, EdD
NIDRR Funding: FY 98 $499,970; FY 99 $500,000; FY 00 $499,978; FY 01 $499,962; FY 02 $499,960

Abstract: TECH CONNECTIONS facilitates the use of rehabilitation technology in state VR programs. This customer-responsive, customer-driven, training, technical assistance, and dissemination project features: (1) a multifaceted approach to training that builds capacity through new curricula and new supporting materials that augment existing materials, for use by project-trained rehabilitation and university staff; (2) regional training forums, topic-specific audio conferences, and satellite video training; (3) individualized technical assistance and information about the AT, on a case-by-case basis, for rehabilitation professionals and for their customers with disabilities; and (4) broad-based outreach and dissemination to people who provide AT. Training includes an Internet-based discussion group open to rehabilitation professionals, people with disabilities, and other interested parties and a mentoring program pairing experienced technology users with rehabilitation professionals or people with disabilities seeking AT. Additional methods of outreach include project announcements circulated to rehabilitation, education, and disability Internet discussion lists; presentations at conferences and workshops; a toll-free phone number; and an Internet-based newsletter. United Cerebral Palsy Association works in collaboration with the Center for Rehabilitation Technology and the Southeast Disability and Business Technical Assistance Center.
Disability and Rehabilitation Research Projects
Kansas

Improving Research Information Dissemination and Utilization to Promote Independent Living (The RIIL Project)

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Research and Training Center on Independent Living
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rtcil@ukans.edu; jbudde@dole.lsi.ukans.edu; glen@ukans.edu
http://www.lsi.ukans.edu/rtcil/rtcil.htm
http://www.GetRIIL.org

Principal Investigator: James Budde, EdD; Glen White, PhD
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Project Number: H133A980048
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 98 $299,999; FY 99 $299,999; FY 00 $299,999; FY 01 $299,999; FY 02 $299,999

Abstract: This project increases the amount of relevant and useful independent living (IL) information to consumers to enable them to reach their IL goals more effectively. Consumer-empowered teams determine the need and provide input for research and development over the course of each project. Activities include: (1) completion of needs and barriers survey, how input from consumers can help identify priorities, and using this knowledge to create a research primer; (2) developing an information infrastructure for research that includes a searchable and interactive IL database and uses existing Internet tools such as chat rooms and Internet discussion lists; (3) providing technical assistance to consumers, family members, policy-makers, and practitioners; (4) training practitioners and advocates to provide technical assistance; and (5) assisting researchers in developing research reports for consumers, family members, and practitioners involving consumers in their research. To date, several products are available that include a brief of the initial survey, guidelines to research for nonresearchers, the “Know Way Guide” a guide for consumers to better understand research, and a review of literature related to writing for nonresearchers. This project is partnered with the Independent Living Research and Utilization Project at The Institute for Rehabilitation Research (TIRR). This project participates in the NIDRR Scholars program, providing motivated undergraduates with internship experience in disability research.
Disability and Rehabilitation Research Projects
Massachusetts

Web Accessibility Initiative, Phase II

Massachusetts Institute of Technology
W3C Web Accessibility Initiative
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Cambridge, MA 02139
jbrewer@w3.org
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Principal Investigator: Tim Berners-Lee, 617/253-5702
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Project Number: H133A000500
Start Date: October 1, 2000
Length: 60 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $499,999; FY 01 $499,998; FY 02 $500,000

Abstract: The project addresses newly emerging accessibility issues in the web industry, and expands implementation of existing web accessibility solutions. Activities include: (1) developing advanced versions of WAI guidelines and techniques to cover advanced web technologies such as XML applications; (2) developing a superset of universal design guidelines by integrating device-accessibility issues in 25 or more W3C specifications; (3) documenting techniques for accessibility features of W3C specifications in appendices and example code; (4) expanding techniques for retrofitting and validating conformance with WAI guidelines; (5) developing resource packages for accessibility of E-Commerce and distance learning; (6) providing in-house technical assistance to industry on the design of accessible web sites and software; (7) providing and monitoring a liaison to research and development projects that affect future web accessibility; and (8) providing technical assistance to research projects to promote adoption of universal design approaches in development of new web technologies. Support for the Phase I project enabled WAI to address cross-disability web accessibility issues successfully through a broad range of activities. It has provided a forum where scores of organizations internationally have combined their efforts to improve the accessibility of the web. For tens of millions of Americans with visual, hearing, physical, or cognitive disabilities, web accessibility provides the key to the information society: to the online commercial world, educational opportunity, employment opportunity, workplace communication, government services, recreation, and more.
Disability and Rehabilitation Research Projects
New Jersey

Traumatic Brain Injury National Data Center

Kessler Medical Rehabilitation Research and Education Corporation (KMRREC)
1199 Pleasant Valley Way
West Orange, NJ 07052
kwood@kmrrec.org
http://www.tbindc.org

Principal Investigator: Mitchell Rosenthal, PhD, 973/243-6971
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Project Number: H133A011403
Start Date: July 1, 2001
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 01 $348,187; FY 02 $348,133

Abstract: Goals of this national data center include: (1) data collection improvements through development of an interactive web-based syllabus for the use of Traumatic Brain Injury Model Systems (TBIMS) staff, researchers and others that improves the quality and cost-effectiveness of data collection efforts; (2) a new web site featuring a searchable TBI Model Systems Research and Publication Registry; (3) enhanced statistical and technical consultation services to streamline the database, employ innovative statistical techniques to compensate for incomplete or missing data, make comparisons with other datasets, improve measurement tools and prediction models, and enhance analysis of longitudinal data; (4) improved data collection methods based on the “focus group” feedback received from the data collectors at the other centers, which include awareness and incorporation of techniques designed to improve cultural sensitivity of data collection instruments and data collection methodologies used in the model systems; (5) consumer dissemination of the latest research results and innovative demonstration projects from the model systems through a partnership with the national Brain Injury Association (BIA); (6) continued leadership in TBIMS dissemination activities through Facts and Figures, TBIMS and BIA web sites, NCDDR dissemination programs, journal publications, and TBIMS conferences; (7) continued development of policies that allow for public access to data, while protecting the confidentiality of subjects in the database and incorporating the perspectives of both NIDRR and the TBIMS researchers and data management teams; (8) collaboration with the NIDRR SCI and Burn Data Centers to develop advanced methods of database function, data acquisition, data quality assurance, and general Data Center operations; and (9) new projects with CDC and other programs whose database have similar TBI populations.
Disability and Rehabilitation Research Projects
New York

Center for International Rehabilitation Research Information and Exchange (CIRRIE)

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Center for Assistive Technology
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ub-cirrie@buffalo.edu
http://cirrie.buffalo.edu

Principal Investigator: John Stone, PhD, 716/829-3141, ext. 125
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Project Number: H133A990010
Start Date: September 1, 1999
Length: 60 months
NIDRR Officer: Eva M. Gavillán, EdD
NIDRR Funding: FY 99 $400,000; FY 00 $400,000; FY 01 $400,000; FY 02 $400,000

Abstract: The mission of this Center is to improve rehabilitation services by obtaining and disseminating information on international rehabilitation research and practices. CIRRIE has four primary objectives: (1) develop and maintain an international research database, searchable from an accessible web site and organized according to the major types of rehabilitation research, as delineated in the NIDRR Long-Range Plan; (2) assist grantees of the Office of Special Education and Rehabilitation Services (OSERS) to establish an international component within their domestic conferences by facilitating and subsidizing participation by international experts and involve U.S. experts in international conferences; (3) conduct an international exchange of research and technical assistance experts based on requests from rehabilitation research centers in the U.S. and other countries; and (4) disseminate information to rehabilitation service providers on the cultural issues relevant to meeting the needs of recent immigrants. Publications include monographs addressing the relevant cultural issues for the top ten countries of origin of foreign-born people in the U.S. The monographs are based on a model of the service provider as a “culture broker,” with the first monograph in the series addressing the theory of culture brokering and its relevance to rehabilitation practice. A workshop on this topic is also available.
Disability and Rehabilitation Research Projects
New York

National Resource Center on Supported Living and Choice for People with Mental Retardation and Developmental Disabilities

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Center on Human Policy
805 South Crouse Avenue, Room 101
Syracuse, NY 13244-2280
thechp@sued.syr.edu
http://soeweb.syr.edu/thechp

Principal Investigator: Steven J. Taylor, PhD, 315/443-3851
Public Contact: Bonnie Shoultz, Associate Director; Rachael A. Zubal-Ruggieri, Information Coordinator, 800/894-0826 (V); 315/443-3851 (V); 315/443-4355 (TTY); Fax: 315/443-4338

Project Number: H133A990001
Start Date: January 1, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $400,000; FY 00 $400,000; FY 01 $400,000; FY 02 $400,000
Abstract: This project conducts information dissemination, training, and technical assistance on community inclusion, with a specific focus on supported living and choice. The Center identifies and documents innovative policies and practices for home ownership, self-directed support services, self-determination, self-advocacy, and community participation. Activities include the preparation of information materials for direct support staff, a national survey of state funding for supported living, and increased efforts to address the needs of historically underrepresented groups. The project maintains an information clearinghouse on supported living and choice and disseminates resource material targeted to people with developmental disabilities, family members, professionals, direct services staff, policy-makers, and providers. It offers assistance and support to Self Advocates Becoming Empowered, state and local providers, developmental disability councils, and protection and advocacy agencies.
Disability and Rehabilitation Research Projects
Texas

National Center for the Dissemination of Disability Research (NCDDR)

Southwest Educational Development Laboratory
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Austin, TX 78701-3281
lharris@sedl.org
http://www.ncddr.org

Principal Investigator: John Westbrook, PhD
Public Contact: Lin Harris, Information Assistant, 800/266-1832 (V/TTY); Fax: 512/476-2286

Project Number: H133A990008
Start Date: September 30, 1999
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 99 $750,000; FY 00 $750,000; FY 01 $750,000; FY 02 $750,000

Abstract: The goal of the National Center for the Dissemination of Disability Research (NCDDR) is to promote the utilization of research results developed through NIDRR grants/contracts. Major areas of work of the NCDDR include: (1) Research–designed to collect information that assists in identifying the needs and most likely strategies that assist in matching dissemination practices with intended user audiences. Activities include conducting annual surveys, focus groups, surveys, and annual reporting of state-of-the-art information about NIDRR grantees’ dissemination successes. (2) Demonstration–conducted to determine the effectiveness of new strategies and approaches in achieving intended dissemination and utilization outcomes. Activities include developing and using innovative web-based mechanisms, increasing common portal access to substantive English and Spanish language resources of grantees, and developing outreach strategies for under-represented audiences. (3) Dissemination and Utilization–implemented not to support the simple distribution of materials and other resources but rather the use of research outcomes in meaningful ways by those that can most benefit from their use. Activities include production of print and web-based informational products, networking of grantees to maximize outreach impact, and developing networks with a variety of research stakeholder groups for information and strategy exchanges. (4) Technical Assistance–provided to NIDRR grantees to build understanding, skills, and resources related to the dissemination and utilization of their disability research outcomes. Activities include providing onsite and offsite assistance in planning effective dissemination efforts, providing direct assistance to grantees with targeted dissemination efforts, and assisting in designing evaluation strategies to measure dissemination and utilization outcomes.
Disability and Rehabilitation Research Projects
Texas

Model Spinal Cord Injury Systems Dissemination Center

The Institute for Rehabilitation and Research (TIRR)
1333 Moursund
Houston, TX 77030-3405
khart@bcm.tmc.edu
http://www.mscisdisseminationcenter.org

Principal Investigator: Karen A. Hart, PhD
Public Contact: 713/797-5946; Fax: 713/797-5982

Project Number: H133A011501
Start Date: September 1, 2001
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 01 $150,000; FY 02 $150,000

Abstract: The Model Spinal Cord Injury Systems (MSCIS) Dissemination Center is a collaborative effort between the NIDRR-funded Model Spinal Cord Injury Centers and SCI collaborative research projects. The Center provides information about MSCIS research and publications to inquirers and model system staff members via the Internet, the telephone, and surface mail. Overall objectives of the project are: (1) documenting the scientific productivity of the Model SCI Centers and Collaborative Research Projects and providing a history of the Model Centers’ publications; (2) verifying that the publications are peer-reviewed by downloading citations from Medline, Current Contents, Cumulative Index to Nursing and Allied Health Literature (CINAHL) and Psychology Literature (PsychLit); (3) ensuring the accuracy of the citations through verification by Center and author semi-annually; (4) maintaining, on a semi-annual basis, the listing of web-accessible citations hosted on web site of the Regional Spinal Cord Injury Center of the Delaware Valley at Thomas Jefferson University Hospital in Philadelphia; (5) documenting and verifying the accuracy and currency of published book chapters and textbooks; (6) storing information electronically in Reference Manager in a format that can be uploaded to Reference Web Poster on the Center’s web site; (7) gathering structured data from each of the Model SCI Centers and Collaborative Research Projects that describes the educational products produced and the presentations given, as evidence of the significant work being done; (8) classifying the educational products and presentations produced by the Model SCI Centers and Collaborative Research Projects to provide a variety of accurate retrieval options for interested constituents; (9) developing a data storage system that facilitates uploads into the program’s web site in accessible format for interested constituents such as individuals with SCI, organizations, NIDRR, NCDRR, NARIC, the Model SCI Centers, libraries, rehabilitation facilities, professionals, and students; (10) disseminating efficiently and effectively to the greatest number of constituents the publications, educational products, and presentations produced by the Model SCI Centers and the Collaborative Research Projects as an aggregate representation of this NIDRR program’s contribution to the field of SCI; (11) providing a mechanism for NCDRR and NARIC to verify that they have complete and accurate information about all the Model SCI Centers and their accomplishments so that NCDRR and NARIC can achieve their dissemination objectives; and (12) reaching the greatest number of individuals possible with information and education about SCI by efficient use of NIDRR-funded resources and personnel.
Disability Law Knowledge Management System: A One-Stop Clearinghouse for Disability Information

Meeting the Challenge, Inc.
3630 Sinton Road, Suite 103
Colorado Springs, CO 80907-5072
info@mtc-inc.com

Principal Investigator: Robert H. Gattis Jr., 719/578-8448
Public Contact: 719/444-0252; Fax: 719/444-0269

Project Number: H133G000221
Start Date: June 1, 2000
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 00 $149,998; FY 01 $149,977; FY 02 $149,926

Abstract: The Disability Law Knowledge Management System (KMS) project develops a comprehensive knowledge dissemination and utilization repository of disability civil rights information in a web-based helpdesk format. The system builds on research conducted for the Rocky Mountain Disability and Business Technical Assistance Center (DBTAC) project, in which a prototype knowledge management system was developed and tested with information specialists from NIDRR-funded DBTACs. The prototype included a portion of the material available on the American with Disabilities Act. The Disability KMS project expands on the earlier work in two important areas. It vastly increases the quantity of information in the knowledge base, and it makes the work of information specialists more available to the general public. The project includes a comprehensive evaluation of the resulting system.
Field-Initiated Projects (FIPs)
North Carolina

Exploring Universal Design: Developing and Disseminating Universal Design Education Material Online

North Carolina State University
Center for Universal Design
104 Brooks Hall, 50 Pullen Road
Campus Box 8613
Raleigh, NC 27695-8613
molly_story@ncsu.edu
http://www.udeducation.org

Principal Investigator: Molly Story
Public Contact: 707/578-6839 (V/TTY); Fax: 707/578-9435

Project Number: H133G000025
Start Date: October 1, 2000
Length: 36 months
NIDRR Officer: William Peterson
NIDRR Funding: FY 00 $149,967; FY 01 $149,721; FY 02 $149,789
Abstract: This project develops an interactive web site of universal design instructional materials, project ideas, visuals, teaching strategies, and resources for use by design faculty, students, practicing designers, and user-experts. These growing audiences require sophisticated instructional materials, available through an efficient and timely vehicle for communication and dissemination. Objectives include: (1) allowing flexibility and discussion in how projects, visuals, and instructional materials are used in design education; (2) building an infusion model of teaching rather than a prescriptive, singular curriculum approach; and (3) promoting the site internationally to design faculty, practitioners, and others interested in universal design education. Partners in the project are the Center for Universal Design at North Carolina State University, the IDEA Center/Center for Virtual Architecture at the State University of New York at Buffalo, and Elaine Ostroff of the Global Universal Design Educators Network.
ADA Technical Assistance Projects
Washington

National Center on Accessible Information Technology in Education

University of Washington
Center on Human Development and Disability
Box 357920
Seattle, WA 98195-7920
accessit@u.washington.edu
http://www.washington.edu/accessit

Principal Investigator: Kurt Johnson, PhD, 206/543-3677
Public Contact: Alan J. Knue, 866/968-2223 (V/TTY); 206/616-2223 (V); 866/866-0162 (TTY);
Fax: 206/543-4779

Project Number: H133D010306
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $700,000; FY 02 $700,000

Abstract: This program helps educational entities make IT accessible to all students and employees, including those with disabilities. The Center: (1) compiles, redesigns, and develops materials that assist educational entities and their constituents in understanding and fulfilling their legal obligations to provide accessible IT, including an ADA self-evaluation guide for schools, Section 504 and ADA guidance for educational entities, technical materials on IT access, a consumer’s guide to accessible IT, and technical IT standards; (2) conducts a national information dissemination campaign using multiple formats and venues that raise awareness of accessible education-based IT and inform target audiences about the availability of technical assistance from the Disability Business Technical Assistance Centers (DBTACs) and others; (3) develops, disseminates, and provides technical assistance with implementation of policies, procedures, and practices that promote the use and procurement by educational entities of accessible IT that meets the standards for Section 508 or follows universal design principles; (4) coordinates with and provides training, materials, and technical assistance to the DBTACs in support of their technical assistance efforts to educational entities on accessible IT; and (5) provides training, materials, and technical assistance to staff of the U.S. Department of Education’s various IT initiatives and coordinates efforts with relevant Federal agencies and programs in order to assure that strategies for achieving accessible IT are used and promoted in every facet of activities and programs carried on by these organizations. The Center is a collaboration of the Center for Technology and Disability Studies, Opportunities, Internetworking, and Technology project (DO-IT), in partnership with the Equal Access to Software and Information (EASI) and the Microsoft Corporation. The Center works with the NIDRR-funded National Center on the Study of Postsecondary Education Supports and the National Center on Secondary Education and Transition in its dissemination efforts.
Assistive Technology Technical Assistance Projects
Georgia

assitivetech.net - Internet Site on Assistive Technology

Georgia Institute of Technology
Center for Assistive Technology and Environmental Access (CATEA)
490 Tenth Street
Atlanta, GA 30318
beth.bryant@arch.gatech.edu
http://www.assistivetech.net

Principal Investigator: Elizabeth A. Bryant, 404/894-0254
Public Contact: Robert Todd, Project Director, 404/894-6895; 800/726-9119 (V/TTY); Fax: 404/894-9320

Project Number: H224B020002
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 02 $250,000

Abstract: The National Assistive Technology Internet Site (www.assistivetech.net) increases the availability of, and ease of access to, information about assistive technology (AT), services, and resources available for people with disabilities. The web site provides 24-hour access to AT information for those with Internet connectivity, and a toll-free telephone number for those without it. The site serves all people but focuses particularly on people with disabilities, their families, service providers, educators, and employers. The assistivetech.net web site features: access to information about more than 15,500 AT devices, innovative automated intelligent agents to assist with AT definition and selection, Vendor Data Entry Interface to enable vendor involvement in maintaining AT information, and over 1,000 electronic links to appropriate and accessible public and private resources and information related to all types of disabilities, including low-level reading skills. Enhancements to the site include: Natural Language Search interface to enhance site usability, a forum for user-submitted accommodations and strategies, and improved, easier-to-use access to AT product information.
National Assistive Technology Advocacy Project

Neighborhood Legal Services, Inc.
Disability Law Unit
Ellicott Square Building
295 Main Street, Room 495
Buffalo, NY 14203
atproject@nls.org
http://www.nls.org

Principal Investigator: James R. Sheldon Jr., Esq.
Public Contact: 716/847-0650; Fax: 716/847-0227

Project Number: H224B020004
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 02 $160,000

Abstract: This project provides management- and advocacy-related technical assistance to attorneys and advocates who work for the 56 Protection and Advocacy for Assistive Technology (P&AT) projects, as well other public entities with an interest in the funding of AT. Advocacy-related training is provided through an annual project conference; sessions at the annual National Association of Protection and Advocacy Systems (NAPAS) conference; sessions at statewide or regional conferences sponsored by protection and advocacy programs or State AT Act projects; and distance training events on special education, funding of work-related AT, and other topics to be determined. Management-related training is provided at four annual training events sponsored by NAPAS. The project prepares publications on the funding of AT through a variety of funding sources and acts as a clearinghouse for funding-related documents through in-house resource libraries containing administrative hearing decisions; a wide range of court-related documents, including briefs and complaints; and model policies, procedures, and practices for delivery of AT in special education systems. A national AT email list provides a low-cost, efficient way to communicate with a nationwide network of AT advocates. The project also maintains a web site containing information relative to the funding of AT, including many of the project’s publications and links to other web-based resources to support AT advocacy efforts.
Principal Investigator: Mark X. Odum
**Public Contact:** Information Specialists, 800/346-2742 (V); 301/459-5900 (V); 301/459-4263 (Fax/TTY); Fax: 301/459-4263

**Project Number:** ED-02-CO-002
**Start Date:** January 1, 2002
**Length:** 36 months
**NIDRR Officer:** Ellen Blasiotti
**NIDRR Funding:** FY 02 $740,000

**Abstract:** The National Rehabilitation Information Center (NARIC) maintains a research library of more than 60,000 documents and responds to a wide range of information requests, providing facts and referral, database searches, and document delivery. Through telephone information referral and the Internet, NARIC disseminates information gathered from NIDRR-funded projects, other federal programs, and from journals, periodicals, newsletters, films, and videotapes. NARIC maintains REHABDATA, a bibliographic database on rehabilitation and disability issues, both in-house and on the Internet. Users are served by telephone, mail, electronic communications, or in person. NARIC also prepares and publishes the annual *NIDRR Program Directory*, available in database format from NARIC’s web site.
ABLEDATA Database Program

ORC Macro
8630 Fenton Street, Suite 930
Silver Spring, MD 20910
abledata@macroint.com
http://www.abledata.com

Principal Investigator: Katherine Belknap, 301/608-8998, ext. 100
Public Contact: Katherine Belknap, 800/227-0216 (V); 301/608-8998 (V); 301/608- 8912 (TTY);
Fax: 301/608-8958

Project Number: ED-02-000128
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $516,829
Abstract: This project maintains and expands the ABLEDATA database, develops information and referral services that are responsive to the special technology product needs of consumers and professionals, and provides the data to major dissemination points to ensure wide distribution and availability of the information to all who need it. The ABLEDATA database contains information on more than 26,000 commercially produced and custom-made assistive devices. Requests for information are answered via telephone, mail, electronic communications, or in person.
The Americans with Disabilities Act (ADA) opens more opportunities for persons with disabilities. It also places certain responsibilities on employers, transit and communication systems, state and local governments, and public accommodations. To assist covered parties to understand and comply with the ADA, NIDRR has funded a network of grantees to provide information, training, and technical assistance to businesses and agencies with duties and responsibilities under the ADA.

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ADA Technical Assistance Projects
Region I - CT, ME, MA, NH, RI, and VT

New England ADA Center and Universal Design in Educational IT
(Disability and Business Technical Assistance Center - Region I)

Adaptive Environments Center, Inc.
374 Congress Street, Suite 301
Boston, MA 02210-1807
oharrison@adaptiveenvironments.org; vfletcher@adaptiveenvironments.org
http://www.adaptiveenvironments.org

Principal Investigator: Valerie Fletcher, 617/695-1225, ext. 26
Public Contact: Oce Harrison, EdD, Project Director, 800/949-4232 (V/TTY in CT, ME, MA, NH, RI, and VT); 617/695-1225, ext. 31 (V/TTY); Fax: 617/482-8099

Project Number: H133D010211
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 01 $850,000; FY 02 $850,000
Abstract: The New England DBTAC provides technical assistance, training, and information dissemination for Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont. The new grantee retains relationships with previously contracted state affiliates, the statewide coalitions, the annual incentive grants, and the newsletter. Groups with rights or responsibilities under the ADA that are targeted for expanded outreach include self-advocacy organizations and the ARC; libraries; human resources trade groups; the hospitality industry, including Visitor and Convention Bureaus; schools; and health care professionals. Annual regional training initiatives include day-long workshops for state, municipal, and county ADA coordinators; half-day trainings for centers for independent living; training for architects on ADA updates; outreach and training in minority and immigrant communities both to people with disabilities and business owners; and voter accessibility training. Implementation of the education-based IT component of the project includes: (1) establishing regional linkages to educational entities for cooperation/collaboration; (2) establishing the capacity in each state to coordinate and build skill, using resources of state organizations and the state infrastructure to reach large audiences through familiar, local methods; (3) training using a variety of distance learning techniques tailored to target audiences; (4) convening a collaborative conference on universal design on the web with the Rhode Island School of Design; (5) running a public awareness campaign that puts the issue of universal design on the educational IT agenda; and (6) identifying best practices in the region to be written up as case studies each year.
Northeast Disability and Business Technical Assistance Center - Region II

Cornell University
Program on Employment and Disability
School of Industrial and Labor Relations
107 ILR Extension Building
Ithaca, NY 14853-3901
northeastada@cornell.edu
http://www.northeastada.org

Principal Investigator: Susanne Bruyère, PhD, 607/255-7727
Public Contact: Andrea Haenlin-Mott, Project Director, 800/949-4232 (V/TTY, in NJ, NY, PR, and VI); 607/255-8348 (V); 607/255-6686 (TTY); Fax: 607/255-2763

Project Number: H133D010205
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,100,000; FY 02 $1,100,000

Abstract: The Northeast ADA & Accessible Information Technology Center provides technical assistance, training, and information dissemination for New Jersey, New York, Puerto Rico, and the Virgin Islands on the ADA and accessible information technology. A new focus for the project is information, training, and technical assistance to educational entities in Region II, on the procurement and use of accessible information technology for students and employees with disabilities. Services are comprehensive, involving effective use of existing networks and collaborations with regional partners and organizations that currently deliver services to educational organizations, parent organizations, disability advocacy organizations, employers, labor unions, and state and local government. The Program on Employment and Disability at Cornell University’s School of Industrial and Labor Relations takes the lead in a regional collaborative effort that includes the following partners: Office of the Advocate for Persons with Disabilities for New York state; AccessPoint Solutions in New Jersey; the Department of Architecture and Center for Assistive Technology at the State University of New York (SUNY) at Buffalo; the Assistive Technology Project at the University of Puerto Rico; the University Affiliated Program at the University of the Virgin Islands; and various local agencies and organizations.
Mid-Atlantic Disability Business Technical Assistance Center - Region III

TransCen, Inc.
451 Hungerford Drive, Suite 607
Rockville, MD 20850-4151
adinfore@transcen.org
http://www.adainfo.org

Principal Investigator: Marian S. Vessels, Project Director
Public Contact: 800/949-4232 (V/TTY, in DC, DE, MD, PA, VA, and WV); 301/217-0124 (V/TTY); Fax: 301/217-0754

Project Number: H133D010212
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 01 $1,099,998; FY 02 $1,099,998

Abstract: The Mid-Atlantic DBTAC provides technical assistance, training, and information dissemination for Delaware, the District of Columbia, Maryland, Pennsylvania, Virginia, and West Virginia. Activities are organized under two major goals: (1) provide technical assistance, training, and information dissemination about the ADA; and (2) provide technical assistance, training, and information dissemination about accessible education-based IT. Individual activities to meet these goals and project objectives are designed to build capacity among State and local agencies, including Centers for Independent Living, so that the Center’s impact and effectiveness is maximized. Approximately 20,000 individuals and organizations are directly impacted through project activities each year.
Southeast Disability Business Technical Assistance Center - Region IV

Georgia Tech Research Corporation
Center for Assistive Technology and Environmental Access (CATEA)
490 Tenth Street
Atlanta, GA 30318
sedbtac@catea.org
http://www.sedbtac.org

Principal Investigator: Shelley Kaplan, Project Director, 404/385-0636
Public Contact: 800/949-4232 (V/TTY, in AL, FL, GA, KY, MS, NC, SC, and TN); 404/385-0636 (V/TTY); Fax: 404/385-0641

Project Number: H133D010207
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,450,000; FY 02 $1,450,000

Abstract: The Southeast DBTAC provides technical assistance, training, and information dissemination for Alabama, Florida, Georgia, Kentucky, Mississippi, North Carolina, South Carolina, and Tennessee. The project: (1) provides expert technical assistance to promote voluntary and effective implementation of the ADA among entities with rights and responsibilities; (2) facilitates widespread use, particularly in educational entities, of accessible and usable electronic and IT; (3) fosters and facilitates regional capacity-building by cultivating collaborations between the regional Educational Leadership Team and the existing ADA Leadership Network; (4) expands training programs by incorporating enhanced distance learning methods, including teleconferences, web-based training, and electronic discussions, that are designed in a fully accessible and useful manner; and (5) identifies and disseminates “Best Practices” in employment and IT in order to encourage and support replication. To build on its ten-year history of regional capacity building, the DBTAC: (a) strengthens its ADA Leadership Network of eight state and 80 local affiliates; (b) shares expertise about IT through the Georgia Tech Center for Assistive Technology and Environmental Access (CATEA)’s Information Technology Technical Assistance and Training Center (ITTATC) project; and (c) facilitates accessible education-based IT across the educational spectrum via the newly-established Educational Leadership Team.
Great Lakes Disability Business Technical Assistance Center -
Region V

University of Illinois/Chicago
Department of Disability and Human Development
1640 West Roosevelt Road, Room 405
Chicago, IL 60608-6904
gldbtac@uic.edu
http://www.adagreatlakes.org

Principal Investigator: Robin A. Jones, Project Director, 312/996-1059
Public Contact: 800/949-4232 (V/TTY, in IL, IN, MI, MN, OH, and WI); 312/413-1407 (V/TTY);
Fax: 312/413-1856

Project Number: H133D010203
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,450,000; FY 02 $1,478,750
Abstract: The Great Lakes DBTAC provides technical assistance, training, and information dis-
semination for Illinois, Indiana, Michigan, Minnesota, Ohio, and Wisconsin. The project’s audiences
include business, government, and education organizations and individuals with disabilities and their
families. The Center assists these audiences in understanding their rights and responsibilities under
the ADA. For example, technical assistance and training are provided to educational entities regard-
ing their responsibility to ensure that the IT they purchase and use is accessible to and usable by
individuals with disabilities. The aim is that within the education system administrators, educators,
staff, students, and parents have full and equal access to programs, services, and information used or
disseminated through a variety of information technologies. The Center programs and services are
coordinated through a network of collaborators at the local, state, and regional level representing
business, government, education entities and people with disabilities. Services and programs include
direct technical assistance, training, and materials dissemination utilizing a variety of methods and
strategies.
Disability Law Resource Project (Southwest Disability Business Technical Assistance Center - Region VI)

The Institute for Rehabilitation and Research (TIRR)
Independent Living Research Utilization (ILRU)
2323 South Shepherd Boulevard, Suite 1000
Houston, TX 77019-7024
dlrp@ilru.org
http://www.dlrp.org

Principal Investigator: Lex Frieden, 713/797-5283
Public Contact: Wendy Wilkinson, Project Director, 800/949-4232 (V/TTY, in AR, LA, NM, OK, and TX); 713/520-0232 (V); 713/520-5136 (TTY); Fax: 713/520-5785

Project Number: H133D010210
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 01 $1,099,997; FY 02 $1,099,997
Abstract: The Disability Law Resource Project (DLRP), based at ILRU, is one of ten regional Disability and Business Technical Assistance Centers that offers expert technical assistance, training, and material dissemination to Arkansas, Louisiana, New Mexico, Oklahoma, and Texas. Information and training is provided on the ADA, information technology, and other disability related laws. DLRP proactively informs and educates a diverse audience that includes educational, business, and governmental entities. The DLRP collaborates with an affiliate in each of the five states, as well as, disability organizations to expand its outreach throughout the region.
Great Plains ADA and Information Technology Center - Region VII

University of Missouri/Columbia
100 Corporate Lake Drive
Columbia, MO 65203
ada@missouri.edu
http://www.adaproject.org

Principal Investigator: Jim de Jong, Project Director, 573/882-3600 (V)
Public Contact: 800/949-4232 (V/TTY, in IA, KS, MO, and NE); 573/882-3600 (V/TTY); Fax: 573/884-4925

Project Number: H133D010201
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 01 $850,000; FY 02 $850,000

Abstract: The Great Plains DBTAC provides technical assistance, training, and information dissemination for Iowa, Kansas, Missouri, and Nebraska. In order to facilitate successful implementation of the ADA and accessible education-based IT in Region VII, the project and its collaborating partners: (1) provide training and technical assistance, and disseminate materials to individuals and entities with responsibilities and rights under the ADA regarding the ADA’s requirements as well as developments in case law, policy, and implementation; (2) increase the capacity of organizations at the state and local level, including Centers for Independent Living (CILs), to provide training on the ADA; (3) provide training and technical assistance, and disseminate material on the legal obligations of educational entities to provide accessible IT to students and employees; (4) provide information to CILs, Parent Training Information Centers, and Regional Resource Centers on accessible education-based IT; (5) increase the capacity of organizations at the state and local level, including CILs, to provide technical assistance; (6) provide technical assistance to educational entities to enable them to conduct self-evaluations on the accessibility of their IT; and (7) provide technical assistance, either directly or through referral, regarding how to make existing IT accessible and ensure that new IT acquisitions are accessible.
Rocky Mountain Disability Business Technical Assistance Center - Region VIII

Meeting the Challenge, Inc.
3630 Sinton Road, Suite 103
Colorado Springs, CO 80907-5072
RegionVIII@mtc-inc.com
http://www.ada-infonet.org

Principal Investigator: Robert Gattis, Project Director, 719/444-0252
Public Contact: 800/949-4232 (V/TTY, in CO, MT, ND, SD, UT, and WY); 719/444-0268 (V/TTY); Fax: 719/444-0269

Project Number: H133D010004
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 01 $849,716; FY 02 $849,157

Abstract: The Rocky Mountain DBTAC provides technical assistance, training, and information dissemination for Colorado, Montana, North Dakota, South Dakota, Utah, and Wyoming. The project builds the capacity for reaching every individual, business, public entity, and educational institution with training, materials dissemination, and technical assistance on the ADA and educational-based IT accessibility. A comprehensive program expands a collaborative network consisting of key agencies and organizations throughout the region. This project also operates and maintains the ADA Impact Measurement System (AIMS), a web-based system that collects customer survey data. This system allows the ten regional DBTACs to evaluate the outcomes of the DBTAC program quantitatively.
ADA Technical Assistance Projects
Region IX - AZ, CA, HI, NV, and the Pacific Basin

Pacific Disability Business Technical Assistance Center - Region IX

Public Health Institute
2168 Shattuck Avenue, Suite 301
Berkeley, CA 94704-1307
adatech@pdbtac.com
http://www.pacdbtac.org

Principal Investigator: Erica C. Jones, Project Director, 510/848-2980 (V); 510/848-1840 (TTY)
Public Contact: Gina Obrecht, Program Coordinator, 800/949-4232 (V/TTY, in AZ, CA, HI, NV, and the Pacific Basin); 510/848-2980 (V); 510/848-1840 (TTY); Fax: 510/848-1981

Project Number: H133D010209
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,450,000; FY 02 $1,450,000
Abstract: The Pacific DBTAC provides technical assistance, training, and information dissemination for Arizona, California, Hawaii, Nevada, and the Pacific Basin. The latest funding cycle includes a series of innovative initiatives and approaches to enhance compliance with ADA rules and regulations. There is also an integrated action plan to enhance the availability of accessible IT equipment in Federal Region IX, primarily through a focus on educational institutions as key sites for adopting the principles of Section 508, and for ensuring full access to IT for young people with disabilities. The Pacific DBTAC’s interdisciplinary, multilevel management strategy ensures that all project objectives are tracked and attained and that Center services are fully integrated and delivered in an effective, cost-efficient, and accessible manner. The DBTAC provides quality training, federally approved materials, and technical assistance services to requesters who seek support, advice, and information and it conducts proactive strategic outreach and education services that promote adherence to ADA regulations and principles at all levels of society. Education-Based Information Technology, being a key focus, uses best practices to promote utilization throughout school systems.
ADA Technical Assistance Projects
Region X - AK, ID, OR, and WA

Northwest ADA/IT Center (Disability Business Technical Assistance Center - Region X)

Oregon Health and Science University
Oregon Institute on Disability and Development
P.O. Box 574
Portland, OR 97207-0574
nwada@ohsu.edu
http://www.nwada.org

Principal Investigator: Charles Drum, JD, PhD, 503/494-8047
Public Contact: Lynnae Ruttledge, Project Director, 800/949-4232 (AK, ID, OR, and WA only); 503/494-6747; Fax: 503/494-6868

Project Number: H133D010002
Start Date: October 1, 2001
Length: 60 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $850,000; FY 02 $850,000
Abstract: The Northwest DBTAC/Information Technology Center provides technical assistance, training, and information dissemination for Alaska, Idaho, Oregon, and Washington. Audiences include people with disabilities, state and local governments, and businesses in Region X. In addition to the Americans with Disabilities Act (ADA) and other state and federal disability laws and regulations, the Center also provides technical assistance, training, and dissemination to educational entities regarding “best practices” information on accessible IT. The sources of such information include the new National Center on Accessible Education-Based Information Technology.
National ADA Program Assistance Coordinator

CESSI
6858 Old Dominion Drive, Suite 250
McLean, VA 22101
adata@adata.org
http://www.adata.org

Principal Investigator: Shelia Newman
Public Contact: Jennifer Eckel, Project Director, 703/448-6155 (V); 703/448-3079 (TTY); Fax: 703/442-9015

Project Number: ED-99-CO-0002-03
Start Date: November 6, 2002
Length: 36 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 02 $320,000

Abstract: The role of the ADA Program Assistance Coordinator (PAC) is to enhance the performance of the organizations that are members of NIDRR’s nationwide ADA Technical Assistance grant program. These include ten regional Disability and Business Technical Assistance Centers (DBTACs), and Cornell University School of Industrial and Labor Relations’ Research and Demonstration Project (R&D) for improving employment practices covered by Title I of the ADA. The Program Assistance Coordinator conducts: (1) coordination services, (2) collaborative assistance, (3) public relations, and (4) reporting activities. In addition, the PAC organizes and manages the semi-annual Project Directors’ meetings. It facilitates legal review of grantee generated materials. The PAC identifies and distributes appropriate materials from federal agencies, related NIDRR research projects, and private and public sector organizations. As a gateway to the national ADA technical assistance grant program, the PAC maintains a national web site, develops and disseminates promotional materials, and implements a national visibility campaign for the grantees.
Capacity-Building for Rehabilitation Research and Training

NIDRR funding for capacity building supports advanced instruction for researchers and service providers, and training for consumers in applications of new research and technology. This involves training researchers across disciplines, training rehabilitation practitioners and service providers to use research-generated knowledge and new techniques, and training consumers to participate in research efforts. Distinguished and Merit Fellowships are provided for a one-year period of intense research.

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Rehabilitation Research and Training Centers (RRTCs)
Illinois

UIC National Research and Training Center on Psychiatric Disability

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Department of Psychiatry
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Chicago, IL 60603-5902
http://www.psych.uic.edu/uicnrtc

Principal Investigator: Judith A. Cook, PhD, 312/422-8180, ext. 19
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Project Number: H133B000700
Start Date: September 30, 2000
Length: 60 months
NIDRR Officer: David W. Keer
NIDRR Funding: FY 00 $450,000; FY 01 $450,000; FY 02 $450,000
Other funding: FY 00 $300,000 (CMHS); FY 01 $300,000 (CMHS); FY 02 $300,000 (CMHS)

Abstract: This Center conducts a comprehensive series of research and training projects that focus on increasing self-determination for persons with psychiatric disabilities. The Center’s current projects are composed of five core areas: (1) choices in treatment decision-making; (2) economic self-sufficiency; (3) consumer advocacy under managed care; (4) career development through real jobs for real wages; and (5) strengthening self-determination skills and self-advocacy. These core areas reaffirm that people with psychiatric disabilities have the right to maximal independence, which grows out of making choices in the decisions that affect their lives. Project activities are implemented by multidisciplinary workgroups composed of consumers, families, service providers, state agency administrators, researchers, and Center staff. Outcome and measurement tools developed for each core area assess key outcomes and program policies related to self-determination. The project includes a collaboratively planned state-of-the-science conference and workshop series on self-determination and psychiatric disabilities and a comprehensive report on self-determination in this area. Advanced technology is incorporated into each project’s objectives and Center training and dissemination activities. Multimedia formats ensure widespread accessibility of the Center’s products and materials to multiple constituents. Additionally, the Center conducts evaluation and basic research; trains consumers, families, and rehabilitation, education, and mental health service providers. The staff also develops and provides information for public policy initiatives.
An Analysis of ADA Title Protections After the Sutton Decisions

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Project Number: H133F020010
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project investigates what is coverable under the ADA after the Sutton rulings. Objectives include understanding factors predicting pro-plaintiff outcomes after the Sutton decisions and how the courts are applying the Sutton precedents in determining whether or not an individual has a disability. The Sutton rulings, which were issued in 1999 by the Supreme Court, stand for the proposition that the determination of an individual’s disability status must take into account the individual’s use of mitigating measures such as medication. The rulings created additional precedent for a narrowing of the ADA’s effectiveness, and prompted the EEOC to revise its guidelines regarding the ADA’s disability definitions. Noting that the Court’s holdings are contrary to Congress’s intent, the revised EEOC guidelines conclude that the Sutton rulings mean that “[a] person who experiences no substantial limitation in any major life activity when using a mitigating measure does not meet the ADA’s first definition of disability.”
The Effects of Inclusive and Traditional Educational Programs for Students with Disabilities on Postsecondary Outcomes

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Project Number: H133F020013
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project investigates the relationship between educational practices and postsecondary outcomes for students with disabilities. Objectives include: (1) determining if students who spend most or all of their educational experiences in inclusive settings, while having access to the general education curriculum, achieve better postsecondary outcomes; (2) structuring an evaluation instrument to assess the comprehensive nature of transition services, using a modified Taxonomy for Transition Programming (Kohler, 1996) instrument; and (3) in regard to the legislative mandate from both IDEA and the Rehabilitation Act, to provide interagency collaboration and share the transition responsibility, collecting ongoing follow-up data to obtain outcome data, assess service continuity, and assess service gaps that occur after a student leaves school.
Predictors of Functional Outcomes and Needs of Children and Youth with Acquired Brain Injuries upon Discharge from Inpatient Rehabilitation

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Project Number: H133F020022
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This study identifies predictors of functional outcomes and needs of children and youth with acquired brain injuries upon their discharge from an inpatient rehabilitation program in the northeast United States. The functional outcomes and needs under investigation include three domains of activity performance measured by the Pediatric Evaluation of Disability Inventory (self-care, mobility, and social function), the extent of caregiver assistance provided for tasks in these three domains, inpatient rehabilitation length of stay, and discharge disposition (whether they go home or to a more restrictive setting). A second purpose of the study is to develop prediction models and assess the feasibility of using these models to predict functional outcomes and needs at discharge for individual children admitted to the program.
Fellowships (Distinguished)
Minnesota

The Self-Advocacy Movement: A History of the Unacknowledged Civil Rights Movement

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Project Number: H133F020012
Start Date: September 30, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project examines the self-advocacy movement, which was started to enable people with intellectual and other developmental disabilities to correct institutional discrimination, stigmatization, and harassment. Objectives include: (1) examining society’s relationship to people with intellectual and other developmental disabilities; (2) examining past and present institutional discrimination experienced by people with disabilities, and comparing and contrasting these experiences with those of other minority groups; (3) identifying and describing the influences that led people to become social activists; (4) describing organizational and other dynamics that influence the movement; and (5) describing the current status of the self-advocacy movement and its future direction. The project conducts 24 face-to-face interviews with self-advocates of color and/or known founders or leaders of the self-advocacy movement.
Fellowships (Distinguished)
Missouri

A Comprehensive Survey of the Status of Distance Education in Rehabilitation Counseling

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Project Number: H133F020004
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project examines the progress being made in meeting the Congressionally mandated standard for “qualified” personnel among practicing rehabilitation counselors. In particular, the project studies graduate-level rehabilitation counselor training programs, determining (1) the state-of-the-art in providing graduate-level rehabilitation counselor training, and (2) whether counselors employed in the state/Federal program are actually engaged in such training. The target populations for this research are all programs offering graduate level rehabilitation counseling degrees and courses in the United States, and all students currently enrolled in such programs.
Fellowships (Distinguished)
New York

Improving Outcomes for Individuals Who Are Low-Functioning Deaf

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Project Number: H133F020002
Start Date: July 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project reviews reports regarding individuals who are low functioning deaf (LFD), the labor force, and implementation of the Ticket to Work and Work Incentives Improvement Act (TWWIA). The project also consults with experts on working with people who are LFD. Policymakers are consulted to help prepare journal articles and conference presentations in the areas of personnel preparation, reading instruction, transition, community-based services, and guidance for educators and counselors to improve outcomes for this population.
Clinical Supervision Within the State-Federal Vocational Rehabilitation Program: A Combined Qualitative and Quantitative Analysis

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Project Number: H133F020007
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This project develops a model of effective supervision that is field-based, from counselor and supervisor perspectives within the state-Federal vocational rehabilitation program. The research combines qualitative and quantitative (nested design) methods to address five research objectives that examine the nature of clinical supervision as practiced by the Pennsylvania Office of Vocational Rehabilitation. Approximately 100 participants (80 counselors and 20 supervisors) from all of the 15 district offices complete an individual, structured interview. After finishing the interview, research participants complete two research scales. The first, the Rehabilitation Counselor Supervision Inventory, examines the knowledge and preparedness to conduct supervision. The second scale, the Supervisory Working Alliance Inventory, examines two dimensions of the supervisory relationship, rapport, and client focus. Results from this study provide a better understanding of effective and ineffective supervision and what variables contribute to each type.

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Project Number: H133F020028
Start Date: September 15, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $55,000

Abstract: This study identifies factors that predict assistive device use and guides therapeutic services for all types of assistive devices. The broad objective is to describe the process people with disabilities experience when deciding to initiate assistive technology use and to incorporate devices into their lives. The specific aim is to describe the decision making of older adults with visual impairments who are working to integrate low-vision assistive technologies into their daily routines. Well-established qualitative research procedures are used, including focus group and narrative interviewing, and systematic analysis of transcribed data leading to broad theme identification. Data from medical records are used to complete profiles of device users and non-users and to verify information provided by the subjects in interviews.
Fellowships (Merit)
Arizona

Assistive Technology and Adult Literacy: Bridging the Gap for Adults with Learning Disabilities

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Project Number: H133F020025
Start Date: August 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $45,000

Abstract: This project investigates whether assistive technology access and instruction improves the literacy skills and goal attainment of adult students with learning disabilities, when combined with regular adult basic education classes. A participatory action research (PAR) design seeks reflective participant involvement at every level, incorporating personal reflection, group dialogue, negotiation of the emerging analysis, and social action in an ongoing, long-term commitment. The overall goals of this project are to: (1) investigate the effects of assistive technology on adult literacy learners’ skill development and goal attainment, (2) investigate the personal and social impacts that participation has on the learners, and (3) make recommendations to the field of adult education on promising practices for the infusion of assistive technology into literacy instruction.
Developing a Social Validation Model for Effective Utilization of Disability and Rehabilitation Research

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Project Number: H133F020023
Start Date: September 1, 2002
Length: 12 months
NIDRR Officer: Ellen Blasiotti
NIDRR Funding: FY 02 $45,000

Abstract: This project develops a preliminary social validation model that applies the concepts of social validity, ecological validity, and clinical significance to conducting and reporting research, with the goal of increasing research utilization among rehabilitation practitioners. The specific aims of this project are to investigate: (1) whether the concepts of social validity, ecological validity, and clinical significance have been incorporated into outcome studies of occupational therapy (OT), physical therapy (PT), and speech-language pathology (SLP) treatments for children with disabilities; (2) whether incorporation of these concepts of evidence-based practice is perceived to be useful by OT, PT, and SLP practitioners who work with children with disabilities in school settings; and (3) whether incorporation of these concepts is perceived to have an impact on research utilization among those practitioners.
Advanced Rehabilitation Research Program: Ed Roberts Fellowship in Disability Studies

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Principal Investigator: Susan Schweik, 510/642-4333

Project Number: H133P020009
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $150,000

Abstract: This program trains advanced scholars 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 with advanced professional degrees 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 Ed Roberts Postdoctoral Fellowships a year for each of the five program years. Fellows devote their full-time effort to Fellowship activities onsite. Funding includes a stipend and travel funds.
Interdisciplinary Rehabilitation Research Post-Doctoral Program

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Principal Investigator: William C. Mann, PhD
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Project Number: H133P020005
Start Date: August 1, 2002
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 02 $150,000

Abstract: This project addresses the shortage of rehabilitation researchers through an interdisciplinary postdoctoral training program in rehabilitation research. The focus is on recruiting and training postdoctoral fellows with backgrounds in professions of high need, specifically rehabilitation engineering, physical therapy, and occupational therapy. There is also a strong focus on recruiting members of groups that have been traditionally underrepresented in rehabilitation research positions. The participating faculty for this program have large funded programs of rehabilitation research and also have considerable experience in serving as mentors for advanced research training. The program offers postdoctoral fellowships from two to three years to qualified individuals interested in rehabilitation research. Postdoctoral fellows focus in an area related to one of the levels of these models: neurological rehabilitation, rehabilitation engineering, and rehabilitation outcomes research.
Advanced Rehabilitation Research Training Projects
Illinois

Advanced Rehabilitation Research Training Project in Rehabilitation Services Research

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Center for Rehabilitation Outcomes Research
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Principal Investigator: Allen W. Heinemann, PhD
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Project Number: H133P80014
Start Date: May 1, 1998
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 98 $150,000; FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 $150,000

Abstract: This project develops a five-year fellowship program in rehabilitation services research at Northwestern University’s Institute for Health Services Research and Policy Studies and the Department of Physical Medicine and Rehabilitation. It uses available expertise and collaborators to train postdoctoral fellows in rehabilitation health services research. Over two years the program includes course work, a practicum, original research, and grant writing. Fellows new to health services research have six core courses, as well as the two additional courses for all fellows. The first year concentrates on beginning Masters in Public Health (MPH) courses. The second year includes intermediate MPH course work plus electives. Each fellow is expected to develop an individual research project by the end of the first training year and a publishable article by the end of the second year in addition to submitting at least one grant application related to the research activity.
Rehabilitation Science for Engineers and Basic Scientists: An Advanced Training Program

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Principal Investigator: W. Zev Rymer, MD, PhD
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Project Number: H133P990006
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $148,323; FY 00 $148,752; FY 01 $148,724; FY 02 $148,720

Abstract: The goal of this program is to increase the number of PhD engineers and basic scientists trained to perform research aimed at solving problems of people with disabilities. To meet this objective, the project trains postdoctoral scientists in three areas of special expertise: musculoskeletal biomechanics; neurorehabilitation; and prosthetics, orthotics, and biomaterials. Targeted technical training is coordinated with intensive clinical instruction and experience. Postdoctoral trainees, including scientists and engineers from minority or disability groups, are recruited by regional and national advertising and via the Internet. Many training faculty are based within the Rehabilitation Institute of Chicago, providing access to active clinical rehabilitation programs, and interaction both with clinical faculty and people with disabilities.
Advanced Rehabilitation Research Training Projects
Illinois

Advanced Rehabilitation Research Training

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Principal Investigator: Tamar Heller, PhD
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Project Number: H133P000005
Start Date: April 1, 2000
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 00 $150,000; FY 01 $150,000; FY 02 $150,000

Abstract: This project provides an intensive interdisciplinary postdoctoral training program for disability and rehabilitation research scholars. The program combines immediate immersion in an ongoing research program with a focused didactic training experience, providing trainees with knowledge of the critical values, current issues, and innovative approaches in contemporary disability research. The training is offered through a cooperative effort of three units within the College of Health and Human Development Sciences: the Department of Disability and Human Development, Department of Occupational Therapy, and the Department of Physical Therapy. These departments have an established record of successful collaboration in advanced training, including creating the Interdisciplinary Doctor of Philosophy (PhD) in Disability Studies at UIC, a unique interdisciplinary doctoral program that addresses the multidimensional nature of disability. A central theme of this program is that the current fragmentation of knowledge regarding disability can be rectified only by preparing future scholars and researchers who have a coherent, integrated, and in-depth knowledge of the multidimensional nature of disabilities. All three academic units offering this advanced research training have senior faculty with established, ongoing research programs capable of guiding postdoctoral training in three specialized content areas of disability research: disability measurement, disability experience, and disability service and policy.
Advanced Rehabilitation Research Training Projects
Kansas

Rehabilitation Research Training Program

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Project Number: H133P70004
Start Date: July 1, 1997
Length: 60 months
NIDRR Officer: Bonnie Gracer
NIDRR Funding: FY 97 $150,000; FY 98 $150,000; FY 99 $150,000; FY 00 $150,000; FY 01
$150,000; FY 02 (No-cost extension through 6/30/03)
Abstract: This project increases the quantity of new postdoctoral and doctoral researchers and
ensures their competency along family-systems, life-span, and multicultural dimensions. Focusing
on families whose members have disabilities, the scholars become capable of conducting independent
research related to: (1) the families studied; (2) rehabilitation and special education agencies,
systems, and processes; and (3) families and individuals from culturally and linguistically diverse
backgrounds who are served by those systems. The postdoctoral fellows collaborate with faculty
from the Beach Center, Special Education Department, and other faculty in learning and conducting
disability and family research for a full year. The doctoral trainees take their PhD degrees in special
education, majoring in family and disability studies and minoring in research methodologies.
The Development, Implementation, and Evaluation of a Research Training Program in Psychiatric Rehabilitation

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Center for Psychiatric Rehabilitation
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Principal Investigator: Sally E. Rogers, PhD
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Project Number: H133P70014
Start Date: March 1, 1997
Length: 60 months
NIDRR Officer: Roseann Rafferty
NIDRR Funding: FY 97 $147,489; FY 98 $147,489; FY 99 $147,489; FY 00 $147,489; FY 01 $147,489; FY 02 (No-cost extension through 1/31/2003)
Abstract: In this program, six individuals who possess doctoral-level clinical training are recruited and provided with a broad-based, intensive 27-month training fellowship in rehabilitation research. To provide an optimal training experience, three fellows are in residence at a time. Each fellow gains competency in the following areas: psychiatric rehabilitation, research design/methodology, statistics, consumer issues (as they relate to applied research), the conduct of applied rehabilitation research, computer literacy, and grant and professional writing.
Advanced Rehabilitation Research Training Projects
Massachusetts

An Integrated Rehabilitation Engineering Research Training Program

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Project Number: H133P990003
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Robert J. Jaeger, PhD
NIDRR Funding: FY 99 $149,915; FY 00 $149,915; FY 01 $149,915; FY 02 $149,915

Abstract: The goal of this project is to establish a clinically oriented, scientifically grounded educational program for training biomedical engineering (BME) postdoctoral fellows in rehabilitation engineering. The overall objective of the program is to produce biomedical engineers who are capable of communicating and interacting with physician investigators in a significant and meaningful manner, and who are capable of defining and solving clinically relevant problems in rehabilitation engineering. The specific objectives of this project are: (1) to establish a core faculty and administrative structure for the training program; (2) to provide BME postdoctoral fellows with the opportunity to participate in clinical educational rotations in physical medicine and rehabilitation (PM&R) and geriatrics; (3) to provide BME postdoctoral fellows and medical trainees in geriatrics or PM&R with the opportunity to collaborate on clinically relevant research projects; and (4) to establish a rehabilitation engineering curriculum that includes didactic sessions on clinical research methodology, as well as a seminar series to expose trainees to leaders in the field and develop their own expertise in giving scientific presentations. Accordingly, this program trains a new cadre of biomedical engineers with the knowledge and skills to develop innovative rehabilitation technologies that directly benefit individuals with disabilities.
Rehabilitation Health Services Research Fellowship Program

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Project Number: H133P990004
Start Date: June 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,999; FY 00 $149,429; FY 01 $149,999; FY 02 $149,999

Abstract: This program provides health services research training experience for doctoral-level professionals from the rehabilitation disciplines. The primary goal is to qualify these fellows to conduct independent, high quality, funded health services research on problems related to disability and rehabilitation. Specific goals of the program include: (1) providing intensive, broad-based health services research training consisting of didactic coursework offered by faculty of Boston University to a total of six postdoctoral fellows over the course of the five-year project; (2) providing each fellow with the opportunity to conduct rehabilitation health services research under the guidance of a faculty mentor from Boston University; and (3) critically evaluating this rehabilitation health services research training program, including the recruitment, academic preparation, mentoring, and the career development of participating fellows. Through state-of-the-art training and mentoring, the project contributes to the creation of a cadre of highly skilled health services researchers equipped to conduct research that improves the measurement of rehabilitation outcomes, evaluate new and existing rehabilitation inventions, and broadly apply health services research methods to the improved organization and management of rehabilitation services in this changing health care environment.
Advanced Research Training Program in Psychiatric Rehabilitation

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Project Number: H133P020011
Start Date: September 1, 2002
Length: 60 months
NIDRR Officer: Kristi E. Wilson, PhD
NIDRR Funding: FY 02 $149,984

Abstract: This project prepares a cadre of six advanced-level researchers in the area of psychiatric rehabilitation. The recruitment efforts target consumers, with the expectation that one or more consumers will be selected for the training program. Six fellows are recruited over the course of the project. The training program consists of two consecutive cycles of 2.25-year postdoctoral fellowships in psychiatric rehabilitation research. In order to optimize the training experience, three fellows are in residence during each cycle. While the fellowship is designed to provide broad-based intensive training in psychiatric rehabilitation research, the six fellows develop a particular expertise in conducting recovery-oriented research, given the current research profile of the Center for Psychiatric Rehabilitation at Boston University. Through a variety of training modalities fellows acquire competencies in the following areas: psychiatric rehabilitation and recovery oriented systems, recovery framework and consumer issues, research design/methodology, statistics, computer literacy, conduct of applied rehabilitation research, and grant and professional writing.
The UMHS/MSU/AACIL Rehabilitation Research Training Program

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Principal Investigator: Denise G. Tate, PhD
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Project Number: H133P990014
Start Date: February 1, 1999
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 99 $149,955; FY 00 $150,000; FY 01 $149,923; FY 02 $150,000

Abstract: Through this research training experience, PhD and MD fellows and resident trainees acquire and enhance research skills, learn to collaborate effectively across important rehabilitation areas and disciplines, learn to demonstrate a capacity to apply the results of research to the formulation of disability policy, and develop skills that result in successful research proposals, thereby ensuring continuance of outstanding rehabilitation research. Emphasizing the consumer-scientist-practitioner model, this multidisciplinary research training program utilizes faculty and resources from both the University of Michigan and Michigan State University, and the Ann Arbor Center for Independent Living to train six postdoctoral-level professionals and ten Physical Medicine and Rehabilitation (PM&R) resident physicians in advanced rehabilitation research. A variety of didactic and practical experiences make up this research training program. These include participation in academic courses available at two university campuses, research seminars, presentations and lectures at meetings and national conferences, and an opportunity to work collaboratively on research projects being conducted at the three sites. Fellows and resident trainees select from a curriculum that focuses on four content areas: (1) VR and AT; (2) health/medical rehabilitation outcomes; (3) independent living and community integration; and (4) socioeconomic aspects of rehabilitation.
Advanced Rehabilitation Research Training Projects
Missouri

Research Enrichment Program for Physiatrists

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http://www.hsc.missouri.edu/~rep

Principal Investigator: Jerry C. Parker, PhD
Public Contact: Janet L. Williams, Project Coordinator, 573/882-1632; Fax: 573/884-4188

Project Number: H133P80009
Start Date: April 1, 1998
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 98 $150,000; FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 $150,000

Abstract: This project trains ten physiatry residents and junior faculty annually in the basic methodological skills and academic values required to conduct independent research projects. Participants in enrichment programs travel periodically to a central location (or locations) to receive intensive enrichment experiences. Participants are carefully mentored through the successive steps required for an independent research project. Through the use of carefully designed teaching modules and individualized instruction, ten participants per year are guided through the steps of an independent research project, including understanding research design, developing skills for statistical collaboration, preparing research manuscripts, presenting at scientific meetings, understanding peer review procedures, and applying for extramural funds. Scholarships are used to cover travel expenses for participants, and research accounts are used to defray the expenses associated with data collection. Over the course of one year, participants travel to six centralized training locations. Participants are required to plan and implement a thesis-like project in their home institutions and to present their research findings.
Advanced Rehabilitation Research Training Projects
New Jersey

Advanced Rehabilitation Research Training Center on Outcomes and Intervention Effectiveness

University of Medicine & Dentistry of New Jersey
Department of Physical Medicine and Rehabilitation, B261
150 Bergen Street
West Orange, NJ 07103
mjohnston@kmrrec.org
http://www.kmrrec.org/KM/careers/outcomes_fellows.php3

Principal Investigator: Mark V. Johnston, PhD, 973/731-3600
Public Contact: Heidi Workman, 973/243-2015; Fax: 973/243-6963

Project Number: H133P020012
Start Date: March 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $149,847

Abstract: This postdoctoral research training program develops researchers who advance knowledge of the impact of interventions—medical, activity-based, social-psychological, and environmental—on outcomes for persons with physical and neurological disabilities. The program emphasizes the actual conduct of research, leading to publications. Outcomes-related study topics include research on prognosis and severity adjustment, treatment guidelines, quality improvement strategies, cost-effectiveness, and issues of health policy. Fellows typically begin by participating in one or more research projects suggested by their mentor and studying to improve their knowledge and skills. Fellows also develop their own research grant proposals. The program is supported by the University of Medicine and Dentistry of New Jersey/New Jersey Medical School (UMDNJ/NJMS) and the Kessler Medical Rehabilitation Research and Education Corporation (KMRREC).
Advanced Rehabilitation Research Training Projects
New York

Advanced Rehabilitation Research Training

Mount Sinai School of Medicine
One Gustave L. Levy Place
New York, NY 10029-6574
mary.hibbard@mssm.edu
http://www.mssm.edu/tbinet

Principal Investigator: Mary R. Hibbard, PhD
Public Contact: 212/659-9374; Fax: 212/348-5901

Project Number: H133P000001
Start Date: September 1, 2000
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 00 $138,006; FY 01 $140,382; FY 02 $140,341
Abstract: This project provides advanced rehabilitation research training to nine postdoctoral psychology fellows. Each fellow participates in the ongoing research of the NIDRR-funded Rehabilitation Research and Training Center (RRTC) on Community Integration of Individuals with Traumatic Brain Injury. The goals of the training are to: (1) increase the number of researchers in the field of rehabilitation, (2) enhance knowledge of rehabilitation research, (3) disseminate research findings within the consumer community, and (4) train fellows to become part of an interdisciplinary research team. The RRTC is a model program of Participatory Action Research (PAR) that focuses on four core research areas: quality of life/outcome measurement, disability over the life span, models of community integration, and psychosocial challenges of persons with a disability.
Advanced Rehabilitation Research Training Projects
Texas

Interdisciplinary Rehabilitation Research Training Program

University of Texas Medical Branch
301 University Boulevard
Galveston, TX 77555-1137
kottenba@utmb.edu
http://www.sahs.utmb.edu/rehab/

Principal Investigator: Kenneth J. Ottenbacher, PhD
Public Contact: 409/747-1637; Fax: 409/747-1638

Project Number: H133P990001
Start Date: July 1, 1999
Length: 60 months
NIDRR Officer: Margaret Campbell, PhD
NIDRR Funding: FY 99 $129,562; FY 00 $129,562; FY 01 $139,562; FY 02 $128,482

Abstract: This project provides postdoctoral research opportunities to qualified individuals interested in clinical and academic careers related to rehabilitation research. Three postdoctoral fellows plan, conduct, and disseminate research in one of the following areas: Cognitive/Neurological Rehabilitation, Applied Biomechanics/Physiology of Rehabilitation, and Geriatric Rehabilitation. Each rehabilitation research fellow selects one of the three research areas and conducts clinical investigations for up to three years. Outcomes include published research studies, presentations at national scientific meetings, submission of grant proposals, completion of research-related courses, training in techniques of dissemination, and the development of interdisciplinary research networks. In addition to participating in clinical research activities, each fellow completes a series of core courses and directed study related to interdisciplinary research and the ethics associated with scientific inquiry in rehabilitation. The activities of each postdoctoral fellow are directed and monitored by a fellowship supervisor with a demonstrated ability to implement, conduct, and disseminate the results of research investigations important to the advancement of rehabilitation science.
Principal Investigator: Diana H. Rintala, PhD, 713/791-1414, ext. 5807
Public Contact: Daisy McKenzie, 713/799-5033; Fax: 713/794-7623

Project Number: H133P020003
Start Date: October 1, 2002
Length: 60 months
NIDRR Officer: Theresa San Agustin, MD
NIDRR Funding: FY 02 $150,000

Abstract: This program trains postdoctoral fellows in the skills necessary to become independent investigators in rehabilitation. Research training in the Department of Physical Medicine and Rehabilitation is multidisciplinary in nature, and encompasses the spectrum from basic mechanism to societal integration. Through this program, fellows develop research expertise in spinal cord injury, stroke, Parkinson’s disease, amputee rehabilitation, neuropsychological rehabilitation/cognitive neuropsychology, rehabilitation outcomes, and social policy. The coursework includes topics such as research methodology, statistical methods, ethical issues, special populations, and scientific writing. The Applied Rehabilitation Research Course complements the Clinical Scientist Training Program by emphasizing the unique characteristics of research in rehabilitation. Fellows also participate in other education activities such as the department’s Research, Education, and Development Seminar and are expected to present and produce documentation for publication on their independent research and prepare applications for federal funding building on their project for career development. They also attend, and submit abstracts for presentation at, national professional meetings to begin to integrate into the greater rehabilitation research community.
Research Training and Career Development Program

Virginia Commonwealth University
Department of Physical Medicine and Rehabilitation
Box 980542
Richmond, VA 23298-0542
jskreutz@hsc.vcu.edu
http://www.neuro.pmr.vcu.edu

Principal Investigator: Jeffrey S. Kreutzer, PhD
Public Contact: Jennifer Marwitz, 804/828-3704; Fax: 804/828-2378

Project Number: H133P70003
Start Date: September 1, 1997
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 97 $142,430; FY 98 $149,971; FY 99 $149,971; FY 00 $142,430; FY 01 $142,430; FY 02 (No-cost extension)

Abstract: This project increases the number of highly skilled rehabilitation research professionals through an advanced research training program. The research training program is built upon an existing network of research, clinical care, and teaching resources: on-campus resources include the nation’s third largest teaching hospital, an NIH Head Injury Center, a Rehabilitation Research and Training Center, and NIDRR TBI and SCI model systems of care. Program philosophy emphasizes interdisciplinary collaboration, creativity, quality, and diligence, and emphasizes applied research; it provides training to individuals with advanced degrees who are committed to a career in rehabilitation. A distinguished interdisciplinary faculty represents fields within basic sciences, biostatistics and methodology, medicine, psychology, computing and telecommunications, allied health fields, and VR.
Advanced Rehabilitation Research Training Projects
Wisconsin

Advanced Rehabilitation Research Training for Physicians and Biomedical Engineers

Marquette University
Orthopaedic and Rehabilitation Engineering Center
735 North 17th Street
P.O. Box 1881
Milwaukee, WI 53201
gerald.harris@marquette.edu
http://www.eng.mu.edu/rehab/orec.htm

Prinicipal Investigator: Gerald Harris, PhD, 414/288-0698
Public Contact: Deborah Epps, Project Administrator, 414/288-0696; Fax: 414/288-0713

Project Number: H133P020004
Start Date: July 1, 2002
Length: 60 months
NIDRR Officer: Ruth Brannon
NIDRR Funding: FY 02 $84,566
Abstract: This project develops expertise, enthusiasm, and productivity in rehabilitation research that results in an increase in the number of rehabilitation-trained physicians and biomedical engineers able to conduct independent transdisciplinary research on problems related to disability and rehabilitation. The program is specifically designed to give the postdoctoral trainees the skills needed to become productive career researchers. The training program utilizes a rehabilitation research team consisting of a focused cadre of mentors and two postdoctoral fellows (one physical-medicine-and-rehabilitation-trained MD and one postdoctoral biomedical engineer). The trainees are enrolled in the research training program for 18 months. A total of three physicians and three biomedical engineers participate in this training program over the five-year period.
Technical Support for Computer and Other Related Activities

Conwal, Inc.
6858 Old Dominion Road
McLean, VA 22101
snewman@conwal.com
http://www.conwal.com

Principal Investigator: Shelia Newman
Public Contact: 703/448-2300 (V); 703/448-3079 (TTY); Fax: 703/448-3087

Project Number: ED-98-CO-0004
Start Date: January 9, 1998
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 98 $500,000; FY 99 $962,042; FY 00 $360,430; FY 01 $253,514; FY 02 (No-cost extension through 1/7/03)
Abstract: This project provides technical support to NIDRR for computer-based and other related activities. Activities include data collection and tabulation, database and management information system development, statistical analyses, literature reviews, small surveys, and focus group meetings. Active projects involve analysis and design of a management information system for NIDRR, focus groups for planning the research agenda, and electronic dissemination.
Technical Support for Assessment of Management and Ancillary Activities of the National Institute on Disability and Rehabilitation Research

Cherry Engineering Support Services, Inc
6858 Old Dominion Drive, Suite 250
McLean, VA 22101
snewman@cessi.net
http://www.cessi.net

Principal Investigator: Shelia Newman
Public Contact: 703/448-6155; Fax: 703/442-9015

Project Number: ED-00-CO-0079
Start Date: September 7, 2000
Length: 60 months
NIDRR Officer: Joseph A. DePhillips
NIDRR Funding: FY 00 $695,717; FY 01 $245,885

Abstract: This project performs a wide range of technical and support activities for NIDRR, including data collection and analysis, literature reviews, issue analysis and reports, program management evaluation, conference planning and support, and development of information and database systems. Task orders completed and in process have ranged from the design and implementation of a peer review database, analysis of a standing panel peer review model, analysis of intellectual property issues related to technology transfer, support for the development of NIDRR’s Long-Range Plan, outreach and networking with disability experts, and numerous meetings and conferences. Two major tasks are the Design and Conduct of the Program Review Process and Technical Support for the Interagency Committee on Disability Research (ICDR). Program Review is designed to assess the level of grantee excellence in administration, scientific rigor, relevance and productivity, and capacity building. Each year CESSI staff arrange and conduct quarterly meetings of the ICDR and meetings of the Subcommittees on Disability Statistics, Medical Rehabilitation, and Technology. An Internet “gateway” for federally funded disability research is under development and staff prepares reports to Congress and other reports as needed.
State Technology Assistance

This program, funded under Title I of the Assistive Technology Act of 1998, supports consumer-driven Grants to States. Currently there are 56 projects that provide statewide, comprehensive, technology-related assistance for individuals with disabilities of all ages. The purpose of the program is to increase and improve access to assistive technology devices and services through public awareness and information, advocacy, outreach, technical assistance and training, and interagency coordination.

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Assistive Technology Technical Assistance Projects
California

Assistive Technology Act Data Collection Project

InfoUse
2560 Ninth Street, Suite 216
Berkeley, CA 94710-2557
ljans@infouse.com
http://www.infouse.com/atdata

Principal Investigator: Lita Jans, PhD, 510/549-6509
Public Contact: 510/549-6520; Fax: 510/549-6512

Project Number: H224B990001
Start Date: September 30, 1999
Length: 48 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 99 $338,000; FY 00 $301,000; FY 01 $301,243; FY 02 $301,000
Abstract: The Assistive Technology Act Data Collection Project provides a Web-based performance standards reporting system that conforms to NIDRR policy and the requirements of the Government Performance and Results Act (GPRA) of 1993. The data elements and measures were developed through a broadly inclusive process involving the AT Act State Program grantees and other key stakeholders. InfoUse also provides national and state estimates of the need for and use of AT, as well as other useful information on the availability and use of AT devices and services, including a study on AT and employment. In addition, the project provides descriptive and evaluative information on model approaches that reduce fragmentation of devices and that build the capacity of organizations to deliver services. In conducting this project, InfoUse works closely with the 56 state and territorial AT Act grantees, the Technical Assistance Projects to the AT Act State Program and P&A Program grantees, the National AT Internet Site project, as well as consumers, service providers, advocates, and experts in the field.
Technical Assistance Project

Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)
1700 North Moore Street, Suite 1540
Arlington, VA 22209
resnata@resna.org
http://www.resna.org/taproject

Principal Investigator: M. Nell Bailey
Public Contact: 703/524-6686, ext. 305 (V); 703/524-6639 (TTY); Fax: 703/524-6630

Project Number: H224B020001
Start Date: October 1, 2002
Length: 36 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 02 $525,000

Abstract: This project assists the 56 state Assistive Technology Act (AT Act) grantees in reducing barriers and increasing access to AT devices and services for consumers with disabilities of all ages through capacity building initiatives. The needs of the state AT Act grantees are continually assessed and plans are tailored to provide timely, responsive, and proactive technical assistance to meet those needs. Delivery strategies include onsite visits, training by peers (States Helping States) and expert consultants, national meetings focused on project implementation issues, publication development on grantees’ impact, models of best practice and policy issues, online services, and other communication tools. The project maintains a content-rich, accessible web site that serves as the grantees’ prime resource for information dissemination. Areas of the web site include a Policy Information Pipeline, links to other related resources, and a private area designated specifically for grantees to share and exchange information. A reference library on the web contains publications and documents that can be easily accessed and downloaded.
The Arizona Loans for Assistive Technology Program (AzLAT)

Northern Arizona University
Institute for Human Development
4105 North 20th Street, Suite 260
Phoenix, AZ 85016
jill.oberstein@nau.edu
http://www.nau.edu/ihd/aztap

Principal Investigator: Jill S. Oberstein, 602/728-9532
Public Contact: 800/477-9921 (V); 602/728-4670 (V); 602/728-9536 (TTY); Fax: 602/728-9535

Project Number: H224C010008
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $150,000; FY 02 (No-cost extension through 9/30/03)

Abstract: Arizona Loans for Assistive Technology (AzLAT) is a consumer-driven, statewide alternative financing program that makes affordable loans available to Arizona residents with disabilities for the purchase of AT devices. The program is designed to promote access to AT devices for persons with disabilities by creating a dignified alternative to traditional loan programs. AzLAT is a loan guarantee program; loans made to qualified borrowers by the bank are guaranteed by AzLAT in case of borrower default. The program addresses the needs of persons of low to middle income who have disabilities, including individuals from underrepresented groups desiring loans to purchase AT, but due to credit history or income issues would be ineligible for most traditional bank loan programs. Key elements of consumer support provided by the program include informed consumer choice, avoidance of unnecessary debt, support for consumers completing the application process, and support for repaying loans in a timely manner. These elements are provided by the member organizations of the Consumer Support Network and/or the AzLAT Program.
Arkansas Technology Alternative Financing Project (AFP)

Arkansas Rehabilitation Services
Department of Workforce Education
1616 Brookwood Drive
P.O. Box 3781
Little Rock, AR 72203
sogaskin@ars.state.ar.us
http://www.arsinfo.org

Principal Investigator: Sue Gaskin
Public Contact: 501/683-6052; Fax: 501/296-1141

Project Number: H224C010009
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,200,000; FY 02 (No-cost extension through 9/30/2003)
Other funding: FY 01 $400,000 (State of Arkansas)

Abstract: This program administers a revolving loan fund program of approximately $1.6 million so Arkansas residents with disabilities can secure the technology they need. Activities include: (1) establishing a solid infrastructure that enables the AFP to continue indefinitely, with a consumer-weighted Loan Fund Committee that is integrally involved in developing the guidelines that drive the AFP’s implementation and serve as an ongoing resource; (2) designing and implementing an aggressive marketing campaign to assure that knowledge of this important resource is widespread; (3) making loans available for individuals with disabilities for up to $50,000 with 20-year terms, allowing them to purchase technology regardless of age and financial status when the capacity to repay the loan exists. The result is that thousands of Arkansans have enhanced access to loans with flexible terms. Applicants are offered information and assistance to assure they have what they need to make truly informed choices. Additionally, consumer advocacy groups and others receive training on how to assist consumers in obtaining needed technology through this revolving loan fund.
Alternative Financing Programs
Illinois

Techconnect Low Interest Loan Program: Alternative Financing Program

Illinois Assistive Technology Project
1 West Old State Capitol Plaza, Suite 100
Springfield, IL 62701-1200
iatp@iltech.org
http://www.iltech.org

Principal Investigator: Wilhelmina Gunther
Public Contact: Sue Castles, Project Director, 800/852-5110 (V/TTY, in state only); 217/522-7985 (V); 217/522-9966 (TTY); Fax: 217/522-8067

Project Number: H224C010022
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $2,250,000; FY 02 (No-cost extension through 9/30/2003)
Abstract: In the Illinois alternative financing program individuals with disabilities and their families or guardians, who historically have had difficulty obtaining or repaying traditional bank loans, are provided assistance in borrowing money to obtain the AT they need. In some cases the program also assists in establishing a positive credit history. The program lowers interest rates, offers extended repayment plans, and relaxes standards for determining credit worthiness. Interest earned by the program on low-risk investments is used to re-capitalize the fund. Statewide infrastructure allows multiple entry points for completing the loan application and obtaining additional supports regarding budgeting and financial planning. The program is a public-private partnership; in addition to the state, the other partners are the Illinois AT Project, the program administrator; the state’s Centers for Independent Living, who handle outreach, marketing, assistance with loan processing, consumer training on budgeting, and serve on the application review committee; Town and County Bank, the financial lending institution, and MSF&W, a software consulting firm that develops an accessible online loan application program.
Alternative Financing Programs
Kansas

Assistive Technology for Kansans Alternative Financing Program

University of Kansas Center for Research, Inc.
Schiefelbusch Institute for Life Span Studies
2601 Gabriel Avenue
P.O. Box 738
Parsons, KS 67357
ssack@ukans.edu
http://www.atk.lsi.ukans.edu

Principal Investigator: Sara H. Sack, PhD, 316/421-8367
Public Contact: Assistive Technology for Kansans, 800/526-3648 (800/KAN DO IT, in state only); 316/421-8367 (V/TTY); Fax: 316/421-0954 (Fax/TTY)

Project Number: H224C000011
Start Date: October 1, 2000
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 00 $742,576; FY 01 (No-cost extension through 9/30/02) FY 02 (No-cost extension through 9/30/2003)

Abstract: The Assistive Technology for Kansans project (ATK) and the Kansas Assistive Technology Cooperative (KATCO) are working together to expand personal financing options for the purchase of assistive devices or services. The alternative financing program is operated by KATCO, a nonprofit organization, established and directed by persons with disabilities. KATCO currently manages a revolving loan program and operates a loan guarantee program through both a regional and a statewide credit union. The new program supports the expansion of the scope and utility of the current AT loan program. The program addresses issues related to the operation of the two loan programs. Specifically, public awareness efforts assure that statewide coverage and supports are in place to expand the capacity to make loans. Individual Development Accounts enable individuals with disabilities to save money for AT devices and services without declaring the money saved as an asset. KATCO goals are: (a) to expand the consumer services offered, including financial planning and credit restoration for persons with disabilities; (b) to expand its AT cooperative services through strategies such as group purchasing and buying in bulk; (c) to explore the feasibility of operating a multistate cooperative; and (4) to explore the feasibility of operating a consumer run financial cooperative, generally known as a credit union.
Loan Initiative Networking Kentuckians for Assistive Technology (LINK-AT)

Kentucky Department of Vocational Rehabilitation
Cabinet for Workforce Development
209 St. Clair Street
Frankfort, KY 40601
nancye.hanson@mail.state.ky.us
http://www.kyatloan.org

Principal Investigator: Dave Matheis, 502/564-4440
Public Contact: Nancy Hanson, 859/246-2540; 877/675-0195 (in state only); Fax: 859/246-2545

Project Number: H224C010021
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Judith Fein
NIDRR Funding: FY 01 $1,050,000; FY 02 (No-cost extension through 9/30/2002)
Abstract: In this program a unique collaboration among public and private partners provides AT loans to Kentuckians with disabilities. The goals of LINK-AT include: (1) increasing access to loans in all areas of the state, (2) increasing awareness of the loan program among consumers and their families and caregivers, (3) providing loans in a timely and efficient manner, (4) providing loans to individuals who may not otherwise be able to access traditional lending programs, (5) increasing the overall lending capacity of the Kentucky Assistive Technology Loan Corporation (KATLC) to $2.5 million, and (6) developing permanent financial support for the loan program. The primary partners include KATLC, the Kentucky Department for Vocational Rehabilitation, Fifth-Third Bank of Kentucky, the Kentucky Housing Corporation (KHC), the Kentucky Assistive Technology Service (KATS) Network, the Kentucky Developmental Disabilities Council, five centers for independent living, and six AT resource centers.
Alternative Financing Programs
Louisiana

Louisiana Alternative Financing Program

Louisiana Department of Health and Hospitals
LATAN
P.O. Box 14115
Baton Rouge, LA 70898
cpourciau@latan.org
http://www.latan.org

Principal Investigator: Julie M. Nesbit, 225/925-9500 (V/TTY)
Public Contact: Clara Pourciau, 800/270-6185 (V/TTY); 225/925-9500 (V/TTY); Fax: 225/925-9560

Project Number: H224C010024
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,500,000; FY 02 (No-cost extension through 9/30/2003)
Abstract: This reduced-interest, fixed-rate, and extended-term AT loan program is available for Louisiana residents of all ages and income brackets (and especially those of low and middle incomes), with all types of disabilities. The project makes available guaranteed and non-guaranteed loans for a broad variety of AT devices and services, including assessments, training, and extended warranties. Built into the project budget are resources such as financial, credit, and peer-to-peer counseling (through centers for independent living) as needed by consumers. The program administrators implement a structured program evaluation that measures overall effectiveness; the evaluation takes into consideration consumer feedback and requested modifications to the loan program. The program is coordinated by the Louisiana Assistive Technology Access Network (LATAN).
Alternative Financing Programs
Maryland

The Assistive Technology Guaranteed Loan Program: Partnerships for Maximum AT Access

State of Maryland Office of Individuals with Disabilities
Maryland Technology Assistance Program
2301 Argonne Drive, T17
Baltimore, MD 21218-1696
loans@mdtap.org
http://www.mdtap.org

Principal Investigator: Michael Dalto
Public Contact: Tony Rice, Assistant Director, 410/554-9233; 800/832-4827; Fax: 410/554-9237

Project Number: H224C010016
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $1,104,974; FY 02 (No-cost extension through 9/30/2003)
Abstract: Maryland’s Assistive Technology Guaranteed Loan Program (ATGLP) provides loan guarantees and interest buy-downs for AT loans for Maryland residents who have a disability. The ATGLP guarantees loans of $500 to $30,000, with loan terms ranging of one to seven years. In its first 19 months of operation, the program approved 95 guaranteed loans (totaling more than $970,000 in principal) and 7 nonguaranteed loans (totaling more than $46,000 in principal). The project has approved loans for a high percentage of the applicants from traditionally underserved groups. Innovative efforts from the project’s partners include: (1) offering guaranteed loans or discounted rates for nonguaranteed loans from multiple lenders, (2) reducing costs for AT purchase, (3) increasing income and resources for borrowers to make AT more affordable, (4) building alternative resources for AT evaluation and training, and (5) recycling computer equipment. The Maryland Centers for Independent Living offer consumer counseling. The program funds a wide range of AT, excluding only building modifications to rental units.
**Alternative Financing Programs**  
**Michigan**

**Michigan Assistive Technology Loan Fund**

Michigan Disability Rights Coalition  
740 West Lake Lansing Road, Suite 400  
East Lansing, MI 48823  
miatloanfund@aol.com  
http://www.mi-atlf.org

**Principal Investigator:** Norm DeLisle  
**Public Contact:** Kathryn Wyeth, Operations Director, 517/333-2477, ext. 35; Fax: 517/333-2677

**Project Number:** H224C010015  
**Start Date:** October 1, 2001  
**Length:** 12 months  
**NIDRR Officer:** Carol Cohen  
**NIDRR Funding:** FY 01 $431,700; FY 02 (No-cost extension through 9/30/2003)  
**Other funding:** FY 01 $143,900 (Herbert H. and Grace A. Dow Foundation)

**Abstract:** The Michigan Assistive Technology Loan Fund allows people with disabilities in Michigan to obtain AT equipment and services either through project loans or through other means. Key objectives of the first project year include: (1) expand statewide from the current three pilot counties, (2) expand marketing of the fund, and (3) grow project resources into a self-sustaining fund. Four key attributes distinguish the Loan Fund as an effective tool: (a) people with disabilities with extensive experience with AT developed it and are implementing it; (b) the fund demonstrates its commitment to client-driven, client-chosen services by the principles and values it has adopted; (c) the fund enjoys strong support statewide because a wide variety of stakeholders participated in a genuinely collaborative process; and (d) the Loan Fund partners with local Centers for Independent Living (CILs) to serve as local intake and counseling points for loan applicants. While the Fund is strongly committed to the principle that persons with disabilities should make their own choices about AT, CILs are uniquely situated to provide AT information to assure applicants can make informed choices. Additionally, the CILs are knowledgeable about other sources of funding than loans and about AT services such as training, equipment trial before purchase, and repair, all of which enhance AT success. There is no lower limit for loans, and the upper limit this pilot year is $20,000.
Alternative Financing Programs
Pennsylvania

Alternative Financing Program

Temple University
Institute on Disabilities/UAP
1301 Cecil B. Moore Avenue, 423 Ritter Annex
Philadelphia, PA 19122
piat@astro.temple.edu
http://www.temple.edu/inst_disabilities/PIAT

Principal Investigator: Diane Nelson Bryen, PhD, 214/204-1356
Public Contact: Amy S. Goldman, 800/204-7428 (V); 800/750-7428 (TTY); 215/204-3862 (V); 215/204-1356 (V/TTY); Fax: 215/204-9371

Project Number: H224C000001
Start Date: October 1, 2000
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 00 $500,000; FY 01 (No-cost extension through 9/30/2002) FY 02 (No-cost extension through 9/30/2003)

Abstract: The Pennsylvania Assistive Technology Foundation (PATF), a community-based 501(c)(3) organization, was created by the Institute on Disabilities/UAP in response to the need for an alternative financing mechanism. The program is administered by the Institute on Disabilities/UAP and includes $500,000 in federal funds and $800,000 in nonfederal funds. Institute on Disabilities/UAP activities under the AFP grant include: (1) develop the PATF’s infrastructure to the point that it has adequate staff and operational resources to operate independently of federal support; (2) expand the present program through the identification of additional funds for loans of $3,000 and more, and additional funds for the loan guarantee; (3) create a revolving loan program to allow for “small” loans, e.g. those under $3,000, which the current lender deems too burdensome to handle; (4) increase outreach and ease of access to the program, including the establishment of an network of volunteer “application centers;” and (5) provide for external evaluation of the quality of customer service, consumer choice, timeliness, and outcomes of the revolving and guarantee loan programs.
Minority Outreach Program for Alternative Financing for Assistive Technology

Temple University
Institute on Disabilities/UAP
1301 Cecil B. Moore Avenue, 423 Ritter Annex
Philadelphia, PA 19122
vdel@nimbus.temple.edu
http://www.temple.edu/inst_disabilities/PIAT

Principal Investigator: Diane Nelson Bryen, PhD; Amy S. Goldman, 215/204-1356 (Bryen); 215/204-3862 (Goldman)
Public Contact: Virginia Del Sordo, 800/204-7428 (V, in state only); 800/750-7428 (TTY); 215/204-0452 (V); 215/204-1356 (V/TTY); Fax: 215/204-9371

Project Number: H224C010025
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $450,000; FY 02 (No-cost extension through 9/30/2003)
Abstract: This outreach and demonstration program targets African-Americans, Hispanic/Latinos, and Southeast Asians and identifies effective strategies for enhancing minority access to alternate financing programs (AFP) for assistive technology. The project includes the following goals: (1) increase outreach for and ease of access to alternative financing for AT for target minority groups through the creation of a network of racially- and ethnically-based information centers; (2) increase the capacity of the Pennsylvania Assistive Technology Foundation (PATF) and its network of subcontracted application centers to provide effective, culturally competent services; (3) attract more minority borrowers through the creation of partnerships with minority-owned banks and lending institutions; (4) create options that make loans more affordable to individuals who come to the PATF through minority banks; (5) identify effective, replicable program structures that increase the ability of target minority groups to access AT and AT financing; and (6) formalize and disseminate the model to a broad spectrum of entities, including other AT Act projects, service providers known and used by the underrepresented groups, disability agencies, groups run by and for people with disabilities, generic banking organizations, and disability, minority, and banking stakeholders.
Alternative Financing Programs
Utah

Alternative Financing Program

Utah State University
Utah Assistive Technology Foundation
6835 Old Main Hill
Logan, UT 84322-6835
uatf@cpd2.usu.edu
http://www.uatf.org

Principal Investigator: Martin E. Blair, 435/797-3886
Public Contact: Daryl McCarty, 801/273-7239; Fax: 801/273-7239

Project Number: H224C000004
Start Date: October 1, 2000
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 00 $500,000; FY 01 (No-cost extension through 9/30/02) FY 02 (No-cost extension through 9/30/2003)

Abstract: The Utah Assistive Technology Foundation has a collaborative partnership with First Security Bank to provide an interest buy-down and small grant program to help people with disabilities purchase AT devices and services. The activities are designed to expand the benefits and services of the Foundation by: (1) decreasing the loan amount charged on loans for the purchase of AT to approximately 1 percent of the loan value (currently 2 percent); (2) increase the grant amount applied to loan principle for the purchase of AT; (3) increase the interest buy-down amount for modified vehicles; (4) increase public awareness activities with regard to the Foundation; and (5) increase the endowment fund of the Foundation to provide ongoing funding for the activities listed above. Expanding the current alternative financing system for AT devices and services enables greater numbers of consumers with disabilities, their family members, personal assistants, advocates, and others to increase independence in home, school, work and community settings. The public awareness activities are targeted to individuals with disabilities in both urban and rural areas of Utah. Underrepresented populations such as Native American, Hispanic and the aging are the specific focus of public awareness activities. The Foundation was developed by several entities in the state under the direction of the Utah Assistive Technology Program (UATP), Utah’s AT Act state program.
Alternative Financing Programs
Utah

Utah Alternative Financing Program for Assistive Technology

Utah State University
Center for Persons with Disabilities
6835 Old Main Hill
Logan, UT 84322
uatf@cpd2.usu.edu
http://www.uatf.org

Principal Investigator: Marilyn Hammond, PhD
Public Contact: 800/524-5152; 435/797-3811; Fax: 435/797-2355

Project Number: H224C010013
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $525,000; FY 02 (No-cost extension through 9/30/2003)
Abstract: The Utah Alternative Financing Program for Assistive Technology expands the benefits and services of the Utah Assistive Technology Foundation (UATF) by: (1) developing and implementing a consumer- and minority-responsive infrastructure; (2) maintaining the project’s zero-percent-interest-buy-down for devices and services, increasing the loan interest buy-down amount for modified vehicles, and increasing the available endowment fund; (3) developing and evaluating a comprehensive outreach and public awareness plan that includes targeting underrepresented and culturally diverse communities; and (4) designing and implementing a comprehensive process and outcome evaluation plan. By expanding the current alternative financing system for AT devices and services, the project enables greater numbers of children and adults with disabilities and their family members to increase independence in home, school, work, and community settings.
Alternative Financing Programs
Virginia

Alternative Financing Technical Assistance Project

Rehabilitation Engineering and Assistive Technology Society of North America (RESNA)
1700 North Moore Street, Suite 1540
Arlington, VA 22209-1903
http://www.resna.org/AFTAP

Principal Investigator: Nancy Meidenbauer
Public Contact: 703/524-6686. ext. 304 (V); 703/524-6639 (TTY); Fax: 703/524-6630

Project Number: H224C000200
Start Date: October 1, 2000
Length: 24 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 00 $200,000; FY 01 $299,999; FY 02 (No-cost extension through 12/30/2002)

Abstract: The Rehabilitation Engineering and Assistive Technology Society of North America (RESNA) operates the Alternative Financing Technical Assistance Project (AFTAP) to support states in establishing and maintaining Alternative Financing Programs (AFP). The purpose of the project is to provide technical assistance (TA) to states in developing AFPs that reduce barriers to the availability of AT and create new sources of funding for AT services and devices for people with disabilities of all ages. Technical assistance and information dissemination and utilization activities have been designed in order to achieve the project’s goals. These goals are: (1) to provide timely, responsive, and proactive TA using a comprehensive model for delivery of TA, and (2) to address the TA needs of the states currently receiving Title III funds and those states that are in the process of preparing applications for AFP. The delivery strategies include on-site visits by expert consultants; a national meeting focused on issues related to developing, implementing, and maintaining financial loan programs; targeted research publications; and electronic services. A Web-based outcome data collection instrument enables collection of uniform data across state programs to assist in determining the outcomes and impact of the availability of AT AFPs, by region and across the country, for individuals with disabilities.
Alternative Financing Programs
Virginia

Virginia Alternative Financing Program

Virginia Department of Rehabilitative Services (DRS)
Virginia Assistive Technology System (VATS)
8004 Franklin Farms Drive
P.O. Box K300
Richmond, VA 23288
loanfund@erols.com
http://www.vats.org

Principal Investigator: Kenneth Knorr, 804/662-9995
Public Contact: Mike Scione, 804/662-9993; Fax: 804/662-9478

Project Number: H224C010003
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 01 $2,464,000; FY 02 (No-cost extension through 12/31/2003)
Abstract: This program increases access to and funding for AT for individuals with disabilities and their families, creating a perpetual loan fund. Rehabilitation engineering and AT assessment services are also provided under the auspices of the program. During this project term, loans are extended to small businesses and nonprofits so they can purchase AT for employees with disabilities, purchase AT or modify their facilities prior to hiring an employee with a disability, or modify facilities to accommodate customers with disabilities. Virginians with disabilities, their family members, and eligible businesses can also obtain low-interest, longer-term loans for accommodations and the purchase of AT devices and services through a partnership with the Assistive Technology Loan Fund Authority (ATLFA), a consumer-controlled organization, and SunTrust Bank, which provides loan financing and administration. Other partners include Virginia’s Centers for Independent Living, which provide consumer counseling for device selection, application completion, and financial counseling.
WisLoan: A Loan Guaranty Program to Provide Low Interest Loans to Wisconsin Residents with Disabilities for Purchasing Assistive Technology

Wisconsin Department of Health and Family Services (DHFS)
Office for Persons with Physical Disabilities (OPPD)
One West Wilson Street, Room 450
P.O. Box 7851
Madison, WI 53707-7851
lauxhm@dhfs.state.wi.us

Principal Investigator: Holly Laux O’Higgins
Public Contact: 608/266-8905; Fax: 608/267-3203

Project Number: H224C010017
Start Date: October 1, 2001
Length: 12 months
NIDRR Officer: Richard E. Wilson II, EdD
NIDRR Funding: FY 01 $750,000; FY 02 (No-cost extension through 9/30/2003)

Abstract: WisLoan facilitates provision of low interest loans by participating banks so that Wisconsin citizens with disabilities can purchase AT. Independence First, a community-based and consumer-controlled organization, administers WisLoan in partnership with banks and centers for independent living to provide statewide services such as loan financing and servicing, AT assessments, and technical assistance. Information about WisLoan is disseminated through state and county human service agencies, CILs, disability organizations, and governor-appointed councils. The banking partner also disseminates program information and assists in the development of marketing materials.
State Technology Assistance Projects
Alabama

Alabama Statewide Technology Access and Response Project (STAR)
System for Alabamians with Disabilities

Alabama Department of Rehabilitation Services
2125 East South Boulevard
P.O. Box 20752
Montgomery, AL 36120-0752
tbridges@rehab.state.al.us
http://www.rehab.state.al.us/star

Principal Investigator: Steve Shivers
Public Contact: Ted Bridges, 800/782-7656 (V, in state only); 334/613-3480 (V); 334/613-3519 (TTY); Fax: 334/613-3485

Project Number: H224A30009
Start Date: October 1, 1993
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $520,670; FY 94 $540,000; FY 95 $580,000; FY 96 $536,900; FY 97 $574,900; FY 98 $710,052; FY 99 $730,000; FY 00 $688,624; FY 01 $516,468; FY 02 $344,312
Abstract: This project addresses nine goals: (1) to establish an organizational structure that maximizes consumer participation; (2) to facilitate interagency collaboration in the development of policies and procedures concerning technology services; (3) to maximize consumer participation at all levels of project activities; (4) to establish a statewide consumer and family network; (5) to develop a statewide consumer-responsive information and referral system; (6) to develop a public awareness campaign to elevate the understanding of the benefits and use of technology for people with disabilities; (7) to develop and provide technology training activities for consumers, their families, professionals, employers, and the general public regarding technology-related issues; (8) to advance positive policy and funding changes that improve the procurement of and access to technology devices and services; and (9) to develop and implement a project evaluation system and conduct ongoing needs assessment.
State Technology Assistance Projects
Alaska

Assistive Technologies of Alaska

Alaska Department of Labor and Workforce Development
Division of Vocational Rehabilitation
1016 West Sixth, Suite 205
Anchorage, AK 99501
james_beck@labor.state.ak.us
http://www.labor.state.ak.us/at/index.htm

Principal Investigator: Jim Beck
Public Contact: 800/478-4378 (V/TTY, in state only); 907/269-3569 (V/TTY); Fax: 907/269-3632

Project Number: H224A990001
Start Date: July 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $563,052; FY 91 $565,205; FY 92 $595,000; FY 93 $748,000; FY 94 $749,298; FY 95 $749,298; FY 96 $693,618; FY 97 $731,618; FY 98 $548,714; FY 99 $368,000; FY 00 $365,809; FY 01 $365,809; FY 02 $365,809

Abstract: Assistive Technologies of Alaska (ATA) is a systems change project funded under the authority of the Tech Act. ATA has worked to establish a statewide, consumer-responsive system to improve access to AT. The project has responded to the needs of Alaskans with disabilities by creating training tools and resource documents; establishing a guaranteed loan program; achieving passage of an AT consumer protection law; and setting up a statewide library system for access to technology. In the last two years, the project is transitioning services to other permanent programs.
State Technology Assistance Projects
American Samoa

American Samoa Assistive Technology Service (ASATS) Project

Division of Vocational Rehabilitation
Department of Human Resources
Pago Pago, American Samoa 96799
edperei@blueskynet.as

Principal Investigator: Pete P. Galea’i
Public Contact: Edmund Pereira, Project Director, 011/684/699-1529 (V); 011/684/233-7874 (TTY); Fax: 011/684/699-1376

Project Number: H224A30014
Start Date: October 1, 1993
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $139,200; FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $150,000; FY 00 $150,000; FY 01 $150,000; FY 02 $150,000

Abstract: This project addresses four goals: (1) identification, training, and support of people with disabilities to provide direction and guidance to the American Samoa Assistive Technology Project; (2) development and implementation of a system for individual and program needs assessment for AT; (3) development and promotion, in collaboration and in partnership with existing agencies, of a consumer responsive, culturally appropriate assistive technology service-delivery system; and (4) development and implementation of a model multiagency information, education, and public awareness system.
State Technology Assistance Projects
Arizona

Arizona Technology Access Program (AzTAP)

Northern Arizona University
Institute for Human Development
4105 North 20th Street, Suite 260
Phoenix, AZ 85016
jill.oberstein@nau.edu
http://www.nau.edu/ihd/aztap

Principal Investigator: Jill Oberstein, Project Director
Public Contact: 800/477-9921 (V); 602/728-9534 (V); 602/728-9536 (TTY); Fax: 602/728-9535

Project Number: H224A40002
Start Date: October 1, 1994
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 $507,916; FY 95 $550,000; FY 96 $509,130; FY 97 $547,130; FY 98 $675,531; FY 99 $654,103; FY 00 $654,103; FY 01 $654,103; FY 02 $490,000
Abstract: This program increases access to AT services and devices for people with disabilities and their families and facilitates the development of a coordinated, consumer-responsive AT service-delivery system. The program includes seven goals: (1) to establish a program infrastructure that is consumer responsive and promotes system change; (2) to increase consumer involvement; (3) to increase interagency collaboration and coordination; (4) to increase awareness of the needs for, and efficacy of, AT services and devices; (5) to increase the competencies and skills of providers and consumers of AT services and devices; (6) to improve program and fiscal resources; and (7) to develop and implement protection and advocacy services in support of the program. Priority activities include: information and referral, training and technical assistance, outreach to underrepresented populations, funding and policy analysis, advocacy, and research.
Arkansas Increasing Capabilities Access Network (ICAN)

Arkansas Rehabilitation Services
Department of Workforce Education
2201 Brookwood Drive, Suite 117
Little Rock, AR 72202
sogaskin@ars.state.ar.us
http://www.arkansas-ican.org

Principal Investigator: Barbara Gullett
Public Contact: 800/828-2799 (V/TTY, in state only); 501/666-8868 (V/TTY); Fax: 501/666-5319

Project Number: H224A90020
Start Date: October 1, 1989
NIDRR Officer: Judith Fein
NIDRR Funding: FY 89 $503,811; FY 90 $506,078; FY 91 $551,078; FY 92 $725,000; FY 93 $773,929; FY 94 $835,000; FY 95 $835,000; FY 96 $772,951; FY 97 $579,713; FY 98 $386,476; FY 99 $386,476; FY 00 $386,476; FY 01 $386,476; FY 02 $386,476

Abstract: This project’s activities and objectives include establishing a clearinghouse for technology, expanding funding alternatives for technology, creating a consumer-responsive technology system through legal remedies, expanding outreach programs, increasing system capacity through education across professional and technical disciplines, and providing information and referral services.
California Assistive Technology System (CATS)

California Department of Rehabilitation
Independent Living and Systems Change Division
2000 Evergreen
P.O. Box 944222
Sacramento, CA 94244-2220
rharring@dor.ca.gov
http://www.atnet.org

Principal Investigator: Rita Harrington, 916/263-8676 (V)
Public Contact: George Moultri, 916/263-8687 (V/TTY); Fax: 916/263-8683

Project Number: H224A30008
Start Date: October 1, 1993
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $550,000; FY 94 $680,000; FY 95 $900,000; FY 96 $833,000; FY 97 $871,121; FY 98 $1,337,103; FY 99 $1,315,675; FY 00 $1,315,675; FY 01 $986,765; FY 02 $657,838

Abstract: This project is administered by a unit within the lead agency, Department of Rehabilitation. It is advised by an Assistive Technology Advisory Committee (ATAC), a majority of whose members are consumers. The unit administers a transportation and AT loan guarantee program. The unit contracts with other entities to provide advocacy services, outreach, and training for underserved and rural populations; establish AT centers in rural counties; and establish a nonprofit organization to conduct other project activities and continue the project when grant funding ends. The nonprofit unit (AT Network) operated by the California Foundation for Independent Living Centers (CFILC) includes a toll-free AT information and referral service (800/390-2699 [V] and 800/900-0706 [TTY], in state only), a project Web site, an AT news service, public awareness and marketing activities, interagency coordination, and coordination of system change activities.
State Technology Assistance Projects
Colorado

Colorado Assistive Technology Project (CATP)

University of Colorado Health Sciences Center
Assistive Technology Partners
1245 East Colfax Avenue, Suite 200
Denver, CO 80218
cathy.bodine@uchsc.edu
http://www.uchsc.edu/atp

Principal Investigator: Cathy Bodine, Project Director, 303/315-1281
Public Contact: 800/255-3477 (in state only); 303/315-1280 (V); 303/837-8964 (TTY); Fax: 303/837-1208

Project Number: H224A40014
Start Date: October 1, 1989
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $540,140; FY 90 $542,571; FY 91 $577,571; FY 92 $609,538; FY 93 $690,407; FY 94 $780,000; FY 95 $780,000; FY 96 $722,000; FY 97 $541,529; FY 98 $361,019; FY 99 $361,019; FY 00 $361,018; FY 01 $361,019; FY 02 $361,019
Abstract: This project’s activities and objectives include a network of Technology Outreach Centers throughout the state and a central AT resource center. Project activities include information, referral, public awareness, training, technical assistance, and electronic networking linkages between local agencies and the state. Systems-change activities include a task force on policy review and analysis, ongoing advocacy education, and direct advocacy services through a contract with the state protection and advocacy system.
Connecticut Assistive Technology Project

Connecticut Department of Social Services
Bureau of Rehabilitation Services
25 Sigourney Street, 11th Floor
Hartford, CT 06106
jficarro@aol.com
http://www.techact.uconn.edu

Principal Investigator: John M. Ficarro
Public Contact: 800/537-2549 (in state only); 860/424-4881 (V); 860/424-4839 (TTY); Fax: 860/424-4850

Project Number: H224A20013
Start Date: October 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $525,000; FY 93 $554,000; FY 94 $580,000; FY 95 $520,000; FY 96 $500,000; FY 97 $538,000; FY 98 $651,365; FY 99 $629,937; FY 00 $472,453; FY 01 $314,969; FY 02 $314,969

Abstract: This program provides Connecticut residents with disabilities a single point of entry for advocacy, information and referral, peer counseling, and access to objective expert advice and consultation. This system is founded on the principles of ready access to available technology, informed choice, coordination, and maximum use of available resources and knowledge. The project’s low-interest AT revolving loan fund serves as an alternative funding mechanism for individuals ineligible for existing funding streams. The project has developed an equipment recycling program and is the primary sponsor of an annual AT trade fair. Finally, the program is supported by an extensive training, education, and public awareness component.
Delaware Assistive Technology Initiative (DATI)

Center for Applied Science and Engineering
University of Delaware
Alfred I. duPont Hospital for Children
1600 Rockland Road
P.O. Box 269
Wilmington, DE 19899-0269
dati@asel.udel.edu
http://www.asel.udel.edu/dati

Principal Investigator: Beth A. Mineo Mollica, PhD, 302/651-6836
Public Contact: Joann McCafferty, Staff Assistant, 800/870-DATI (V/TTY, in state only); 302/651-6790 (V); 302/651-6794 (TTY); Fax: 302/651-6793

Project Number: H224A10005
Start Date: September 1, 1991
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 91 $501,562; FY 92 $505,146; FY 93 $550,616; FY 94 $620,000; FY 95 $620,000; FY 96 $573,934; FY 97 $611,928; FY 98 $695,827; FY 99 $521,870; FY 00 $347,921; FY 01 $347,914; FY 02 $347,914

Abstract: The DATI project has established county resource centers in each of Delaware’s three counties. These centers serve as information and equipment resource sites, offering short-term equipment loans, training and demonstration workshops, and regular informational mailings. DATI also offers a quarterly newsletter featuring articles on funding, equipment recycling, and general AT information. DATI assists consumers in locating funding for AT devices and services. Collaboration among existing state agencies and consumer groups has enhanced assistive technology promotion further throughout the state.
State Technology Assistance Projects
District of Columbia

University Legal Services AT Program for the District of Columbia

University Legal Services
220 I Street Northeast, Suite 130
Washington, DC 20002
atpdc@uls-dc.com
http://www.atpdc.org

Principal Investigator: Alicia C. Johns, 202/547-0198, ext. 134
Public Contact: Information Specialist, 202/547-0198 (V); 202/547-2657 (TTY); Fax: 202/547-2662

Project Number: H224A30001
Start Date: October 1, 1993
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $550,180; FY 95 $565,000; FY 96 $523,015; FY 97 $557,503; FY 98 $632,503; FY 99 $616,143; FY 00 $616,143; FY 01 $462,107; FY 02 $308,072
Abstract: This project’s activities are designed to empower individuals with disabilities; to promote consumer involvement and advocacy; and provide information, referral, and training as they relate to accessing assistive technology services and devices; and to identify and improve access to funding resources. Activities focus on increasing access to AT devices and services for school age children, public awareness, and demonstrations targeting people who are underserved. The program collaborates with public and private entities, conducts advocacy training specifically for consumers with disabilities, and implements systems change activities that increase access to, provision of, and funding for AT devices and services on a permanent basis. This project operates a Resource Center, a reduced-interest AT financial loan program, and a short-term AT equipment lending program.
Florida Alliance for Assistive Service and Technology (FAAST), Inc.

FAAST, Inc.
1020 East Lafayette Street, Suite 110
Tallahassee, FL 32301-4546
faast@faast.org
http://faast.org

Principal Investigator: Terry Ward, PhD
Public Contact: Ben Greve, Program Manager, 800/322-7881 (V/TTY, in state, information and referral only); 850/487-3278 (V/TTY); 850/487-2850 (TTY/Fax); Fax: 850/487-2805

Project Number: H224A000001
Start Date: July 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $995,000 (includes carryover funding); FY 94 $730,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $922,107; FY 99 $902,700; FY 00 $675,509; FY 01 $450,340; FY 02 $450,340

Abstract: FAAST, designed by and for consumers in Florida, provides comprehensive consumer outreach, awareness, and services. Its consumer-directed board is composed of 51-percent people with disabilities or family members of individuals with disabilities. Services are provided through four strategically located regional centers in Tallahassee, Jacksonville, Tampa, and Miami. FAAST’s mission is to enhance the quality of life for all Floridians with disabilities by promoting access to, awareness of, and advocacy for AT. Through a seamless supportive network between Florida business and government, FAAST provides AT products and services that enable people with disabilities to participate fully in independent living, education, work, and recreation.
Georgia Tools for Life

Georgia Department of Human Resources
Division of Rehabilitation Services
2 Peachtree Street Northwest, Suite 35-413
Atlanta, GA 30303-3142
toolsforlife@mindspring.com
http://www.gatf1.org

Principal Investigator: Joy Kniskern
Public Contact: Clinton Fisher, 800/497-8665 (V, in state only); 404/657-3084 (V); 404/657-3095 (TTY); Fax: 404/657-3086

Project Number: H224A10001
Start Date: September 1, 1991
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $519,474; FY 92 $520,000; FY 93 $585,000; FY 94 $729,924; FY 95 $729,924; FY 96 $675,683; FY 97 $713,683; FY 98 $888,822; FY 99 $666,617; FY 00 $444,411; FY 01 $444,411

Abstract: The Georgia Tools for Life program includes training at all levels, public awareness, funding policy analysis, direct services, device lending libraries, and program evaluation. The hub of Tools for Life is operated out of the Georgia Division of Rehabilitation Services. Tools for Life is responsible for seven areas of coordination: (1) policy analysis and improved service delivery, (2) coordination with consumers, (3) coordination among public and private organizations, (4) training and technical assistance, (5) public awareness and an information and referral network, (6) advocacy, and (7) consumer-responsive program evaluation. Tools for Life also coordinates four Technology Resource Centers, the ReBoot Recycling Service, and is helping to create the Association of Georgians with Disabilities, a consumer association. The association includes financial services, an advocacy group, a buying co-op, insurance options, and research and development based on member needs. It also provides technical assistance to Touch the Future, a private, nonprofit organization collaborating with the Tech Act initiatives in Georgia.
State Technology Assistance Projects
Guam

Guam System for Assistive Technology (GSAT)

AVP/CEDDDARS/GSAT
University of Guam, UOG Station
Mangilao, GU 96923
gsat@ite.net
http://uog2.uog.edu/uap/gsat.html

Principal Investigator: Heidi E. Farra-San Nicolas, PhD, 671/735-2482 (V)
Public Contact: Michael Terlaje, 671/735-2490, ext. 3 (V); 671/735-2491 (TTY); Fax: 671/734-8378

Project Number: H224A40003
Start Date: October 1, 1994
NIDRR Officer: Carol Cohen

NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $150,000; FY 00 $105,000; FY 01 $105,000; FY 02 $105,000

Abstract: This project has established a consumer-responsive, comprehensive, territory-wide program of technology-related assistance for people with disabilities to assist in overcoming Guam’s unique challenges, including limited local funding, lack of trained personnel, few markets and market incentives, limited information, and limited eligibility for specific federal funding. Additionally, the provision of AT devices and services in the Pacific Basin presents many unique challenges. Small island systems, such as Guam, have limited budgets, and a harsh tropical-island environment (salt water, high humidity, and rough terrain) that creates difficulties for equipment repair and maintenance. The remote geographic location makes procurement, adjustments, and custom modifications to assistive technology equipment extremely difficult and costly. The project emphasizes and supports systems change and advocacy activities that serve to build capacity within existing programs and with people with disabilities of all ages. GSAT is administered locally by Guam University’s Center for Excellence in Developmental Disabilities Education, Research, and Service (CEDDERS).
Assistive Technology Resource Centers of Hawaii (ATRC)

414 Kuwili Street, Suite 104
Honolulu, HI 96817
atrc@atrc.org
http://www.atrc.org

Principal Investigator: Barbara Fischlowitz-Leong, Executive Director, 808/532-7110
Public Contact: 800/645-3007 (V/TTY, in state only), 808/532-7110 (V/TTY); Fax: 808/532-7120

Project Number: H224A10023
Start Date: October 1, 1991
NIDRR Officer: Carol Cohen
NIDRR Funding: to: FY 91 $530,926; FY 92 $530,926; FY 93 $530,926; FY 94 $660,895; FY 95 $678,000; FY 96 $627,618; FY 97 $665,618; FY 98 $754,956; FY 99 $566,217; FY 00 $377,478; FY 01 $377,478; FY 02 $377,478

Abstract: Assistive Technology Resource Centers of Hawaii (ATRC) provides information and training on AT devices, services, and funding resources for the residents of Hawaii and also works nationally as part of the Association of Tech Act Projects. The organization conducts presentations and demonstrations in the community to increase AT awareness and promote self-advocacy among people with disabilities. ATRC offers classes on basic software and AT software in the state-of-the-art Technology Center. Open lab time is available for personal computer use. ATRC operates six equipment loan banks throughout Hawaii for individuals to try out AT devices. For eligible individuals wanting to purchase AT devices, ATRC offers financial loans. The agency collaborates with educators, independent living specialists, employment counselors, medical professionals, and others to ensure individuals have access to the technology they want and need. An advisory council to the organization provides input from the prospective of consumers and service providers, and the organization collaborates with state agency officials through its Policy Coordinating Committee, members of which are appointed by the Governor.
Idaho Assistive Technology Project

University of Idaho
129 West Third Street
Moscow, ID 83843-4401
rseiler@uidaho.edu
http://www.ets.uidaho.edu/idatech

Principal Investigator: Ron Seiler, Project Director
Public Contact: Susan House, Information Specialist, 800/432-8324 (V/TTY); 208/885-3559 (V/TTY); Fax: 208/885-3628

Project Number: H224A20017
Start Date: September 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $529,436; FY 93 $676,680 (includes carryover funding); FY 94 $620,000; FY 95 $634,246; FY 96 $587,115; FY 97 $625,115; FY 98 $719,907; FY 99 $698,479; FY 00 $539,000; FY 01 $349,240; FY 02 $349,240

Abstract: The Idaho Assistive Technology Project is managed by the Center on Disabilities and Human Development at the University of Idaho. The project engages in systems change activities, training, materials development, information dissemination, and advocacy activities directed at increasing the availability of assistive devices and services to Idahoans who have disabilities. A customer board directs the overall activities of the project and engages in a process of barrier identification and elimination. Major project components include training for consumers and service providers about AT, funding and loan programs for AT, advocacy, direct service provision through five regional resource centers, and systems change that addresses policy, practice, and legislation.
**Illinois Assistive Technology Project (IATP)**

IATP
1 West Old State Capitol Plaza, Suite 100
Springfield, IL 62701
iatp@iltech.org
http://www.iltech.org

**Principal Investigator:** Wilhelmina Gunther
**Public Contact:** Sherry Edwards, 800/852-5110 (V/TTY, in state only); 217/522-7985 (V/TTY); 217/522-9966 (TTY); Fax: 217/522-8067

**Project Number:** H224A90038
**Start Date:** October 1, 1989
**NIDRR Officer:** Carol Cohen

**NIDRR Funding:** FY 89 $515,300; FY 90 $517,619; FY 91 $617,619; FY 92 $620,000; FY 93 $750,000; FY 94 $923,271; FY 95 $923,271; FY 96 $833,121; FY 97 $640,997; FY 98 $427,332; FY 99 $647,332; FY 00 $427,332; FY 01 $427,332; FY 02 $427,332

**Abstract:** This project’s activities and objectives include information and referral services highlighting available technology and services, comprehensive advocacy training for people with disabilities and their families, and opportunities to explore AT options in the demonstration center. The project has statewide consumer involvement. Consumers have input into all facets of the project’s operation, from establishing goals and objectives to implementing the activities.
ATTAIN Inc. (Assistive Technology Through Action in Indiana, Incorporated)

ATTAIN Inc.
2346 South Lynhurst Drive, Suite 507
Indianapolis, IN 46241
attain@attaininc.org
http://www.attaininc.org

Principal Investigator: Cris Fulford, Executive Director
Public Contact: Lilia Teninty, 317/486-8808 (V); 317/486-8809 (TTY); 800/528-8246 (in-state only); Fax: 317/486-8809

Project Number: H224A00027
Start Date: July 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,480; FY 91 $541,277; FY 92 $565,277; FY 93 $660,288; FY 94 $726,892; FY 95 $726,892; FY 96 $672,877; FY 97 $710,877; FY 98 $533,158; FY 99 $355,439; FY 00 $355,439; FY 01 $355,439; FY 02 $355,439

Abstract: The mission of ATTAIN, Inc. is to ensure that all people with disabilities in Indiana have access to assistive technology. ATTAIN, Inc. provides direct service programs and promotes systems change in the public and private sectors to promote the availability and use of assistive technologies. Direct service programs include Empowerment and Advocacy trainings, group technology trainings, information and referral services, assistive technology assessments, individual case advocacy and an Equipment Exchange Network. ATTAIN, Inc. serves individuals of all ages and all disabilities.
State Technology Assistance Projects
Iowa

Iowa Program for Assistive Technology (IPAT)

Iowa University Center for Excellence in Disabilities
Center for Disabilities and Development
100 Hawkins Drive, Room S295
Iowa City, IA 52242-1011
infotech@uiowa.edu
http://www.uiowa.edu/infotech

Principal Investigator: Jane Gay, RN, 319/356-4463
Public Contact: Ann Dudler, 800/331-3027 (V/TTY); 319/356-4463 (V); 877/686-0032 (TTY); Fax: 319/356-8284

Project Number: H224A00028
Start Date: April 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $557,322; FY 91 $594,287; FY 92 $595,289; FY 93 $700,314; FY 94 $735,000; FY 95 $735,000; FY 96 $680,382; FY 97 $718,382; FY 98 $538,787; FY 99 $359,191; FY 00 $359,191; FY 01 $359,191; FY 02 $359,191
Abstract: This project conducts awareness and training programs and collaborates with other systems-change efforts. The information and referral portion of the Iowa program, InfoTech, provides information on new and used adaptive equipment, funding information, and a newsletter. The goals and objectives of the Iowa Program are developed and implemented through an extensive process that involves consumers, advocacy organizations, private and public service providers, regional and state agencies, third-party payers, and entities not traditionally associated with AT services.
State Technology Assistance Projects
Kansas

Assistant Technology for Kansans Project

University of Kansas
Life Span Institute
2601 Gabriel Avenue
P.O. Box 738
Parsons, KS 67357
ssack@ku.edu
http://atk.ku.edu

Principal Investigator: Charles R. Spellman, EdD; Sara H. Sack, PhD
Public Contact: 800/526-3648 (800/KAN DO IT, in state only); 316/421-8367 (V/TTY); Fax: 316/421-0954 (Fax/TTY)

Project Number: H224A30013
Start Date: October 1, 1993
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $515,000; FY 94 $529,999; FY 95 $550,000; FY 96 $513,758; FY 97 $551,758; FY 98 $665,404; FY 99 $643,976; FY 00 $643,876; FY 01 $483,077; FY 02 $362,216
Other funding: FY 93 $89,029 (Kansas Rehabilitation Services); FY 95 $395,000 (KRS); FY 96 $780,000 (KRS); FY 01 $61,906 (KRS); FY 02 $375,000 (KRS), $28,000 (Kansas Department of Health & Environment)

Abstract: Through consumer involvement and leadership by the Kansas University Program at Parsons, this project engages in activities that are designed to result in laws, regulations, policies, practices, or organizational structures that promote consumer-responsive programs that increase access to assistive technology devices and services. Through subcontracts with organizations across the state, the project operates five Regional Assistive Technology Access Sites, provides a toll-free number that connects callers directly to the appropriate Regional Access Site, manages an Interagency Equipment Loan System, and leads a policy analysis and legislative alert effort.
Kentucky Assistive Technology Service (KATS) Network

KATS Network Coordinating Center
8412 Westport Road
Louisville, KY 40242
katsnet@iglou.com
http://www.katsnet.org

Principal Investigator: J. Chase Forrester, JD, Project Director
Public Contact: Ronji Dearborn, 800/327-5287 (V/TTY, in state only); 502/327-0022 (V/TTY); 502/327-9855 (TTY); Fax: 502/327-9974

Project Number: H224A90002
Start Date: October 1, 1989
NIDRR Officer: Judith Fein

NIDRR Funding: FY 89 $535,102; FY 90 $537,510; FY 91 $577,102; FY 92 $680,000; FY 93 $710,108; FY 94 $800,000; FY 95 $800,000; FY 96 $740,552; FY 97 $555,414; FY 98 $370,276; FY 99 $370,276; FY 00 $370,276; FY 01 $370,276; FY 02 $370,276

Abstract: This project is a statewide network of organizations and individuals connecting to create a consumer-driven, collaborative system to make assistive technology information, devices, and services easily obtainable for people of any age or disability. In addition to its primary role in the development and coordination of activities among state agencies and organizations that facilitate access to, provision of, and funding for AT devices and services, the Coordinating Center staff conducts information and referral services and disseminates information. Associated organizations provide training activities, assessments and evaluations, consultations on appropriate technologies, technical assistance, operate an equipment recycling and lending program and implement a low interest loan program. Consumers represent a majority of the advisory board membership.
State Technology Assistance Projects
Louisiana

Louisiana Assistive Technology Access Network (LATAN)

LATAN
P.O. Box 14115
Baton Rouge, LA 70898-4115
cpourciau@latan.org
http://www.latan.org

Principal Investigator: Julie M. Nesbit
Public Contact: Clara Pourciau, 800/270-6185 (V/TTY); 225/925-9500 (V/TTY); Fax: 225/925-960

Project Number: H224A10028
Start Date: September 1, 1991
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $502,566; FY 92 $505,398; FY 93 $555,398; FY 94 $631,095; FY 95 $660,000; FY 96 $610,955; FY 97 $648,955; FY 98 $791,475; FY 99 $593,606; FY 00 $395,738; FY 01 $395,738; FY 02 $395,738
Other funding: $1,500,000 (Title III, AT Act)
Abstract: Louisiana Assistive Technology Access Network (LATAN) is an advocacy and systems change project whose mission is to ensure that Louisiana citizens of all ages with functional limitations who want AT have what they need and are able to use it. Major program initiatives include: (1) consumer involvement, empowerment, and training; (2) advocacy and systems change; (3) outreach; (4) interagency coordination; and (5) provider training. Area programs provide the opportunity for LATAN to reach rural and inner-city areas, where a majority of ethnic minorities and elderly reside. The project provides information about aids that enable an individual to live at home, work, learn, and recreate. It also provides information about the services needed to acquire and use these assistive devices. Members of the project staff provide training that empowers individuals to self-advocate successfully for the aids they need. LATAN also advocates for increased access to assistive technology through public and private agencies and entities. Training is provided to increase the skills of case managers, personal service assistants, rehabilitation counselors, educators, therapists, and other providers and support personnel to recognize the benefits and uses of, and the need for, various types of AT devices and services. A consumer-majority board directs LATAN.
**Maine Consumer Information and Technology Training Exchange**  
(Maine CITE)

Maine CITE Coordinating Center  
46 University Drive  
Augusta, ME 04330  
kpowers@maine.edu  
http://www.mainecite.org

**Principal Investigator:** David Noble Stockford, 207/624-6650 (V); 207/624-6800 (TTY)  
**Public Contact:** Kathleen Powers, Project Director, 207/621-3195 (V); 207/621-3482 (TTY); Fax: 207/621-3193

**Project Number:** H224A90047  
**Start Date:** October 1, 1989  
**NIDRR Officer:** Carol Cohen  
**NIDRR Funding:** FY 89 $541,876; FY 90 $544,315; FY 91 $594,315; FY 92 $650,000; FY 93 $750,000; FY 94 $845,000; FY 95 $845,000; FY 96 $782,000; FY 97 $586,656; FY 98 $391,104; FY 99 $391,104; FY 02 $391,104

**Abstract:** This project collaborates with various Maine organizations, including centers for independent living, parent training agencies, and nonprofit community programs, to build a statewide network of information and resources on AT. Project goals are: to promote broader understanding of the benefits and wider availability of AT; to educate people with disabilities, their families, professionals, and general public in purchasing and using AT; to promote self-advocacy among people with disabilities to shape public policy that promotes assistive technology and universal design; and to assist public and private institutions, organizations, and associations in providing the knowledge, skills, and competencies related to AT and universal design to their constituents.
Maryland Technology Assistance Program (MD TAP)

Maryland Governor’s Office for Individuals with Disabilities
2301 Argonne Drive, Room T17
Baltimore, MD 21218
rasinski@charm.net
http://www.mdtap.org

Principal Investigator: Paul Rasinski, Project Director
Public Contact: Patrick McCurdy, 800/832-4827 (800/TECH TAP, V/TTY); 410/554-9230 (V/TTY); Fax: 410/554-9237

Project Number: H224A90019
Start Date: October 1, 1989
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $502,250; FY 92 $671,029; FY 93 $770,000; FY 94 $825,000; FY 95 $825,000; FY 96 $763,694; FY 97 $572,771; FY 98 $381,000; FY 99 $381,847; FY 00 $381,847; FY 01 $381,847; FY 02 $381,847

Abstract: The Maryland Technology Assistance Program (MD TAP) is a part of the Governor’s Office for Individuals with Disabilities serving individuals of all ages and disabilities. Activities of this program include conducting a public awareness campaign with a toll-free phone number, maintaining lending libraries of information and AT devices, and equipment demonstration centers. The program administers a loan guarantee project, that makes possible low-interest loans for AT to individuals with disabilities. The program grants funds to private organizations to provide regional coverage of the state in relation to AT issues.
Massachusetts Assistive Technology Partnership

Children’s Hospital
1295 Boylston Street, Suite 310
Boston, MA 02215
matp@matp.org
http://www.matp.org

Principal Investigator: Marylyn Howe, Project Director, 617/355-7167 (TTY)
Public Contact: Patricia Hill, 800/848-8867 (V/TTY, in state only); 617/355-7153 (V); 617/355-7301 (TTY); Fax: 617/355-6345

Project Number: H224A00036
Start Date: July 1, 1990
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $563,998; FY 91 $593,993; FY 92 $624,062; FY 93 $725,764; FY 94 $811,962; FY 95 $811,962; FY 96 $751,592; FY 97 $789,592; FY 98 $592,194; FY 99 $592,194; FY 00 $394,796; FY 01 $394,796; FY 02 $394,796

Abstract: The Massachusetts Assistive Technology Partnership (MATP) is a consumer-responsive, cross-disability, multicultural, statewide project that conducts activities to increase access to AT for people with disabilities. Activities include public awareness, information services, training and technical assistance, funding and policy analysis, advocacy, and related work to improve services and promote involvement of people with disabilities in AT. Through regional Peer Assistive Technology Programs, MATP provides information and referral, peer networking, training, and individual and systems advocacy. The MATP works closely with people with disabilities, family members, providers, and state agencies to identify needs and pursue change in the AT service-delivery system. The project publishes an AT newsletter, pursues remedies of funding and policy barriers, provides training on a range of AT available and resources for obtaining assistive technology, pursues improvement of equipment standards, promotes increased availability of services, promotes increased involvement of people with disabilities in AT services and policy making, and coordinates with related projects in Massachusetts, regionally, and nationally.
Michigan’s Assistive Technology Project

Michigan Disability Rights Coalition
740 West Lake Lansing Road, Suite 400
East Lansing, MI 48823
http://www.copower.org

Principal Investigator: Sheryl Avery-Meints, Project Director, 517/373-3390
Public Contact: Kathryn Wyeth, 800/760-4600 (V/TTY, in state only); 517/333-2477 (V/TTY); Fax: 517/333-2677

Project Number: H224A50009
Start Date: September 1, 1992
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $885,881 (includes carryover funding); FY 94 $610,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,033,953; FY 99 $1,012,525; FY 00 $759,394; FY 01 $506,263; FY 02 $506,263

Abstract: Michigan’s AT Project focuses on building the capacity of community-based, local organizations to advocate for the use of AT as a tool for inclusion in all aspects of life. Currently, Michigan’s AT Project has projects around the state that are creating genuine systems change on a local basis. The AT Project also supports a Web-based system of AT resources and communication networks.
State Technology Assistance Projects
Minnesota

Minnesota System of Technology to Achieve Results (STAR) Program

State of Minnesota Department of Administration
300 Centennial Building
658 Cedar Street
St. Paul, MN 55155
star.program@state.mn.us
http://www.admin.state.mn.us/assistivetechnology

Principal Investigator: Mary Brogdon, 651/297-7516
Public Contact: 800/657-3862 (V, in state only); 800/657-3895 (TTY, in state only); 651/296-7516 (V); 651/296-9478 (TTY); Fax: 651/282-6671

Project Number: H224A90041
Start Date: October 1, 1989
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $500,000; FY 90 $502,250; FY 91 $567,250; FY 92 $700,000; FY 93 $750,000; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $694,268; FY 98 $569,300; FY 99 $379,500; FY 00 $379,500; FY 01 $379,533; FY 02 $379,533

Abstract: This project: (1) provides a toll-free information service for residents of Minnesota; (2) distributes brochures and other literature; (3) hosts workshops and forums; (4) provides opportunities for consumer involvement; and (5) assists individuals seeking funding. STAR advocates for policy, practice, and legislative change regarding access to AT; contracts for mobile outreach projects and legal advocacy services; and provides grants on a regional basis.
State Technology Assistance Projects
Mississippi

Mississippi Project START (Success Through Assistive/Rehabilitative Technology)

Mississippi Department of Rehabilitation Services
P.O. Box 1698
Jackson, MS 39215-1000
contactus@msprojectstart.org
http://www.msprojectstart.org

Principal Investigator: Stephen Power, Project Director
Public Contact: Eugenie Bradshaw, 800/852-8328 (V/TTY, in state only); 601/987-4872 (V/TTY);
Fax: 601/364-2349

Project Number: H224A00032
Start Date: May 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $521,285; FY 91 $530,000; FY 92 $554,000; FY 93 $594,714; FY 94 $619,430; FY 95 $619,430; FY 96 $573,400; FY 97 $611,400; FY 98 $458,550; FY 99 $305,700; FY 00 $305,700; FY 01 $305,700; FY 02 $305,700

Abstract: Project START is a multifaceted, collaborative effort. The primary components include: (1) an advisory council that allows for consumer input and the involvement of other relevant agencies, organizations, and groups; (2) an information clearinghouse that provides people with disabilities, their families, service providers, and other interested parties with information regarding available AT devices and services; (3) a training program that ensures that service provider personnel, people with disabilities, and other relevant parties are familiar with the utility and potential of AT devices; (4) a model service-delivery system that acts as a referral source and concurrent technical resource to existing AT providers, and provides AT services to people with disabilities ineligible for existing programs; and (5) an equipment loan program that makes assistive devices available to people with disabilities for trial periods, for use while their personal equipment is being repaired or replaced, and to service providers for training and demonstration purposes.
Missouri Assistive Technology Project

Missouri Department of Labor and Industrial Relations
Governor’s Council on Disability
4731 South Cochise, Suite 114
Independence, MO 64055-6975
matpmo@swbell.net
http://www.dolir.state.mo.us/matp

Principal Investigator: Diane Golden, PhD, Project Director
Public Contact: 800/647-8557 (V, in state only); 800/647-8558 (TTY, in state only); 816/373-5193 (V); 816/373-9315 (TTY); Fax: 816/373-9314

Project Number: H224A30015
Start Date: September 1, 1991
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 91 $524,488; FY 92 $526,988; FY 93 $550,801; FY 94 $667,121; FY 95 $675,000; FY 96 $689,639; FY 97 $727,639; FY 98 $878,221; FY 99 $658,666; FY 00 $439,111; FY 01 $439,111

Abstract: The primary components of this project include: (1) a statewide advisory council established to provide input from consumers and relevant state agencies; (2) legislative and policy initiatives including an equipment loan program, an equipment distribution program that provides both adaptive telephone equipment and adaptive computer equipment, a no-interest or low-interest loan program to purchase AT, a funding program to provide AT to children to age 21, health care coverage for mandatory infant hearing screenings and initial amplification devices, Medicaid coverage of augmentative communication devices for adults, an AT lemon law, sales tax exemptions on AT, managed care reform, and accessible state IT; (3) an information and referral service; (4) individual advocacy services; and (5) a statewide AT conference.
State Technology Assistance Projects
Montana

MonTECH

University of Montana
The Rural Institute
634 Eddy Avenue
Missoula, MT 59812
montech@selway.umt.edu
http://ruralinstitute.umt.edu/HDC/montech.htm

Principal Investigator: Gail McGregor, Project Director
Public Contact: 800/732-0323 (V/TTY); 406/243-5676 (V/TTY); Fax: 406/243-4730

Project Number: H224A10002
Start Date: September 30, 1991
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $550,553; FY 92 $550,553; FY 93 $590,553; FY 94 $675,258; FY 95
$673,058; FY 96 $624,080; FY 97 $663,080; FY 98 $752,408; FY 99 $564,306; FY 00 $376,204; FY
01 $376,204; FY 02 $376,204

Abstract: This project develops a comprehensive statewide system of technology-related assistance to
ensure that all Montanans with disabilities have equitable access to the AT devices and services they
need. Emphasis is on eliminating barriers to obtaining AT, enacting policy change, improving aware-
ness, strengthening consumer and provider networks, and increasing access to funding. The Montana
Consortium for Assistive Technology (MCAT) serves as the program advisory board and offers
opportunities for consumer participation. Activities currently underway include: (1) a comprehensive
equipment demonstration and evaluation center offering hands-on experience with devices to both
consumers and service providers; (2) an AT loan/lease clearinghouse; (3) an information and assistance
service that includes maintenance of a comprehensive database of Montana service programs; (4)
focused outreach activities with the state’s largest minority group, Native Americans; and (5) an
Internet Web site. Other activities include a low-interest financial loan program for consumers who do
not qualify for other funding sources, and specialized training programs to increase the skills of profes-
sionals providing AT services.
Nebraska Assistive Technology Partnership

Nebraska Department of Education
Vocational Rehabilitation
5143 South 48th Street, Suite C
Lincoln, NE 68516-2204
atp@atp.state.ne.us
http://www.nde.state.ne.us/ATP/

Principal Investigator: Mark Schultz, Project Director
Public Contact: Kathryn Kruse, 888/806-6287 (V/TTY, in state only); 402/471-0734 (V/TTY); 402/471-0735 (V/TTY); Fax: 402/471-6052

Project Number: H224A90040
Start Date: October 1, 1989
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $523,000; FY 90 $525,352; FY 91 $570,352; FY 92 $730,000; FY 93 $766,984; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $569,300; FY 98 $379,533; FY 99 $379,533; FY 00 $379,533; FY 01 $379,533; FY 02 $379,533

Abstract: The Partnership provides statewide AT and home modification services for Nebraskans of all ages and disabilities. The Partnership is a collaboration of private, nonprofit, and governmental organizations and agencies working together to create a seamless, comprehensive, statewide AT program. Collaborators include Nebraska's departments of Education, Health and Human Services, Developmental Disabilities, Economic Development, and Vocational Rehabilitation. The collaboration has resulted in funding for services to help meet the diverse needs of consumers regarding education, employment, housing, and independent living. These services include assessment, evaluation, fabrication, repair, maintenance, and training. Cost savings have also resulted due to equipment recycling, identification of appropriate equipment, and cost sharing between partnering agencies. In addition, the Partnership helps to support Demonstration Centers, utilizes a Peer Support Network, and sponsors special events, including Technology Expos. Training materials have been developed for educators (3 hour instructional unit and special education technical manual), health care professionals, and insurance reviewers.
State Technology Assistance Projects
Nevada

Nevada Assistive Technology Collaborative

Nevada Rehabilitation Division
Community-Based Services
711 South Stewart Street
Carson City, NV 89710
pgowins@govmail.state.nv.us
http://detr.state.nv.us/rehab/reh_pgbs.htm

Principal Investigator: Donny Loux
Public Contact: Paul Haugen, 888/337-3839 (V, in state only); 775/687-4452 (V); 775/687-3388 (TTY); Fax: 775/687-3292

Project Number: H224A00037
Start Date: July 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $560,884; FY 91 $580,047; FY 92 $594,368; FY 93 $624,588; FY 94 $675,046; FY 95 $675,046; FY 96 $624,883; FY 97 $662,883; FY 98 $497,162; FY 99 $331,442; FY 00 $331,442; FY 01 $331,442

Abstract: The Nevada Project is accomplishing 15 major goals in systems change that have been established in response to identified needs in consultation with the state’s consumer-directed executive board. Additionally, the project trains 400 consumers in the use of technology; a minimum of 1,800 consumers in self-advocacy skills; 550 families in applying technology to the needs of a family member with a disability; and a minimum of 5,730 cross-disciplinary university undergraduates in the fields of medicine, health, education, rehabilitation, gerontology, engineering, speech pathology and audiology, and counseling in AT and cultural awareness. The project provides information and referral and other awareness services to a minimum of 10,000 consumers over the life of the project and evaluates the impact of those services through follow-up and satisfaction surveys.
New Hampshire Technology Partnership Project

University of New Hampshire Technology Partnership
Institute on Disability/UCE
The Concord Center
Ten Ferry Street #14
Concord, NH 03301-5019
sonke.dornblut@unh.edu
http://iod.unh.edu/projects/technology_policy.html

**Principal Investigator:** Jan Nisbet, PhD; Terese Wilkomm, PhD, 603/862-4320 (V/TTY)
**Public Contact:** Sönke Dornblut, 800-238-2048 (V/TTY, in state only); 603/224-0630 (V/TTY);
Fax: 603/228-3270

**Project Number:** H224A10015
**Start Date:** September 1, 1991
**NIDRR Officer:** Carol Cohen

**NIDRR Funding:** FY 91 $506,307; FY 92 $505,008; FY 93 $550,008; FY 94 $635,000; FY 95
$635,000; FY 96 $587,813; FY 97 $625,813; FY 98 $717,815; FY 99 $538,361; FY 00 $358,908; FY
01 $358,908; FY 02 $358,908

**Abstract:** The goal of this project is to increase access to assistive technology through the creation and
support of consumer-driven systems for the provision of state-of-the-art assistive technology products
and services for citizens with disabilities in the state of New Hampshire. The project's lead agency is
the Institute on Disability, a University Center of Excellence at the University of New Hampshire.
Additional subcontracts have been awarded to ATECH Services and Granite State Independent
Living.
New Jersey Assistive Technology Advocacy Center (ATAC)

New Jersey Protection and Advocacy, Inc.
210 South Broad Street, Third Floor
Trenton, NJ 08608
advoca@njpanda.org
http://www.njpanda.org/atac

Principal Investigator: Ellen Lence, Project Director
Public Contact: 800/342-5832 (V, in state only); 609/633-7106 (TTY); 609/292-9742 (NJ P&A Intake Unit); Fax: 609/777-0187

Project Number: H224A20007
Start Date: September 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $548,050; FY 93 $670,528 (includes carryover funding); FY 94 $548,050; FY 95 $550,000; FY 96 $509,130; FY 97 $547,130; FY 98 $710,380; FY 99 $688,800; FY 00 $516,714; FY 01 $344,476; FY 02 $344,476

Abstract: ATAC is a consumer-driven program whose mission is to increase awareness of and improve access to AT for all people with disabilities in the state. The project provides information and referral through its 800 telephone number and Web site regarding all aspects of AT. ATAC also provides advocacy services, both legal and nonlegal, addressing both individual and systems issues. In addition, project staff members provide training and technical assistance, as well as outreach regarding the benefits of and funding for AT devices and services. ATAC disseminates brochures, funding guides, and informational bulletins.
New Mexico Technology Assistance Program (NMTAP)

New Mexico State Department of Education
Division of Vocational Rehabilitation
435 Saint Michaels Drive, Building D
Santa Fe, NM 87505
awinnegar@state.nm.us
http://www.nmtap.com

Principal Investigator: Alan Klaus, Project Director, 505/954-8521
Public Contact: Caroll Cadena, 800/866-2253 (V/TTY); 800/659-4915 (TTY); 505/954-8533 (V/TTY); Fax: 505/954-8562

Project Number: H224A00017
Start Date: April 1, 1990
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $500,500; FY 91 $515,500; FY 92 $525,000; FY 93 $660,710; FY 94 $750,000; FY 95 $750,000; FY 96 $694,000; FY 97 $732,268; FY 98 $549,201; FY 99 $366,134; FY 00 $366,134; FY 01 $366,134; FY 02 $366,134
Abstract: NMTAP examines and works to eliminate barriers to obtaining assistive technology in New Mexico. The project has established a statewide program for coordinating AT services; the program is designed to assist people with disabilities to locate, secure, and maintain AT that can increase, maintain, or improve functional capabilities of people with disabilities. This program is a resource both for people requiring assistive technology and those that manufacture and provide AT devices or services. The program focuses on permanently eliminating barriers in three major areas: access to, availability of, and funding for AT with programs that include low cost financial loans and AT short-term loans to individuals with disabilities.
New York State Office of Advocate for Persons with Disabilities
One Empire State Plaza, Suite 1001
Albany, NY 12223-1150
traid@oapwd.org
http://www.advoc4disabled.state.ny.us/TRAID_Project/technlog.htm

**Principal Investigator:** Lisa Rosano-Kazckowski, Project Manager

**Public Contact:** 800/522-4369 (V/TTY/Spanish, in state only); 518/474-2825 (V); 518/473-4231 (TTY); Fax: 518/473-6005

**Project Number:** H224A00041

**Start Date:** October 1, 1990

**NIDRR Officer:** Carol Cohen

**NIDRR Funding:** FY 90 $500,000; FY 91 $600,000; FY 92 $615,000; FY 93 $820,961; FY 94 $950,000; FY 95 $950,000; FY 96 $879,406; FY 97 $917,406; FY 98 $688,054; FY 99 $458,703; FY 00 $458,703; FY 01 $458,703; FY 02 $458,703

**Abstract:** The Technology-Related Assistance of Individuals with Disabilities (TRAID) Project has been established to improve access to AT through consumer-responsive interventions to effect systemic change on a policy, regulatory, and legislative level. Project staff members chair and facilitate the workings of the NYS Interagency Partnership on Assistive Technology, a group designed to collaborate with a consumer-majority advisory board to identify systemic barriers to AT devices and services and collaborate on strategies to address the barriers. In collaboration with the NYS Department of Health, Early Intervention Program, and Verizon, the local telecommunications corporation, the TRAID Project administers 12 Regional TRAID Centers that operate device demonstration and loan services, coordinate local information and referral, and support individualized self-advocacy. The TRAID Project also provides information and referral regarding assistive technology, provides training and public awareness, and administers the TRAID-IN Equipment Exchange service.
State Technology Assistance Projects
North Carolina

North Carolina Assistive Technology Project

North Carolina Department of Health and Human Services
Division of Vocational Rehabilitation Services
1110 Navaho Drive, Suite 101
Raleigh, NC 27609-7322
rhiatt@ncatp.org
http://www.ncatp.org

Principal Investigator: Ricki Hiatt, Project Director
Public Contact: 919/850-2787 (V/TTY); Fax: 919/850-2792

Project Number: H224A00010
Start Date: July 1, 1990
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $566,425; FY 91 $595,441; FY 92 $625,843; FY 93 $730,152; FY 94 $820,000; FY 95 $820,000; FY 96 $759,066; FY 97 $797,066; FY 98 $597,800; FY 99 $398,533; FY 00 $398,533; FY 01 $398,533; FY 02 $389,533

Abstract: This project provides information and referral services, technical assistance, and training seminars and materials. It supports five regional demonstration centers that provide demonstration and trial of devices. The project’s central office in Raleigh coordinates systems change and advocacy, policy, and funding issues statewide. The North Carolina Division of Vocational Rehabilitation Services provides the project with internal management systems, agency resources, and fiscal management.
State Technology Assistance Projects
North Dakota

North Dakota Interagency Program for Assistive Technology (IPAT)

North Dakota Department of Human Services
Office of Vocational Rehabilitation
P.O. Box 743
Cavalier, ND 58220
jlee@polarcom.com
http://www.ndipat.org

Principal Investigator: Judith A. Lee, Project Director
Public Contact: 800/265-4728 (V/TTY); 701/265-4807 (V/TTY); Fax: 701/265-3150

Project Number: H224A30003
Start Date: October 1, 1993
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $540,000; FY 95 $540,000; FY 96 $509,130; FY 97 $547,130; FY 98 $633,103; FY 99 $611,000; FY 00 $611,000; FY 01 $458,756; FY 02 $305,500
Abstract: The Interagency Program for Assistive Technology is dedicated to supporting the AT needs of all people with disabilities in North Dakota, including those individuals experiencing the effects of aging. The vision of this project is increased access to AT devices and services for the citizens of North Dakota. This goal is realized through: (1) interagency coordination that develops and promotes policies that improve access to AT devices and services for individuals with disabilities of all ages; (2) a public awareness program designed to provide information to targeted individuals relating to the availability and benefits of AT devices and services; (3) technical assistance and training that provides support to public and private entities to increase consumer access to appropriate assessments, training, equipment, and funding for AT; and (4) outreach activities to all regions of this rural and sparsely populated state, including a focus on Native Americans and older individuals living below the poverty level, the two population groups identified as underrepresented in North Dakota.
Commonwealth of the Northern Mariana Islands (CNMI) Assistive Technology Project: System of Technology-Related Assistance for Individuals with Disabilities (STRAID)

CNMI Governor’s Council on Developmental Disabilities
Capitol Hill
P.O. Box 502565
Saipan, MP 96950-2565
clamkin@cnmiddcouncil.org; straid@cnmiddcouncil.org
http://www.cnmiddcouncil.org/atstraid/atflash.htm

Principal Investigator: Thomas J. Camacho, Project Director
Public Contact: Celia B. Lamkin, MD, Project Coordinator, 670/664-7000 (V); Fax: 670/664-7010

Project Number: H224A40007
Start Date: October 1, 1994
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 94 $150,000; FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $105,000; FY 00 $105,000; FY 01 $105,000; FY 02 $105,000

Abstract: This project provides technology-related assistance for people with disabilities in the Commonwealth of the Northern Mariana Islands. The project focuses on the development of a locally based system for the technology-related needs of children, youth, and adults with disabilities. The primary objective of this project is to enhance opportunities for people with disabilities in the Commonwealth to become independent, productive, integrated, and fully included in the community. Through increased emphasis on coordination with agencies or organizations that provide or pay for the provision of AT devices or services, the CNMI Governor’s Council on Developmental Disabilities is building and activating a system that responds to people with disabilities’ needs to: (1) have greater control over their lives; (2) participate in, and contribute more fully to, activities in their home, school, work environment, and community; (3) interact to a greater extent with individuals who do not have disabilities; and (4) benefit from opportunities that are taken for granted by individuals who do not have disabilities.
Ohio State University Research Foundation
J.L. Camera Center
2050 Kenny Road, 9th Floor
Columbus, OH 43221
atohio@osu.edu
http://www.atohio.org

Principal Investigator: Sheldon R. Simon, MD
Public Contact: Douglas Huntt, Executive Director, 800/784-3425 (V/TTY, in state only); 614/292-2426 (V/TTY); 614/292-3162 (TTY); Fax: 614/292-5866

Project Number: H224A40001
Start Date: August 1, 1992
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $522,100; FY 93 $522,000; FY 94 $770,113; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $815,688; FY 99 $794,260; FY 00 $595,695; FY 01 $397,130; FY 02 $397,130

Abstract: This project administers, and advocates for, programs that promote increased availability and affordability of assistive technology for Ohioans with disabilities. Staff members work to accomplish an increased level of education among people with disabilities and the professionals that provide services to them regarding the role that technology can play in the lives of people with disabilities. The project educates the public at large about how technology can be the bridge to independence for people with disabilities in the areas of employment, education, and everyday living. A project goal is to improve the services provided to people with disabilities by state, local and county governments, service agencies, and public libraries. This project is a resource for people with disabilities to learn about assistive technology and how it can help them overcome barriers in their lives. Project initiatives include Adaptive Toy Lending Libraries for families of children with disabilities, low interest loans for technology to people with disabilities, and a computer refurbishing and recycling program.
State Technology Assistance Projects
Oklahoma

Oklahoma ABLETech

Oklahoma State University
University Wellness Center
1514 West Hall of Fame Road
Stillwater, OK 74078-2026
mljwell@okstate.edu
http://okabletech.okstate.edu

Principal Investigator: Mac McCrory, Project Director
Public Contact: Linda Jaco, Project Manager, 800/257-1705 (V/TTY); 405/744-9864 (V); Fax: 405/744-2487

Project Number: H224A50007
Start Date: July 1, 1992
NIDRR Officer: Carol Cohen

NIDRR Funding: FY 92 $530,000; FY 93 $668,524 (includes carryover funding); FY 94 $530,000; FY 95 $575,000; FY 96 $532,272; FY 97 $570,272; FY 98 $695,237; FY 99 $673,809; FY 00 $505,357; FY 01 $336,905; FY 02 $336,905

Other funding: FY 92 $85,000 (Oklahoma Department of Rehabilitation Services); $64,944 (US Department of Agriculture); FY 00 $33,000 (Southwest Center for Agricultural Health, Injury Prevention and Education-NIOSH); FY 01 $100,000 (Oklahoma Department of Rehabilitation Services)

Abstract: The purpose of Oklahoma ABLETech is to increase access to assistive technology for people of all ages and all disabilities through a variety of consumer-responsive systems change activities. ABLETech provides information, referral, training, technical assistance and advocacy, and works to improve laws and policies providing access to assistive technology.
State Technology Assistance Projects
Oregon

Oregon Technology Access for Life Needs (TALN)

Oregon Disabilities Commission
c/o Access Technologies, Inc.
3070 Lancaster Drive Northeast
Salem, OR 97305-1396
ati@orednet.org
http://www.taln.org

Principal Investigator: Laurie Brooks, Project Director
Public Contact: 800/677-7512 (V/TTY, in state only); 503/361-1201 (V/TTY); Fax: 503/370-4530

Project Number: H224A50002
Start Date: April 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $540,000; FY 91 $555,000; FY 92 $575,000; FY 93 $620,000; FY 94 $670,000; FY 95 $670,000; FY 96 $620,212; FY 97 $658,212; FY 98 $493,659; FY 99 $329,106; FY 00 $329,106; FY 01 $329,106; FY 02 $329,106

Abstract: This project uses existing resources including community colleges, medical, rehabilitation, educational, and recreational and adaptive sports programs, the state library system, federally funded technology projects currently in existence in Oregon, and state agencies to expand the availability of AT in Oregon. Projects include an exhibit to increase public awareness, a toll-free number for information and referral, training programs, equipment loan banks and demonstration labs, and a database on used equipment.
State Technology Assistance Projects
Pennsylvania

Pennsylvania’s Initiative on Assistive Technology (PIAT)

Temple University
Institute on Disabilities/UAP
1301 Cecil B. Moore Avenue, 423 Ritter Annex
Philadelphia, PA 19122
piat@astro.ocis.temple.edu
http://www.temple.edu/inst_disabilities/PIAT

Principal Investigator: Diane Bryen, PhD; Amy S. Goldman, 215/204-1356
Public Contact: Amy S. Goldman, 800/204-7428 (V); 800/750-7428 (TTY); 215/204-5966 (V); 215/204-1356 (V/TTY); Fax: 215/204-9371

Project Number: H224A20006
Start Date: September 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $550,000; FY 93 $602,623; FY 94 $730,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,049,575; FY 99 $1,028,147; FY 00 $771,110; FY 01 $514,074; FY 02 $514,074

Abstract: This project focuses on the creation of a consumer responsive system, supported by combined public and private resources, through which Pennsylvanians with disabilities (including older Pennsylvanians) have access to the AT services and supports they need to contribute to and participate fully in their communities. Major functional areas include public awareness, information and referral, individual advocacy and systems change, and training. PIAT has established a network of regional Assistive Technology Resource Centers (ATRCs). ATRCs are also a key to Pennsylvania’s Assistive Technology Lending Library, a state funded program based on the pilot short-term equipment loan program developed by PIAT.
State Technology Assistance Projects
Puerto Rico

Puerto Rico Assistive Technology Project

FILIUS Institute
University of Puerto Rico
Box 364984
San Juan, PR 00936-4984
pratp@pratp.net
http://www.pratp.net

Principal Investigator: Maria I. Miranda
Public Contact: 800/496-6035 (V/TTY, from the U.S.); 800/981-6033 (V/TTY, from Puerto Rico);
787/767-6035 (V); 787/764-6062 (V); 787/767-8642 (TTY); Fax: 787/754-8034

Project Number: H224A70001
Start Date: October 1, 1993
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $500,000; FY 94 $545,000; FY 95 $555,000; FY 96 $513,758; FY 97 $551,758; FY 98 $692,202; FY 99 $670,774; FY 00 $670,774; FY 01 $503,081; FY 02 $335,387
Abstract: This project establishes a comprehensive, island-wide system of AT services to maximize and enhance existing resources in Puerto Rico. This system is timely and consumer-responsive to the needs of people with disabilities. The project’s main focus is to influence the system through collaborative efforts with public and private agencies to guarantee equal opportunity and access to AT by people with disabilities in Puerto Rico. The Assistive Technology Program is administered by the University of Puerto Rico, Office of the President, FILIUS Institute, Assistive Technology Institute.
Rhode Island Assistive Technology Access Partnership (ATAP)

Rhode Island Department of Human Services
Office of Rehabilitation Services
40 Fountain Street
Providence, RI 02903-1898
reginac@ors.state.ri.us
http://www.atap.state.ri.us

Principal Investigator: Raymond A. Carroll, Administrator
Public Contact: Regina Connor, Project Director, 800/752-8088 (in state only); 401/421-7005, ext. 390 (V); 401/421-7016 (TTY); Fax: 401/222-3574

Project Number: H224A30012
Start Date: October 1, 1993
NIDRR Officer: Judith Fein
NIDRR Funding: FY 93 $500,000; FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $538,000; FY 98 $624,467; FY 99 $603,039; FY 00 $603,039; FY 01 $452,279; FY 02 $301,520
Abstract: The Rhode Island Assistive Technology Access Partnership (ATAP) is a statewide partnership of organizations, each with a targeted focus, working together with a consumer council (Rhode Island Council on Assistive Technology) to remove barriers and increase access to AT for individuals with disabilities of all ages.
South Carolina Assistive Technology Program (SCATP)

University of South Carolina School of Medicine
Center for Disability Resources
Columbia, SC 29208
jjendron@usit.net; evelyne@cdd.sc.edu
http://www.sc.edu/scatp

Principal Investigator: Richard Ferrante, 803/935-5231 (V)
Public Contact: Evelyn Evans, Project Director, 803/935-5263 (V/TTY); Fax: 803/935-5342

Project Number: H224A60001
Start Date: October 1, 1991
NIDRR Officer: Judith Fein
NIDRR Funding: FY 91 $541,767; FY 92 $541,767; FY 93 $595,767; FY 94 $720,000; FY 95 $720,000; FY 96 $667,000; FY 97 $704,497; FY 98 $829,535; FY 99 $622,151; FY 00 $414,768; FY 01 $414,768; FY 02 $414,768

Abstract: This project is the catalyst for uniting AT services statewide into an easily accessible system that is responsive to the needs of all South Carolinians with disabilities. SCATP collaborates with state agencies, policy-makers, and private entities to overcome barriers that prevent people from getting the devices and services they need for full and productive lives. Systems change activities are developed with three audiences under consideration: state agency administrators, service providers, and consumers. Rather than direct provision of services, SCATP focuses on strengthening systems so that they are mutually reinforcing and self-sustaining; the major funding streams of the Vocational Rehabilitation Department, Medicaid, the Department of Education, and private insurance are targeted. Systems change activities are connected to training and technical assistance activities that are supportive of systems change. All activities are guided by input from and responsiveness to consumers and their families.
South Dakota Assistive Technology Project (DakotaLink)

DakotaLink
1925 Plaza Boulevard
Rapid City, SD 57702
dvogel@tie.net
http://dakotalink.tie.net

Principal Investigator: Grady Kickul, 605/773-3195 (V)
Public Contact: Dave Vogel, 800/224-5336 (V/TTY, in state only); 605/224-5336 (V/TTY); Fax: 605/224-8320

Project Number: H224A20019
Start Date: July 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $520,000; FY 93 $520,000; FY 94 $620,000; FY 95 $650,000; FY 96 $601,699; FY 97 $601,699; FY 98 $728,100; FY 99 $700,000; FY 00 $525,000; FY 01 $353,336; FY 02 $353,336

Abstract: To achieve systems change, DakotaLink works with consumers, state and private agencies, and organizations providing services to, or advocating for, people with disabilities to identify and eliminate barriers to individuals receiving AT devices or services in a timely manner. The project uses demonstration centers, outreach coordinators, rehabilitation technicians, and training programs as a catalyst to: (1) reach the most underserved areas; (2) provide advocacy training for people with disabilities and their representatives; and (3) provide information support to all individuals regarding access to, provision of, and funding for assistive technology devices and services. DakotaLink continues to use a Native American Outreach Coordinator to reach specifically that underserved population.
State Technology Assistance Projects
Tennessee

Tennessee Technology Access Project (TTAP)

TTAP
Tennessee Department of Human Services
Department of Rehabilitation Services
Citizen’s Plaza, 11th Floor
400 Deadrick Street
Nashville, TN 37248
kevin.r.wright@mail.state.tn.us
http://www.state.tn.us/humanserv/ttap_index.html

Principal Investigator: Kevin R. Wright, Project Director
Public Contact: 800/732-5059; 615/532-3122 (V/TTY); Fax: 615/532-4685

Project Number: H224A010002
Start Date: July 1, 1990
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 90 $550,000; FY 91 $553,675; FY 92 $553,675; FY 93 $640,800; FY 94 $665,000; FY 95 $665,000; FY 96 $615,584; FY 97 $653,584; FY 01 $326,792; FY 02 $326,792
Abstract: This project’s mission is to maintain a statewide program of technology-related assistance that is timely, comprehensive, and consumer-driven to ensure that all Tennesseans with disabilities have the information, services, and devices they need to make choices about where and how they spend their time as independently as possible. TTAP and its five regional assistive technology centers, located in Jackson, Knoxville, Chattanooga, Memphis, and Nashville, work daily toward that mission by providing public awareness, evaluation, minority outreach, and advocacy services to individuals, families, businesses, and government.
Texas Technology Access Project

University of Texas at Austin
Texas Center for Disability Studies
4030 West Braker Lane
Building 1, Suite 180
Austin, TX 78759
johnz@utxvms.cc.utexas.edu
http://techaccess.edb.utexas.edu

Principal Investigator: Susanne Elrod, Project Director
Public Contact: John Moore, 800/828-7839 (V/TTY, in state only); 512/471-7621 (V); 512/471-1844 (TTY); Fax: 512/471-7549

Project Number: H224A20012
Start Date: August 1, 1992
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 92 $550,000; FY 93 $550,000; FY 94 $550,000; FY 95 $850,000; FY 96 $786,837; FY 97 $824,837; FY 98 $1,167,518; FY 99 $1,146,080; FY 00 $859,566; FY 01 $573,044; FY 02 $573,044

Abstract: This project promotes increased access to assistive and telecommunication technology through technical assistance and training, information and public awareness activities, and coordination with public agencies and policy makers.
State Technology Assistance Projects
U.S. Virgin Islands

U.S. Virgin Islands Technology-Related Assistance for Individuals with Disabilities (TRAID)

University of the Virgin Islands/UAP
#2 John Brewers Bay
St. Thomas, USVI 00801-0990
yhabtey@uvi.edu
http://www.uvi.edu/pub-relations/resource.htm

Principal Investigator: Yegin Habtes
Public Contact: 340/693-1323; Fax: 340/693-1325

Project Number: H224A50005
Start Date: October 1, 1995
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 95 $150,000; FY 96 $150,000; FY 97 $150,000; FY 98 $150,000; FY 99 $105,000; FY 00 $105,000; FY 01 $105,000; FY 02 $105,000
Other funding: FY 95 $6,400
Abstract: The Virgin Islands project disseminates necessary information on assistive technologies for people with disabilities and provides a venue for device demonstration through the establishment of two resource centers, on the islands of St. Thomas and St. Croix. The project is also initiating an AT loan library.
Utah Assistive Technology Program (UATP)

Utah State University
Center for Persons with Disabilities
6855 Old Main Hill
Logan, UT 84322-6855
uatp@cc.usu.edu
http://www.uatpat.org

Principal Investigator: Martin Blair, Program Director, 435/797-3886
Public Contact: 435/797-3824 (V); Fax: 435/797-2355

Project Number: H224A90051
Start Date: November 1, 1989
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 89 $505,445; FY 90 $507,720; FY 91 $559,720; FY 92 $696,224; FY 93 $788,526; FY 94 $800,000; FY 95 $800,000; FY 96 $740,560; FY 97 $555,414; FY 98 $370,276; FY 99 $370,276; FY 00 $370,276; FY 01 $370,276; FY 02 $370,276
Abstract: The Utah Assistive Technology Program (UATP) provides expertise, resources, and a structure to enhance and expand AT services provided by private and public agencies in Utah. This occurs through monitoring, coordination, information dissemination, empowering individuals, the identification and removal of barriers, and expanding state resources. Primary components of UATP include: (1) the Utah Center for Assistive Technology, a statewide service hub; (2) Assistive Technology Access Centers located in rural centers for independent living; (3) outreach to those over the age of 65 and their service providers; (4) the Utah Assistive Technology Foundation providing low-interest loans to consumers; (5) the Consumer Council whose primary interest is to identify barriers; (6) the Management and Implementation Board, made up of state service agency representatives (usually the directors) that take appropriate action to remove barriers; and (7) consumer technical services provided by the Assistive Technology Development and Fabrication Laboratory at Utah State University.
State Technology Assistance Projects
Vermont

Vermont Assistive Technology Project

Vermont Department of Aging and Disabilities
103 South Main Street, Weeks Building
Waterbury, VT 05671-2305
betsyr@dad.state.vt.us
http://www.dad.state.vt.us/atp

Principal Investigator: Julie Tucker, Project Director
Public Contact: 800/750-6355 (V/TTY, in state only); 802/241-2620 (V/TTY); Fax: 802/241-2174

Project Number: H224A00023
Start Date: July 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $553,048; FY 91 $560,577; FY 92 $581,417; FY 93 $705,000; FY 94 $700,000; FY 95 $700,000; FY 96 $647,983; FY 97 $685,983; FY 98 $514,487; FY 99 $342,991; FY 00 $342,992; FY 01 $342,992; FY 02 $342,992
Abstract: The Vermont Assistive Technology Project has regional centers for demonstration, trial, and technical support for all types of assistive technology, including computer and augmentative communication equipment, as well as information and referral. The project affects change in policies and procedures of public and private agencies by providing AT expertise on boards and committees such as the Developmental Services Communication Task Force, ADA Coalition, Telephone Equipment Distribution Program, etc. The Project advocates for visitable homes by educating consumers about Vermont’s housing accessibility laws, which the Project was instrumental in passing. The Project supports an annual AT institute for educators and presents many workshops in settings such as the Traumatic Brain Injury Conference to raise awareness and institute AT knowledge and expertise into existing public and private agencies. The Project also supports an AT Equipment Revolving Loan Fund Program through a community credit union.
State Technology Assistance Projects
Virginia

Virginia Assistive Technology System (VATS)

Virginia Department of Rehabilitative Services (DRS)
8004 Franklin Farms Drive
P.O. Box K-300
Richmond, VA 23288-0300
knorrkh@drs.state.va.us
http://www.vats.org

Principal Investigator: Kenneth Knorr, Project Director
Public Contact: 800/552-5019 (V/TTY); 804/662-9990 (V/TTY); Fax: 804/662-9478

Project Number: H224A00009
Start Date: June 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $550,000; FY 91 $562,500; FY 92 $578,883; FY 93 $685,331; FY 94 $663,467; FY 95 $745,000; FY 96 $689,639; FY 97 $727,639; FY 98 $545,729; FY 99 $363,820; FY 00 $363,820; FY 01 $363,820; FY 02 $363,820

Abstract: The Virginia Assistive Technology System (VATS) provides coordination at three levels: state policy, through the mechanism of interagency agreements; project management, through the mechanism of the advisory council; and at the local and regional level, through four AT regional sites. Activities include information and referral services, technical assistance, training materials and seminars, and creative grant programs and policy development. The project has produced a textbook, Assistive Technology: A Resource for School, Work, and Community (Brookes Publishing) and a National Study of Loan Financing Programs.
State Technology Assistance Projects
Washington

Washington Assistive Technology Alliance (WATA)

University of Washington
Center for Technology and Disability Studies (CTDS)
Box 357920
Seattle, WA 98195-7920
uwat@u.washington.edu
http://wata.org

Principal Investigator: Debbie Cook, Project Director, 360/438-8008 (V); 360/438-8644 (TTY)
Public Contact: 800/841-8345 (V/TTY, in state only); 206/685-4181 (V); 206/616-1396 (TTY);
Fax: 206/543-4779

Project Number: H224A30006
Start Date: October 1, 1993
NIDRR Officer: Carol Cohen
NIDRR Funding: FY 93 $525,090; FY 94 $580,000; FY 95 $600,000; FY 96 $555,414; FY 97 $593,414; FY 98 $739,639; FY 99 $700,000; FY 00 $718,211; FY 01 $538,658; FY 02 $308,072
Abstract: Activities for this project include information, consultation, and training related to selection of technology devices, services, and funding; legal advice and advocacy; policy development; legislative action; technical consultation and training; publications; and online resources. WATA is a consumer advocacy network that includes the University of Washington Center for Technology and Disability Studies, the AT Resource Center at Easter Seal Society in Spokane, and the Washington Protection and Advocacy System. The project is administered by the state Division of Vocational Rehabilitation with guidance from the Consumer Majority Advisory Board.
State Technology Assistance Projects
West Virginia

West Virginia Assistive Technology System (WVATS)

West Virginia University Center for Excellence in Disabilities
Airport Research and Office Park
955 Hartman Run Road
Morgantown, WV 26505
j cstewart@hs c.wvu.edu
http://www.ced.wvu.edu/Programs/community/WVATS/index.htm

Principal Investigator: Janice A. Holland, 304/766-4694 (V)
Public Contact: Jack Stewart, Project Manager, 800/841-8436 (V/TTY, in state only); 304/293-4692 (V/TTY); Fax: 304/293-7294

Project Number: H224A20011
Start Date: July 1, 1992
NIDRR Officer: Judith Fein
NIDRR Funding: FY 92 $530,000; FY 93 $530,000; FY 94 $620,000; FY 95 $620,000; FY 96 $573,928; FY 97 $611,928; FY 98 $716,068; FY 99 $716,068; FY 00 $520,980; FY 01 $347,320; FY 02 $347,320
Abstract: The WVATS project seeks to improve the availability of AT by improving existing AT services, facilitating coordination of AT service-delivery programs, identifying and remediating gaps in services, and promoting, developing, and/or delivering new services. These systemic changes are carried out in response to and consonant with consumer advice, direction, and consent. The West Virginia project has a board composed primarily of consumers and their families. State organizations and agencies provide guidance, structure, and input. WVATS uses a “core” system directed by a board, overseen by the Division of Rehabilitation Services, and managed on a day-to-day basis by the West Virginia University Affiliated Center for Developmental Disabilities. WVATS supports program staff, an information and referral system with a toll-free number, two resource centers, a statewide awareness campaign, training programs, and seven regional technology-related assistance teams.
WisTech

Wisconsin Assistive Technology Program
Division of Supportive Living
1 West Wilson Street, Room 450
P.O. Box 7851
Madison, WI 53707-7851
abbeysu@dhfs.state.wi.us
http://www.wistech.state.wi.us

Principal Investigator: Susan Abbey, Project Director, 608/266-1794
Public Contact: 608/266-0421 (V/TTY); 608/267-9880 (TTY); Fax: 608/267-3203

Project Number: H224A00013
Start Date: May 1, 1990
NIDRR Officer: Judith Fein
NIDRR Funding: FY 90 $572,871; FY 91 $575,000; FY 92 $590,313; FY 93 $685,488; FY 94 $730,000; FY 95 $730,000; FY 96 $675,754; FY 97 $713,754; FY 98 $535,315; FY 99 $356,877; FY 00 $356,877; FY 01 $356,877; FY 02 $356,877

Abstract: WisTech provides direct consumer services by contracting with eight Wisconsin Centers for Independent Living, the Wisconsin Coalition for Advocacy (a Protection and Advocacy agency), and AgrAbility. Consumer-direct services include AT assessments, maintenance of equipment loan closets, assistance with locating funding for AT, among other services. WisTech incorporates consumer control and involvement by working with the WisTech Advisory Board, comprised of at least 51 percent consumers or parents, and service providers.
Wyoming’s New Options in Technology (WYNOT)

University of Wyoming
Wyoming Institute for Disabilities (WIND)
1465 North Fourth Street, Suite 111
Laramie, WY 82072
wynot.uw@uwyo.edu
http://wind.uwyo.edu/wynot

Principal Investigator: Keith Miller, 307/766-2762 (V)
Public Contact: Kathy Laurin, 800/861-4312 (V/TTY, in state only); 307/766-2051 (V/TTY); Fax: 307/721-2084

Project Number: H224A60002
Start Date: October 1, 1993
NIDRR Officer: Judith Fein
NIDRR Funding: FY 94 $500,000; FY 95 $500,000; FY 96 $500,000; FY 97 $500,000; FY 98 $620,502; FY 99 $599,074; FY 00 $599,074; FY 01 $449,306; FY 02 $336,979

Abstract: The mission of WYNOT is to build statewide capacity for universal access to assistive technology for all of Wyoming and to establish a self-sustaining system that will continue to meet the state’s need for assistive technology after Federal funding for WYNOT has ended. In pursuing this mission, WYNOT provides training and technical assistance to statewide and community-based organizations to enhance their capacity to meet the assistive technology needs of individuals with disabilities. WYNOT also provides technical assistance and training for consumers. The project operates a demonstration center, loan bank, information and referral service, and outreach services.
Directory of Protection and Advocacy for Assistive Technology

Pursuant to Title I, Section 102 of the Assistive Technology Act, each state and outlying area annually receives a grant from NIDRR to support protection and advocacy services through the systems established to provide protection and advocacy under the Developmental Disabilities Assistance and Bill of Rights Act, for the purposes of assisting in the acquisition, utilization, or maintenance of assistive technology devices or services for individuals with disabilities. Each state is awarded $50,000 annually, and the four outlying areas each receive grants of $20,000 annually. These projects provide legal advocacy, information, and technical assistance, and work closely with the state grants projects. A list of the state protection and advocacy agencies and contact information for each is included below.


Alabama
Alabama Disabilities Advocacy Program
The University of Alabama, Box 870395
Tuscaloosa, AL 35487-0395
Phone: 205/348-4928; 205/348-9484 (TTY); 800/826-1675 (AL only)
Fax: 205/348-3909
Email: adap@law.ua.edu
Web site: http://www.adap.net

Alaska
Disability Law Center of Alaska
3330 Arctic Blvd., Suite 103
Anchorage, AK 99503
Phone: 907/565-1002 (Voice/TTY); 800/478-1234
Fax: 907/565-1000
Email: cklenger@dlcak.org
Web site: http://www.dlcak.org

American Samoa
Client Assistance Program and Protection & Advocacy
P. O. Box 3937
Pago Pago, American Samoa 96799
Phone: 011-684/633-2441
Fax: 011-684/633-7286
Email: opad@samoatelco.com

Arizona
Arizona Center for Disability Law
100 North Stone Avenue, Suite 305
Tucson, AZ 85701
Phone: 520/327-9547 (Voice/TTY); 800/922-1447
Fax: 520/884-0992
Email: lcohen@acdl.com
Web site: http://www.acdl.com

Arkansas
CAP/PADD/PAIMI/PAIR/PABSS
Disability Rights Center, Inc.
1100 North University, Suite 201
Little Rock, AR 72207
Phone: 501/296-1775 (Voice/TTY); 800/482-1174
Fax: 501/296-1779
Email: panda@arkdisabilityrights.org
Web site: http://www.arkdisabilityrights.org

California
Protection & Advocacy, Inc.
100 Howe Avenue, Suite 185N
Sacramento, CA 95825
Phone: 916/488-9955 Admin. Off.; 916/488-9950
Legal Off.; 800/776-5746
Fax: 916/488-2635 or 916/488-9962
Email: legalmail@pai-ca.org
Web site: http://www.pai-ca.org

Colorado
The Legal Center
455 Sherman Street, Suite 130
Denver, CO 80203
Phone: 303/722-0300 (Voice/TTY); 800/288-1376
Fax: 303/722-0720
Email: tlcmail@thelegalcenter.org
Web site: http://www.thelegalcenter.org

Connecticut
Office of P&A for Persons with Disabilities
60B Weston Street
Hartford, CT 06120-1551
Phone: 860/297-4300; 860/566-2102 TDD; 800/842-7303 (CT ONLY)
State Technology Assistance Projects

Fax: 860/566-8714
Email: james.mcgaughey@po.state.ct.us
Web site: http://www.state.ct.us/opad

Delaware
Community Legal Aid Society, Inc.
Community Services Building, Suite 801
100 W. 10th Street
Wilmington, DE 19801
Phone: 302/575-0660 (Voice/TTY)
Fax: 302/575-0840
Email: bhartman@declasi.org

District of Columbia
University Legal Services
220 I Street, NE, Suite 130
Washington, DC 20002
Phone: 202/547-0198
Fax: 202/547-2083
Email: jbrown@uls-dc.com
Web site: http://www.dcpandamon.org

Florida
Advocacy Ctr. for Persons with Disabilities
2671 Executive Center, Circle West
Webster Building, Suite 100
Tallahassee, FL 32301-5024
Phone: 850/488-9071; 800/342-0823; FL only); 800/346-4127 (TTY)
Fax: 850/488-8640
Email: g.blumenthal@advocacycenter.org
Web site: http://www.advocacycenter.org

Georgia
Georgia Advocacy Office, Inc.
100 Crescent Centre Parkway, Suite 520
Tucker, GA 30084
Phone: 404/885-1234 (Voice/TTY); 800/537-2329
Fax: 770/414-2948
Email: info@thegov.org
Web site: http://www.thegov.org

Guam
Guam Legal Services
113 Bradley Place
Hagatna, Guam 96910
Phone: 1-671/477-9811
Fax: 011-671/477-1320
Email: glsc@netpci.com

Hawaii
Hawaii Disability Rights Center
900 Fort Street Mall, Suite 1040 Pioneer Plaza
Honolulu, HI 96813
Phone: 808/949-2922 (Voice/TTY)
Fax: 808/949-2928
Email: pahi@pixi.com
Web site: http://www.pixi.com/~pahi

Idaho
Co-Ad, Inc.
4477 Emerald, Suite B-100
Boise, ID 83706
Phone: 208/336-5353 (Voice/TTY); 800/632-5125
Fax: 208/336-5396
Email: coadinc@melodusa.net
Web site: http://users.moscow.com/co-ad

Illinois
Equip for Equality, Inc.
11 East Adams, Suite 1200
Chicago, IL 60603
Phone: 312/341-0022 (Voice/TTY); 800/537-2632
Fax: 312/341-0295
Email: contactus@equipforequality.org
Web site: http://www.equipforequality.org

Indiana
Indiana Protection and Advocacy Services
4701 N. Keystone Ave., Suite 222
Indianapolis, IN 46204
Phone: 317/722-5555 (Voice/TTY); 800/622-4845
Fax: 317/722-5564
Email: tgallagher@ipas.state.in.us
Web site: http://www.IN.gov/ipas

Iowa
Iowa P&A Service, Inc.
3015 Merle Hay Road, Suite 6
Des Moines, IA 50310
Phone: 515/278-2502; 515/278-0571 TDD; 800/779-2502
Fax: 515/278-0539
Email: info@ipna.org

Kansas
Kansas Advocacy & Protection Services
3745 SW Wanamaker Road
Topeka, KS 66610
Phone: 785/273-9661
Kentucky
Office for Public Advocacy
Division for P&A
100 Fair Oaks Lane, 3rd Floor
Frankfort, KY 40601
Phone: 502/564-2967; 800/372-2988 (TTY)
Fax: 502/564-3949
Email: mafitzgerald@mail.pa.state.ky.us
Web site: http://www.drcme.org

Louisiana
Advocacy Center
225 Baronne, Suite 2112
New Orleans, LA 70112-2112
Phone: 504/522-2337 (Voice/TTY); 800/960-7705
Fax: 504/522-5507
Email: lsimpson@advocacyla.org
Web site: http://www.advocacyla.org

Maine
Disability Rights Center
24 Stone Street
P.O. Box 2007
Augusta, ME 04338
Phone: 207/626-2774; 800/452-1948 (TTY)
Fax: 207/621-1419
Email: advocate@drcme.org
Web site: http://www.drcme.org

Maryland
Maryland Disability Law Center
Central Maryland Office
The Walbert Building, Suite 400
1800 North Charles Street
Baltimore, MD 21201
Phone: 410/727-6352; 800/233-7221 (TTY); 410/727-6387
Fax: 410/727-6389; 410/234-2711
Email: philf@mdlcbalto.org
Web site: http://www.mdlcbalto.org

Massachusetts
Disability Law Center, Inc.
11 Beacon Street, Suite 925
Boston, MA 02108
Phone: 617/723-8455 (Voice/TTY)
Fax: 617/723-9125
Email: cgriffin@dlc-ma.org
Web site: http://www.dlc-ma.org

Michigan
Michigan P&A Service
4095 Legacy Parkway, Suite 500
Lansing, MI 48911-4263
Phone: 517/487-1755 (Voice/TTY)

Mississippi
Mississippi P&A System for DD, Inc.
5305 Executive Place, Suite A
Jackson, MS 39206
Phone: 601/981-8207 (Voice/TTY)
Fax: 601/981-8313
Email: mspna@bellsouth.net

Missouri
Missouri P&A Services
925 S. Country Club Drive, Unit B-1
Jefferson City, MO 65109
Phone: 573/893-3333; 800/392-8667
Fax: 573/893-4231
Email: mopasjc@socket.net
Web site: members.socket.net/~mopasjc/MOP&A.htm

Montana
Montana Advocacy Program
400 North Park, 2nd Floor
PO Box 1681
Helena, MT 59624
Phone: 406/449-2344 (Voice/TTY); 800/245-4743
Fax: 406/449-2418
Email: bernie@mtadv.org
Web site: http://www.mtadv.org
Native American
PADD
DNA-People’s Legal Services, Inc.
P.O. Box 392
Shiprock, NM 87240
Phone: 505/368-3216
Fax: 505/368-3220
Email: tyanan@dnalegalservices.org

Nebraska
Nebraska Advocacy Services, Inc.
134 South 13th Street, Suite 600
Lincoln, NE 68508
Phone: 402/474-3183 (Voice/TTY); 800/422-6691
Fax: 402/474-3274
Email: nas@nas-pa.org

Nevada
Nevada Advocacy & Law Center, Inc.
6039 Eldora Avenue, Ste C
Las Vegas, NV 89102
Phone: 702/257-8150; 702/257-8160 TDD; 888/349-3843
Fax: 702/257-8170
Email: ndalc@earthlink.net (Las Vegas)
reno@ndalc.org (Reno)
Web site: http://www.ndalc.org

New Hampshire
Disabilities Rights Center
PO Box 3660
18 Low Avenue
Concord, NH 03302-3660
Phone: 603/228-0432 (Voice/TTY)
Fax: 603/225-2077
Email: advocacy@drcnh.org

New Jersey
New Jersey P&A, Inc
210 S. Broad Street, 3rd Floor
Trenton, NJ 08608
Phone: 609/292-9742; 800/922-7233
Fax: 609/777-0187
Email: advoca@njpanda.org
Web site: http://www.njpanda.org

New Mexico
Protection & Advocacy, Inc
1720 Louisiana Blvd., NE - Suite 204
Albuquerque, NM 87110
Phone: 505/256-3100 (Voice/TTY); 800/432-4682
Fax: 505/256-3184
Email: nmpanda@nmprotection-advocacy.com
Web site: http://www.nmprotection-advocacy.com

New York
NY State Commission on Quality of Care for the Mentally Disabled
401 State Street
Schenectady, NY 12305-2397
Phone: 518/381-7098; 800/624-4143 (TTY)
Fax: 518/381-7095
Email: marcelc@cqc.state.ny.us
Web site: http://www.cqc.state.ny.us

North Carolina
Governor’s Advocacy Council for Persons with Disabilities
2113 Cameron Street, Suite 218
Raleigh, NC 27605
Phone: 919/733-9250 (Voice/TTY); 800/821-6922 (NC only)
Fax: 919/733-9173
Email: allison.bowen@ncmail.net
Web site: http://www.doa.state.nc.us/doa/gacpd/gacpd.htm

North Dakota
The North Dakota Protection & Advocacy Project
400 E. Broadway, Suite 616
Bismarck, ND 58501
Phone: 701/328-2950; 800/472-2670; 800/642-6694 (24 H. Line); 800/366-6888 (TTY)
Fax: 701/328-3934
Email: tlarsen@state.nd.us
Web site: http://www.ndpanda.org

N. Mariana Islands
Northern Mariana Protection and Advocacy System, Inc.
P.O. Box 503529
Saipan, MP 96950-3529
Phone: 1-670/235-7274/3
Fax: 1-670/235-7275
Email: nmpasi@gtepacific.net

Ohio
Ohio Legal Rights Service
8 East Long Street, 5th Floor
Columbus, OH 43215
Phone: 614/466-7264 (Voice/TTY); 800/282-9181
Fax: 614/644-1888
Email: CKnight@olrs.state.oh.us
Web site: http://www.state.oh.us/olrs/

Oklahoma
Oklahoma Disability Law Center, Inc.
2915 Classen Blvd. - Suite 300
Oklahoma City, OK 73106
Phone: 405/525-7755; 800/880-7755
Fax: 405/525-7759
Email: odlcokc@flash.net
Web site: http://www.oklahomadisabilitylaw.org

Oregon
Oregon Advocacy Center
620 SW Fifth Ave., 5th Floor
Portland, OR 97204-1428
Phone: 503/243-2081; 800/452-1694; 800/556-5351
(TTY)
Fax: 503/243-1738
Email: welcome@oradvocacy.org
Web site: http://www.oradvocacy.org

Pennsylvania
Pennsylvania P&A, Inc.
1414 N. Cameron Street, Suite C
Harrisburg, PA 17103
Phone: 717/236-8110 (Voice/TTY); 800/692-7443
Fax: 717/236-0192
Email: ppa@ppainc.org
Web site: http://www.ppainc.org

Puerto Rico
Office of the Governor/Ombudsman for Persons with Disabilities
P. O. Box 41309
San Juan, PR 00940-1309
Phone: 787/725-2333; 787/721-4299; 800/981-4125
TTY 787/725-4014
Fax: 787/721-2455
Email: jrocasio@oppi.gobierno.pr
Web site: http://www.oppi.prstar.net

Rhode Island
Rhode Island Disability Law Center Inc.
349 Eddy Street
Providence, RI 02903
Phone: 401/831-3150; 401/831-5335TDD; 800/733-5332
Fax: 401/274-5568
Email: hn7384@handsnet.org

South Carolina
Protection & Advocacy for People with Disabilities, Inc.
3710 Landmark Drive, Suite 208
Columbia, SC 29204
Phone: 803/782-0639 (Voice/TTY); 866/275-7273
(SC ONLY)
Fax: 803/790-1946
Email: info@protectionandadvocacy-sc.org
Web site: http://www.protectionandadvocacy-sc.org

South Dakota
South Dakota Advocacy Services
221 South Central Avenue
Pierre, SD 57501
Phone: 605/224-8294 (Voice/TTY); 800/658-4782
Fax: 605/224-5125
Email: sdas@sadvocacy.com
Web site: http://www.sadvocacy.com

Tennessee
Tennessee P&A, Inc.
P O Box 121257
Nashville, TN 37212
Phone: 615/298-1080 (Voice/TTY); 800/342-1660
Fax: 615/298-2046
Email: shirleys@tpainc.org

Texas
Advocacy, Inc.
7800 Shoal Creek Blvd. - Suite 171-E
Austin, TX 78757
Phone: 512/454-4816 (Voice/TTY); 800/252-9108
Fax: 512/323-0902
Email: infoai@advocacyinc.org
Web site: http://www.advocacyinc.org

Utah
Disability Law Center
205 North 400 West
Salt Lake City, UT 84103
Phone: 801/363-1347; 800/662-9080
TTY: 801/924-3185
Fax: 801/363-1437
Email: fnelson@disabilitylawcenter.org
Web site: http://www.disabilitylawcenter.org

Vermont
Vermont Protection & Advocacy
141 Main Street - Suite 7
Montpelier, VT 05602
Virgin Islands
63 Estate Cane Carlton, Frederiksted
St. Croix U.S. Virgin Islands 00840
Phone: 340/772-1200; 340/776-4303; 340/772-4641 (TTY)
Fax: 340/772-0609
Email: via@viaccess.net
Web site: http://www.viaccess.net/

Virginia
Virginia Office for Protection & Advocacy
Ninth Street Office Bldg.
202 North 9th Street, 9th floor
Richmond, VA 23219
Phone: 804/225-2042 (Voice/TTY); 800/552-3962
Fax: 804/225-3221
Email: lawyerhl@vopa.state.va.us
Web site: http://www.vopa.state.va.us

Washington
Washington P&A System
180 West Dayton, Suite 102
Edmonds, WA 98020
Phone: 425/776-1199; 800/562-2702; (TTY); 800/905-0209
Fax: 425/776-0601
Email: wpas@wpas-rights.org
Web site: http://www.wpas-rights.org

West Virginia
West Virginia Advocates, Inc.
Litton Bldg, 4th Floor
1207 Quarrier Street
Charleston, WV 25301
Phone: 304/346-0847 (Voice/TTY); 800/950-5250
Fax: 304/346-0867
Email: Bpeck@ezwv.com
Web site: http://www.newwave.net/~wvadvocates

Wisconsin
Wisconsin Coalition for Advocacy
16 N. Carroll Street, Suite 400
Madison, WI 53703
Phone: 608/267-0214; 608/267-0214 TTD
Fax: 608/267-0368
Email: wcamsn@w-c-a.org
Web site: http://www.w-c-a.org

Wyoming
Wyoming P&A System
320 West 25th Street, 2nd Floor
Cheyenne, WY 82001
Phone: 307/638-7668; 307/632-3496; 800/821-3091 (Voice/TTY)
800/624-7648 (WY only)
Fax: 307/638-0815
Email: wypanda@vcn.com
Web site: http://www.vcn.com/~wypanda
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### ADA

Chapter 7 focuses on the Americans with Disabilities Act and includes these cross-references: Accommodation, Business, Compliance, Dissemination, Employment, Implementation, Information referral, Information resources, Needs assessment, Public accommodations, Service delivery, Technical Assistance, Telecommunications, Training, Transportation, and Utilization. Other references:
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Assistive technology
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Assistive technology, Advocacy, Consumers, Funding, Information resources, Information referral, Interagency cooperation, Needs assessment, Service delivery, Systems change, Technology assistance programs, and Training.
Other references:
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Rehabilitation Institute Research Corporation

Rehabilitation Institute Research Corporation

Rehabilitation Institute Research Corporation

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Rehabilitation Institute Research Corporation

Rhode Island Department of Human Services

RTI International

San Francisco State University

Santa Clara Valley Medical Center (SCVMC)

Santa Clara Valley Medical Center (SCVMC)

Sargent College

Science Applications International Corporation

Sendero Group, LLC

Shepherd Center, Inc.

Shepherd Center, Inc.

Smith-Kettlewell Eye Research Institute

Soft Touch/kidTECH, Inc.

Southwest Educational Development Laboratory

Spaulding Rehabilitation Hospital

SRI International

State of Iowa Department for the Blind

State of Maryland

State of Maryland Office of Individuals with Disabilities

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