

**EVALUATION RESULTS OF THE CLIMB TO  
EMPLOYMENT GRANT**

JANUARY 2004

PAMELA B. STAZESKY, PH.D., CO-EVALUATOR, DELAWARE  
EDUCATION RESEARCH AND DEVELOPMENT CENTER

MICHAEL GAMEL-McCORMICK, PH.D., CO-EVALUATOR  
WEI QIU, GRADUATE RESEARCH ASSISTANT  
MEIGHAN BAKER, GRADUATE RESEARCH ASSISTANT  
CENTER FOR DISABILITIES STUDIES



Delaware Education Research & Development Center  
University of Delaware  
Newark, DE 19716



## **About the *Center for Disabilities Studies***

The *Center for Disabilities Studies* at the University of Delaware is one of the 62 University Affiliated Programs Centers for Excellence in Developmental Disability Research Education and Service (UCD) in the United States. The *Center* was established in 1992 and works in conjunction with individuals with disabilities to better their lives. The *Center* staff and affiliated faculty teach both pre-service and in-service courses for teachers, social service workers, and other service providers working with individuals with disabilities and their families. The *Center* operates state-of-the-art programs and assists both public and private organizations in adopting the procedure developed to operate those programs. *Center* staff and affiliated faculty also serve on state and national policy boards and commissions that address housing, transportation, education, advocacy, child care, health care, and other service areas. *Center* staff also conduct program evaluations with programs serving individuals with disabilities and assist in policy development at both the local and state levels. The *Center for Disabilities Studies* is located in 166 Graham Hall at the University of Delaware in Newark. The Director of the Center is Dr. Michael Gamel-McCormick.

## **About The *Division of Vocational Rehabilitation***

The *Division of Vocational Rehabilitation* (DVR), a division of the Delaware Department of Labor, has essential partnerships with individuals with disabilities, advocates, and employers. DVR is a public program offered through the state of Delaware and helps people with physical and mental disabilities to obtain or retain employment. The mission of DVR is “to provide opportunities and resources to eligible individuals with disabilities, leading to success in employment and independent living.” The services offered to consumers from DVR include vocational assessment, employment planning, counseling and guidance, job placement, and job follow-up. Project CLIMB (Consortium Leadership and Independence through Managing Benefits) is offered through DVR to individuals who are working or interested in working and are receiving any type of public support benefits. The CLIMB program provides benefits counseling by trained Benefits Specialists. The counseling sessions include information on the impact of earnings on benefits, management of benefits when becoming employed, and reducing barriers to employment encountered by public support programs. DVR's commitment is to help people with disabilities increase their independence through employment. Andrea Guest is the Director of the Division.

## **About the *Delaware Education Research and Development Center***

The University of Delaware *Education Research and Development Center* provides the state with a developmental and inquiry capacity in support of efforts to reform educational policy and practice. The *R&D Center* currently partners with the Delaware Department of Education, U.S. Department of Education, National Science Foundation, as well as various private and charitable organizations. The mission of the *R&D Center* is “to be a major voice that informs education policy and practice.” The *R&D Center* addresses its mission through six areas of work: development work; data-based decision-making; studies, analyses, and publications; systemic reform evaluation; ad hoc evaluation support, and university support and service. The *R&D Center* acts as a link between the areas of educational research and practice. Dr. Audrey Noble is the Director of the *R&D Center*.

## TABLE OF CONTENTS

Executive Summary.....	iii
Introduction.....	1
Methodology.....	3
Findings.....	7
Benefits Counseling.....	7
General Perceptions.....	9
Understanding Regulations and Employment Requirements.....	10
Strengths of Benefits Counseling.....	12
Barriers to Employment.....	14
General Comments.....	21
Comparison of Employed and Unemployed Consumers.....	22
References.....	25
Appendix A.....	26
Figures of Data from Consumers Interviewed.....	27
Client Satisfaction Survey Results.....	56
Appendix B: Sample Instruments.....	58
Appendix C: Evaluation Plan.....	71
Acknowledgements.....	77

## EXECUTIVE SUMMARY

Interviews of Project CLIMB consumers, benefits counselors and Project CLIMB consortium members were conducted in order to determine the impact that the project is having related to benefits counseling for adults with disabilities. Staff of the Center for Disabilities Studies of the College of Human Services, Education, and Public Policy at the University of Delaware conducted 28 interviews with consumers from approximately 100 consumers who were contacted. In addition, four consortium members and benefits counselors were interviewed.

The content of the interviews conducted with the consumers included: household configuration, educational history, disability information, benefits currently being received, perception of Project CLIMB services, and perceptions of supports and barriers to employment. Benefits counselors and consortium members also were asked about Project CLIMB services and perceptions of supports and barriers to consumers' employment.

Findings of the interviews included:

- consumers indicated that benefits counselors were very helpful; they stated that the counselors were knowledgeable, friendly, organized, and follow-up with information and services when asked; of the strengths identified by the consumers, 30% of their comments mentioned the positive aspects of the benefits counselors;
- benefits counselors stated that the strengths of Project CLIMB included the confidentiality of the counseling; consortium members stated that the strengths of the project were linked to the positive characteristics of the benefits counselors;
- over 60% of the interviewed consumers reported that they better understood the rules and regulations related to employment; over 57% of the consumers reported that they better understood how becoming employed would affect the benefits they received;
- consumers' suggestions for improving Project CLIMB included adding more services to the project; the most common service requested by the interviewed consumers was having more benefits counselors available on a full-time basis;
- all of the benefits counselors interviewed stated that more staff was needed to enable the counselors to meet with more clients;
- consumers identified barriers to employment that were primarily personal barriers such as their own physical health and lack of specific job skills;
- consumers also stated that some of the barriers to employment consisted of systemic barriers such as availability of employment, lack of transition supports, and transportation;
- benefits counselors identified lack of job benefits as the primary barrier to employment; counselors felt that personal characteristics of consumers were a less important barrier but was still significant; and
- consortium members identified systemic barriers, including the availability of medical benefits, as the primary barriers to employment; they also mentioned personal barriers, including social and physical limitations.

The perceptions of consumers about barriers to employment indicate that they feel their personal characteristics and skills are the barrier while counselors and consortium members perceive that systemic issues are the primary barriers to employment.

The full report provides a detailed accounting of all evaluation results for the CLIMB to Employment grant, as well as recommendations for continued implementation of the CLIMB to Employment grant throughout Delaware. Researchers at the University of Delaware Education Research and Development Center (R&D Center) are available to answer questions regarding analyses presented in this report or to assist in their interpretation. R&D Center staff may be contacted via electronic mail at [ud-rdc@udel.edu](mailto:ud-rdc@udel.edu) or by phone at (302) 831-4433.

## INTRODUCTION

In the fall of 2002, the University of Delaware Education Research and Development Center in collaboration with the Center for Disabilities Studies accepted a contract to conduct a statewide evaluation of the recently awarded CLIMB to Employment grant. This project and its attendant evaluation are funded through the U.S. Department of Education's Rehabilitation Services Administration. The CLIMB to Employment project targets youth and adults with disabilities throughout Delaware by providing benefits counseling and household budgeting so that clients may gain a better understanding of how employment impacts state and federal benefits.

The purpose of the evaluation is to provide relevant information regarding the project implementation and its impact on youth and adults with disabilities for both project improvement and accountability purposes. In the CLIMB to Employment application submitted through the Delaware Division of Vocational Rehabilitation in 2002, the goals of the project included the following:

- ❑ To improve the ability of individuals with disabilities to make informed choices during the employment process; and
- ❑ To recommend changes to rules and regulations which have a negative impact on employment outcomes.

In addition, an overarching goal of the project is to improve the ability of individuals with disabilities to decrease their reliance on state or federal benefits and increase their reliance on employment income and live independently. Therefore, the primary focus of this evaluation is to provide information regarding how well the CLIMB to Employment project has met these three goals. The evaluation of the CLIMB to Employment Grant has proceeded along two lines of activity:

- formative evaluation to provide relevant information to the CLIMB Consortium and,
- impact studies to assess the impact of the initiative on clients as it relates to employment.

By May of 2003, 631 adults or youth with disabilities had been referred to the CLIMB to Employment project. These individuals spanned the entire state of Delaware. In Tables 1 – 4 demographic information (e.g., county, age, primary disability, and race) on these individuals with disabilities is presented.

Table 1. Participants by county.

LOCATION	PARTICIPANTS
New Castle County	54%
Kent County	22%
Sussex County	24%

Table 2. Participants by age.

<b>AGE*</b>	<b>CLIMB PARTICIPANTS</b>	<b>DELAWARE POPULATION (2000 CENSUS)</b>
20-24	7%	11%
25-34	17%	24%
35-44	30%	28%
45-54	34%	22%
55-59	8%	9%
60-64	5%	7%

\*There are also a few CLIMB participants outside of these age categories. There are eight participants between the ages of 17 and 19 and ten participants between the ages of 65 and 72.

Table 3. Participants by primary impairment.

<b>PRIMARY IMPAIRMENT</b>	<b>PARTICIPANTS</b>
Physical	58%
Cognitive	9%
Mental Health	33%



Table 4. Participants by race.

<b>RACE</b>	<b>CLIMB PARTICIPANTS</b>	<b>DELAWARE POPULATION (2000 CENSUS)</b>
White	58%	73%
Black or African American	42%	19%
American Indian or Alaska Native	0%	<1%
Asian	<1%	2%
Native Hawaiian or Other Pacific Islander	<1%	<1%
Hispanic or Latino	2%	5%
Bi-racial	<1%	2%

## METHODOLOGY

### THEORY-BASED EVALUATION

All projects are based on theories, although often unstated, of how and why they should "work" (Weiss, 1995). *Theory-based evaluation* provides a useful framework for formalizing the logic of the theories underlying a project and in guiding the determination of measurement points during the evaluation (Aronson, Mutchler, & Pan, 1998). Examining the theories on which a project is based aids in determining what evaluation data should be collected as well as when during the project lifecycle the data should be collected. However, evaluative data cannot be interpreted in isolation without also examining how the project was implemented. For example, if an evaluation reveals that client outcomes did not improve, it would be incorrect to automatically assume that the theories underlying the project should be rejected. Rather, the project's implementation should be examined to determine if the implementation was congruent with the hypothesized theories underlying the project. On the other hand, if client outcomes did improve, it is equally as important to postpone acceptance of the underlying theories until sufficient implementation has been verified.

The overarching goal of CLIMB to Employment Grant is to increase dependence on employment earnings and decrease dependence on state and federal benefits. Theory-based evaluation methods are used to document why project staff believes this intervention will result in a decrease in dependence on state and federal benefits and to specify what data must be collected during the evaluation lifecycle to determine if intervention results support these theories. The critical theory behind this project is that through benefits counseling and household budget training as well as through the elimination of system disincentives, clients' dependence on state and federal benefits

will decline. With this theory in mind, data elements were identified that would aid in determining if the theories were acceptable. Figure 1 shows an abbreviated theory-based outcome grid for the CLIMB to Employment project.

Early Results	Intermediate Results	Long-Term Results
<ul style="list-style-type: none"> <li>➤ Benefits counseling provided</li> <li>➤ Household budget training provided</li> <li>➤ Identification of federal or state policies that hinder clients from achieving economic stability</li> </ul>	<ul style="list-style-type: none"> <li>➤ Improved understanding of the impact of employment on state and federal benefits policies</li> <li>➤ Establishment of programs that address disincentives to employment</li> </ul>	<ul style="list-style-type: none"> <li>➤ Increased number of clients achieving economic stability (with as little public support as possible)</li> <li>➤ Fewer state or federal policies that hinder clients from achieving economic stability</li> </ul>

**Figure 1: Theory-Based Evaluation Outcome Grid**

#### EVALUATION DESIGN

The implementation of the CLIMB to Employment grant was evaluated to identify, to the extent possible, what aspects of the grant are useful. The evaluation study addressed the following evaluation questions:

1. Impact of Individuals with Disabilities

To what degree is the CLIMB to Employment Program providing clients with the knowledge to make wise financial decision regarding employment and household budgeting?

To what degree are consumers seeking, obtaining, and retaining employment?

2. Impact on State and Federal Policies and Practices

What is the current status of state and federal policies on the ability of individuals with disabilities to become employed, stayed employed, and to live independently?

What is the impact of the creation of a Benefits Consortium and Consumer Advisory Board on state and federal policies affecting the ability of individuals with disabilities to become employed, stay employed, and to live independently?

This evaluation utilized three different methodologies: client satisfaction surveys, interviews, and analysis of existing data. Data collection for the evaluation of the CLIMB to Employment began in December of 2002 with the collection of data using a client satisfaction survey. This survey was created by a sub-committee of the CLIMB Consortium and distributed to each CLIMB participant

by one of the four Benefits Counselors. Along with a copy of the survey, each CLIMB participant was provided with a self-addressed stamped envelope to return the completed survey directly to the evaluation team at the University of Delaware.

In addition to the client satisfaction survey, the evaluation team conducted an initial analysis in the summer of 2003 of the existing CLIMB database to identify any difference between employed and unemployed participants. Several demographic variables (e.g., race, gender, marital status, primary disability) as well as other variables (e.g., type of state and federal benefits received, barriers to employment) were explored.

During the summer and into the fall of 2003, consumers, benefits counselors and consortium members involved with the Division of Vocational Rehabilitation Project CLIMB services were interviewed to determine the impact that the program was having on consumers and their perceptions of the barriers to employment. Twenty-eight consumers, Project CLIMB benefits counselors, and four Project CLIMB consortium members were interviewed.

The consumers interviewed were from throughout the state and represented a variety of disabilities. Slightly more women than men were interviewed. The average age of the consumers was late 30s to mid-40s. The specific disabilities of the consumers included physical, cognitive, and mental health disabilities. For specifics on the backgrounds of the consumers interviewed see Tables 5-7 on the next two pages.

Table 5. Gender, age, and primary disability of interviewed consumers.

<b>Demographics by Gender</b>			
	<b>Gender</b>	<b>Average Age</b>	<b>Primary Disability</b>
Female	53.57%	44	Bipolar Disorder (26.67%)
Male	46.43%	37	Depression and Hypertension (30.77%)
Female and Male	100.00%	41	Bipolar Disorder and Depression (28.57%)

Table 6. Female consumers interviewed and specific disability.

<b>Female</b>		
<b>Disability</b>	<b>Number of Cases</b>	<b>Percentage</b>
Bipolar Disorder	4	26.67%
Depression	2	13.33%
Mental Retardation	2	13.33%
ADD/dyslexia	1	6.67%
Cerebral Palsy	1	6.67%
Herniated disk	1	6.67%
Knee replacement	1	6.67%
LD/dyslexia	1	6.67%
Polymyocitis	1	6.67%
Retinitis Pigmentosis	1	6.67%

Table 7. Male consumers interviewed and specific disability.

<b>Male</b>		
<b>Disability</b>	<b>Number of Cases</b>	<b>Percentage</b>
Depression	2	15.38%
Hypertension	2	15.38%
Back problem	1	7.69%
Complete Quadriplegia	1	7.69%
Cerebral Palsy	1	7.69%
Down Syndrome	1	7.69%
Dwarfism-severe	1	7.69%
Left-sided brain injury	1	7.69%
Mental Retardation	1	7.69%
Sarcoidosis	1	7.69%
Stroke	1	7.69%

For more information on the demographic backgrounds of the consumers interviewed, including education level, household configuration, and household income, please see Figures 1-13 in Appendix A. Samples of the instruments used for data collection are included in Appendix B. The CLIMB to Employment project evaluation plan is included in Appendix C. Results from each aspect of the evaluation are discussed in the following section.

## FINDINGS

### INTRODUCTION

In this section the results across all methodologies are presented and organized around seven major themes: a) benefits counseling, b) general perceptions of clients, benefits specialists, and consortium members, c) understanding regulations and employment requirements, d) strengths of benefits counseling, e) barriers to employment, f) general comments, and g) comparison of employed and unemployed consumers. The summary of the interviews with consumers identifies, from their perspectives, benefits that the consumers received from Project CLIMB and barriers that they feel remain in place regarding employment. Similar summaries are included from the points of view of benefits counselors and Project CLIMB consortium members.

### Benefits Counseling – Perceptions of Consumers, Benefits Specialists, and Consortium Members

As of the end of September, 169 consumers returned a completed client satisfaction survey to the evaluation team at the University of Delaware.

Table 8. Percent of completed surveys by office location.

Wilmington	26%
Dover	20%
Pencader	45%
Georgetown	10%

Most consumers (87%) described their level of satisfaction as very high. In addition, nearly all would recommend benefits counseling to others (97%).

The consumers interviewed were overwhelmingly positive about the services they have received from Project CLIMB and were especially positive about the Project CLIMB benefits counselors. What follows is a summary of the benefits perceived by the consumers interviewed.

When asked what services and supports they received from Project CLIMB, *all* of the interviewed consumers mentioned specific information and services they received from the benefits counselors. The consumers were often specific about the services they received from the counselors, noting the information provided to them about SSI/SSDI, employee rights under ADA, and job search assistance. Five of the consumers (17%) interviewed could not specifically remember Project CLIMB but did remember their benefits counselors and were able to describe specific services provided by Project CLIMB.

Comments about specific Project CLIMB benefits counselors included statements from consumers such as:

- “Excellent program...the counselor was very helpful;”
- “She helped me get a job.”
- “She helped me apply for SSDI and understand what happens when I get a job.”

The consumers interviewed also highlighted skills of the benefits counselors. The words they used to describe the counselors’ behaviors and characteristics included: friendly, personable, knowledgeable, organized, and encouraging. The consumers also said that the counselors followed-through with promises and provided guidance. In addition to identifying these characteristics about the counselors, the consumers were especially appreciative about these characteristics and conveyed that it was a pleasant experience to work with the counselors.

The only critical comments made about Project CLIMB were included during an interview with the parents of a consumer. The consumer, who was not present during the interview, lives in the parents’ household. The consumer’s parents had attended the benefits counseling on behalf of their adult child. The parents indicated that during the benefits counseling they were unable to receive answers to all of their questions. Specifically, they stated that “the counseling was primarily to find out what would happen to [our child’s] benefits when one of us went on social security. That answer was not clear.” The parents also indicated that the timing during which they received the counseling was not appropriate because, at the time of counseling, their son was not employed. They also expressed frustration with other services not connected to Project CLIMB, including housing and transportation.

All of the consumers who were interviewed stated that they were satisfied with the services that they had received through Project CLIMB and indicated that the benefits counselors had provided the information in terms that the consumers were able to understand.

The benefits counselors interviewed were also overwhelmingly positive about Project CLIMB. What follows is a summary of the services as perceived by the benefits counselors interviewed.

When asked what services and supports were received by their clients from Project CLIMB, the counselors mentioned that they had provided information on the impact of work upon benefits in addition to providing assistance in areas such as reporting income to SSI, employment, budgeting, and overall encouragement.

Comments about the Project CLIMB services from the benefits counselors included statements from the counselors such as:

- "...this is very necessary and the number of people we see validates that"
- "In the past year and a half, I have seen a big impact on how we've impacted the ability of disabled people to work and the realization that they can work."

The consortium members interviewed were able to provide an overall perspective about Project CLIMB services due to their oversight involvement with the project. As a result, the consortium members interviewed were able to provide information on the role that benefits counselors and consumers play in the delivery and receipt of CLIMB services. When asked about the services and supports that consumers receive from Project CLIMB, the consortium members mentioned such phrases as "benefits counseling", "educational sessions", and "group presentations". All consortium members interviewed also mentioned that consumers receive information about how going to work will effect the benefits they receive.

### General Perceptions of the CLIMB Project

A majority of the consumers interviewed reported that they understood the services and supports that they received from Project CLIMB. Of the 28 consumers interviewed, over 60% (n=17) reported understanding the relationship of Project CLIMB to the various state and federal benefits programs. In addition, over 57% (n=16) reported having a better understanding of how becoming employed would effect the benefits they received. There were, however, a significant minority of the consumers (32%, n=9) who did not specifically remember receiving services from Project CLIMB or that the project was a separate service of the Division of Vocational Rehabilitation.

Those consumers who had a clear understanding of Project CLIMB as a specific set of services from the Division of Vocational Rehabilitation had a very positive opinion of the project. They stated that the project was "an excellent program" or that "they helped me understand about working." No negative comments were made by consumers about the project.

In addition, none of the counselors interviewed had any negative comments about Project CLIMB. In fact, one counselor stated, “this is the greatest job I’ve ever had.” The counselors who were interviewed stated that, after counseling, consumers had a good understanding of the information about benefits and employment. Specifically, counselors mentioned that consumers received more specific information about the impact of work on benefits and that the majority of consumers have more understanding of the general guidelines after counseling.

When asked how consumers could gain access to the services from Project CLIMB, all of the counselors interviewed mentioned referrals, both from agencies and from DVR, and workshops provided to agencies and the general community. In addition to referrals and workshops, the counselors mentioned that consumers could learn about CLIMB at a DVR orientation and via word of mouth.

All of the consortium members interviewed stated that, after benefits counseling, consumers have a better understanding of how becoming employed affects the benefits they receive.

When asked about how consumers could gain access to the services from Project CLIMB, all consortium members interviewed mentioned that consumers are referred to the services from various sources. The referral sources mentioned included agencies, case managers, counselors, doctors, program directors, the Opportunity Center, Inc. (OCI), and the Division of Vocational Rehabilitation (DVR).

### Understanding Regulations and Employment Requirements

Although the consumers reported very positive relationships with the Benefits Counselors, and a positive opinion about Project CLIMB overall, they were divided about their ability to understand the relationship between employment and benefits. Approximately 61% of the consumers interviewed (n=17) reported that they better understood the rules and regulations related to employment and retaining their benefits such as Medicaid and SSDI. Many of these consumers stated specifically that they better understood the regulations. Representative comments included statements such as:

- “...she [the Project CLIMB benefits counselor] explained it in a way that I could understand it”
- “...she informed me of a lot of things that aren’t common knowledge”
- “I understood better about making money and getting a job”
- “I learned exactly how much I can make before losing benefits.”
- “I learned about pay ceilings and pay increases.”
- “I have less fear now about losing my SSI benefits.”

A 39% minority of consumers interviewed reported that they did not understand the requirements related to working. When asked if they better understood the requirements related to employment and the impact it could have on their benefits,



they generally stated that they did not remember very much of the counseling or that they did not understand the requirements.

The benefits counselors were very positive about the ability of consumers to understand the regulations of benefits programs and the relationship between employment and benefits. All of the counselors stated that, after counseling, consumers have a better understanding of the benefits structure, more awareness of benefits information, and more specific information on the impact of working. Specifically, one counselor stressed that few consumers understand all of the rules and regulations, but that the majority of consumers have more understanding of the general guidelines after counseling. Overall, the counselors seemed to indicate that consumers appreciate having the information broken down into steps that they can understand. Comments from the counselors included:

- “[Consumers are] more aware and less overwhelmed by benefits information...one [consumer] responded by saying, ‘Why didn’t anyone tell me this before?’”
- “The majority realize they can improve their standard of living without the fear of losing benefits and people realize that they have more options than they originally realized”
- “Clients get more specific information on the impact of working.”

In addition, one counselor mentioned that consumers often need ongoing counseling. Specifically, she mentioned that she counseled consumers to give her a call when they got a job and when they got their first paycheck. This is a demonstration of the willingness of the counselors to maintain contact with consumers after counseling.

The consortium members were very positive about the ability of consumers to understand how becoming employed affects the benefits they receive. The comments of the consortium members included:

- “Counseling helps them [consumers] to understand they can work and keep some benefits.”
- “They [consumers] are definitely better off as far as being motivated to work after the counseling.”

However, when the consortium members interviewed were asked if consumers had a better understanding of the requirements of the various state and federal benefits programs, the consortium members were unsure. One consortium member stated that it “may not be relevant for clients to understand this” and “that’s hard for anyone to understand.” Overall, the consortium members interviewed indicated that it was more important for consumers gain an overall understanding of the impact of work upon their benefits rather than gaining an understanding of regulatory policies.

Strengths of Benefits Counseling

A number of consumers interviewed stated specifically that Project CLIMB gave them an avenue to ask questions about their employment and their benefits. Three consumers specifically stated that they called their Project CLIMB benefits counselors to ask specific questions about their jobs, pay rates, wage raises, and promotions. One consumer said, “I was able to call [my benefits counselor] and ask the questions I needed to ask. She helped me understand.” While not mentioned by all consumers who were interviewed, having a mechanism to contact a benefits counselor about employment and benefits issues was important to a number of those interviewed. For specifics on the major strengths of the counseling and the major suggestions for improvement made by the consumers, see Table 9 below.

Table 9. Counseling Strengths and Suggestions for Improvement

Strengths of Benefits Counseling	Suggestions for Improvement
<ul style="list-style-type: none"> <li>• benefits counselors are friendly, personable, knowledgeable, organized, and they follow-up</li> <li>• explanation of the information in terms I can understand</li> <li>• learned how much money I can make before I lose my benefits</li> <li>• private setting</li> <li>• counselor could look up the specific policies and regulations for my benefits</li> </ul>	<ul style="list-style-type: none"> <li>• clearer explanations need to be given during counseling</li> <li>• meet with counselors more than once</li> <li>• have more counselors in DVR available on full time basis</li> <li>• make program more public and more accessible to individuals with disabilities</li> <li>• increased follow-up with clients after initial meeting</li> <li>• meet with counselors once you have a job</li> </ul>

When discussing the strengths of the benefits counseling, the counselors stated that confidentiality was important to their clients. Specifically, one counselor stated:

- “The biggest strength is that we don’t work for SSI or one of the public support agencies...so when people meet with us people feel they can be completely honest with us.”

The accessibility of the benefits counselors and their willingness to listen to consumers were also cited by the counselors as being strengths of the counseling. One counselor specifically mentioned that the benefits counselors’ qualities, such as being compassionate, good listeners, and courteous, were strengths of the

counseling. One of the counselors interviewed also mentioned that the summary letter that is mailed to consumers following counseling is an important piece because it breaks down the effect of income on benefits. In terms of how the counseling could be improved, all of the benefits counselors stated that more support staff were needed to enable the counselors to meet with more consumers.

Table 10. Interviewed Benefits Counselors’ Summary of Strengths of Benefit Counseling and Suggestions for Improvement

<b>Project CLIMB Strengths</b>	<b>Suggestions For Improvement</b>
<ul style="list-style-type: none"> <li>• clients feel that they can share all information without the fear that it may impact upon them negatively</li> <li>• benefits counselors do not work for one of the public support agencies</li> <li>• realization by consumers that they can return to work and improve their standard of living</li> <li>• specialists are compassionate, good listeners, and courteous</li> <li>• summary letter sent to client following meeting</li> </ul>	<ul style="list-style-type: none"> <li>• more staff support to enable us to meet with more consumers</li> <li>• no improvement needed</li> </ul>

When discussing the strengths of the benefits counseling, the consortium members mentioned that the benefits counseling provided comprehensive, comforting, and in-depth information. One consortium member stated that Project CLIMB services provided a “one-stop place to gain understanding” for consumers to acquire understanding and that “there’s nowhere else they [consumers] can go to get all the information they get from benefits counselors.” Also, the ways in which the benefits counselors interact with consumers were mentioned as being key strengths. One example is this statement:

- “Benefits counselors are very knowledgeable and interact well with clients. Clients feel comfortable and feel that counselors are guiding them in the right way. Clients remember counselor’s names; something good is happening.”

When asked about ways in which the benefits counseling could be improved, the main theme that emerged from the comments of the consortium members was that

there needs to be increased follow-up that is long term in nature. In addition, more outreach, more funding, increased organization of group presentations, and more training of staff were mentioned as suggestion for improving Project CLIMB.

One consortium member suggested that the counseling could be better if there were more of a direct relationship between Project CLIMB and the entitlement services such as SSI and Medicaid. In contrast, the benefits counselors interviewed stated that a strength of the project was that they did not work directly for an entitlement service. The benefits counselors interviewed stated that because of their autonomy consumers felt comfortable sharing information without the fear that it would be reported to an agency and impact upon them negatively.

Table 11. Consortium Members' Summary of Strengths of Benefit Counseling and Suggestions for Improvement

Project CLIMB Strengths	Suggestions For Improvement
<ul style="list-style-type: none"> <li>• knowledgeable counselors</li> <li>• counseling helps consumers to understand that they can work and still keep some benefits</li> <li>• consumers feel comfortable with the counselors</li> <li>• provides consumers with a motivation to work</li> </ul>	<ul style="list-style-type: none"> <li>• long-term follow-up with consumers to assess impact of counseling</li> <li>• development of an agenda for group presentations</li> <li>• more of a direct relationship between CLIMB and entitlement services</li> <li>• more outreach</li> <li>• increased staff training</li> <li>• more funding</li> </ul>

### Barriers to Employment

In analyzing the existing CLIMB database, barriers to employment were examined to determine if any patterns existed between those consumers who were employed as those who were not employed. This analysis clearly shows that the loss of medical coverage is the number one barrier to both groups of consumers as listed in Table 12. While about half of the consumers (48%) identified one barrier, a few (16%) identified at least three different barriers.

Table 12. Number of consumers reporting specific barriers to employment by employment classification.

Work Status	Barriers to Employment*								
Loss of Medical Coverage	Non-coverage of essential services	Disincentives	SSA problems monitoring TWP/paperwork requirements	Low income limits/thresholds	Inadequate Publicity	Confusing Regulations	Transportation	Other	
Employed	65%	23%	0%	12%	13%	2%	10%	2%	40%
Unemployed	57%	26%	2%	9%	9%	<1%	4%	9%	53%

\* Rows total to more than 100% due to participants identifying more than one barrier to employment.

When discussing continued barriers to employment, the individuals interviewed identified barriers that were from two categories: personal and systemic. What follows is a summary of those barriers.

**Personal Barriers** Consumers identified personal characteristics that limited their ability to search for and retain jobs. These personal characteristics included needing more training in a content area (e.g., technology, bookkeeping), additional education (e.g., college courses), or a general set of employment skills (e.g. interviewing skills, job coaching). Several consumers also stated that they have difficulty in finding a job for which they are both qualified and enjoy doing. Consumers also identified interpersonal skills that they felt limited their ability to retain jobs. These included such skills as methods for reducing stress, skills for interacting with co-workers, and conflict management.

Consumers also identified a number of personal barriers directly related to their disabilities. Many of the consumers who had physical disabilities reported that it was difficult to find employers who would accommodate their disabilities with adapted physical space (e.g. desks and chairs) and adapted responsibilities. Learning to cope with the side effects of medications was also mentioned by consumers as a barrier to employment.

One consumer stated that she would like to see a job mentor program that would support an individual in a job and follow-up with her about how a job was proceeding. She felt that being placed in a job was not the difficult part for her, but that the unanticipated problems that arise after she has been in the position are the stumbling blocks for her. She felt that a mentor could help her problem-solve difficult interpersonal situations that would allow her to retain a position.

Counselors had far fewer comments about personal barriers to employment for consumers. The personal characteristics that were identified included the need for increased skills and the need for jobs that consumers want. Also mentioned by the counselors was that consumers need to have a willingness to work and a strong work ethic.

Counselors did mention physical limitations and physical accommodations as a barrier to employment for some consumers. Specifically, one counselor stated that the physical problems that impact on stamina affect the ability of consumers to retain a position.

The consortium members had many comments about personal barriers that limit the motivation of consumers to work. Specifically, consortium members listed having a support system in place and the self-motivation of consumers as being key factors in employment success. The statements of consortium members on personal barriers included:

- “support from all areas, from families, counselors, job coaches, they need emotional support and transportation”
- “their desire to work, motivation to work”

Another area in personal barriers that was listed by the consortium members included self-esteem. The comments of one consortium member included, “people with low self-esteem and self-worth are difficult to motivate. Building up self-esteem and self-worth results in success. People need to believe in themselves.”

In addition, social and physical limitations that consumers face, including socialization problems at work and mental illness were listed as personal barriers. One consortium member also stated that regular treatment of their disability would help consumers to be permanently employed.

**Systemic Barriers** Consumers had far fewer comments about the systemic barriers that limited their abilities to be employed. The most frequently mentioned barrier to employment was transportation. Those interviewed mentioned the unreliability of public transportation, the inaccessibility of public transportation and the unreliability of DAST (para-transit) services.

Also mentioned by the consumers was the difficulty in finding employment that was not minimum wage and service related. Many of those interviewed expressed a desire to work in jobs that would provide benefits and allow them not to be dependent upon Medicaid, SSI, or SSDI. However, they cited that entry level positions do not provide benefits. The perception of many of the consumers was that they could work and maintain their government benefits, especially those related to health care, but that there would come a time when they would make too much money to retain those benefits yet not make enough to pay for those benefits out of pocket, nor be in a job that provided those benefits.

A final systemic issue identified by the consumers was their perception of employers. Many of the consumers, particularly those with physical disabilities, reported that employers did not view them as viable employees. While they did not mention specific instances of discrimination, the consumers shared their perception that employers did not wish to hire persons with disabilities and especially did not wish to provide accommodations for persons with disabilities. Individual consumers were very detailed in describing the accommodations they would need to work in specific environments. They often stated that employers did not want or could not provide those accommodations. Examples included such accommodations as standing when working instead of sitting; having a sit-down job; breaks every 30 minutes; desks that are different heights; adapted chairs, and adapted bathroom facilities.

The benefits counselors interviewed noted numerous systemic barriers to employment that are faced by consumers. These barriers included lack of medical benefits, lack of prescription coverage, and lack of work incentives. All of the benefits counselors interviewed noted that the lack of availability of medical benefits through employers has presented a barrier to employment for consumers. The counselors stated that many of their clients work part-time and that their jobs do not include a benefits package. For consumers who do work full-time, their jobs frequently do not come with benefits. The counselors also mentioned that returning to work often places consumers' income above the Medicaid limit and, as a result, they can lose their medical benefits. All of the counselors interviewed also noted that the high cost of medications coupled with the fear of losing prescription insurance dissuades consumers from pursuing employment. One of the counselors interviewed stated:

- “I have one client who has Multiple Sclerosis (MS) and his medications cost over \$1,000 per month and he was receiving Medicaid before returning to work. But by returning to work he was \$50 over the Medicaid limit so he lost the coverage. When we called [an organization] to see if he could get any support they said, ‘tell him to quit his job.’”

A final systemic issue mentioned by the benefits counselors was the lack of work incentives available to encourage consumers to work. All of the counselors interviewed stated that the public support benefits should be more transitional rather than being taken away immediately after a consumer is over the income limit. One counselor suggested that a possible work incentive could be that consumers retain their benefits during a trial work period. Also, it was noted that the process of having to reapply for benefits after a job loss can be a deterrent to seeking employment. In addition, better understanding from employers and the availability of more jobs were noted as suggestions for providing work incentives to consumers.

The consortium members interviewed noted numerous systemic barriers to employment that consumers face. These barriers included fear of loss of benefits, transportation, lack of universal medical insurance, increasing rent rates as a result of employment, and a lack of transition periods for working and retaining benefits. All of the consortium members mentioned systemic factors as providing barriers to employment for consumers. The two main systemic barriers identified by consortium members were barriers to benefits and barriers due to transportation. Specifically, consortium members interviewed stated:

- “The way things are now, it is not necessarily in the best interest of the individual to be employed due to potential loss of benefits. It’s a shame when people want to work.”
- “transportation is [the] number one [barrier]”



One consortium member also mentioned barriers due to a lack of work incentives and a lack of transition periods during which consumers can be employed and retain benefits.

- “It would be helpful to give mental health clients a work period where clients can keep entitlements, work incentives, keep rent rates from rising.”

The barrier faced by consumers of finding jobs that offer benefits was also touched on. One consortium member pointed out that a barrier exists in “finding a job that would get them up to the level of benefits; if they’re working a minimum wage job it’s going to be tough to get benefits.” Overall, all of the consortium members indicated that systemic changes need to take place in order to increase the availability of benefits and to increase the availability of transportation.

Table 13. Summary of Project CLIMB Services and Continued Barriers to Employment as Reported by Interviewed Consumers

Project CLIMB Services	Continued Employment Barriers
<ul style="list-style-type: none"> <li>• strong relationships with project Benefits Counselors</li> <li>• Benefits Counselors have very good interpersonal skills and abilities</li> <li>• strong specific skills of the Benefits Counselors</li> <li>• positive opinion of Project CLIMB and its services</li> <li>• Benefits Counselors who could be re-contacted about employment and benefits questions</li> </ul>	<ul style="list-style-type: none"> <li>• need for specific content training or development of specific skill set</li> <li>• lack of education on a college level</li> <li>• need to develop specific interpersonal employment related skills</li> <li>• minimum wage/service oriented positions</li> <li>• transportation</li> <li>• employer attitudes</li> <li>• lack of accommodations at employment sites</li> </ul>

Table 14. Summary of Project CLIMB Services and Continued Barriers to Employment as Reported by Interviewed Benefits Counselors

<b>Project CLIMB Services</b>	<b>Continued Employment Barriers</b>
<ul style="list-style-type: none"> <li>• counselors explain the rules of the different public support benefits</li> <li>• consumers get more specific information on the impact of working</li> <li>• counselors break information into small steps for consumers</li> <li>• consumers feel that they can share all information without the fear that it may impact upon them negatively</li> <li>• benefits counselors who are compassionate, good listeners, and courteous</li> </ul>	<ul style="list-style-type: none"> <li>• most of consumer’s jobs do not come with benefits</li> <li>• lack of prescription assistance</li> <li>• public support benefits need to be more transitional</li> <li>• process of reapplying for benefits if individual loses job</li> <li>• impact of physical limitations of stamina</li> <li>• better understanding from employers</li> </ul>

Table 15. Summary of Project CLIMB Services and Continued Barriers to Employment as Reported by Interviewed Consortium Members

<b>Project CLIMB Services</b>	<b>Continued Employment Barriers</b>
<ul style="list-style-type: none"> <li>• consumers get a full understanding about the impact of benefits and work</li> <li>• knowledgeable counselors</li> <li>• clients feel comfortable with the counselors</li> <li>• educating clients on how to report income</li> <li>• motivation to work</li> </ul>	<ul style="list-style-type: none"> <li>• fear of loss of benefits</li> <li>• transportation</li> <li>• lack of work period transition time where clients can keep their entitlements</li> <li>• lack of support systems</li> <li>• lack of motivation to work</li> <li>• low self-esteem</li> </ul>

## General Comments

The consumers interviewed did have one additional set of comments about the project. Many of the consumers stated that they felt that the project should be better advertised among the disability community. One consumer specifically stated “CLIMB needs to be out there. We need this service.”

The benefits counselors interviewed also had an additional set of comments about the project. All of the counselors interviewed indicated that they have a high level of job satisfaction. Their statements included:

- “I love what I do...this is very necessary and the number of people we see validates that.”
- “I’ve had a lot of people who, after meeting with me, have at least attempted to return to work.”

In addition, the consortium members interviewed did have one additional set of comments about the project. One consortium members stated that being on the consortium and the sub-committees had been a lot of work and suggested that the responsibilities of the consortium and sub-committee be separated in the future. Another consortium member stated that many of the barriers to employment were systemic items that needed to be changed at the federal level. In addition, the consortium members had the following comments about Project CLIMB:

- “would like to see more people get involved; more counseling”
- “would hate to see this program go away; would be a disservice to people; should be part of core services...they should look at commingling of funds from different sources to fund this program”

A number of the consumers interviewed talked about the relationship of work to the other components of their lives. For these consumers, there was a general attitude that work was one part of their lives and that they needed other activities and relationships in their lives. One consumer talked about the importance of her church relationships, another about her choir activities. Another consumer stated that she liked the interpersonal aspect of her employment and wanted to make sure that this continued outside of work. Also, one consumer mentioned that more group homes and more afternoon activities are needed.

Finally, a significant minority of the consumers interviewed mentioned that they wanted the general public and especially casual acquaintances to see them for the individuals they were instead of their disabilities. They also mentioned that they felt that both the general public and service providers often did not understand their

disabilities. One consumer mentioned how grateful he was for a counselor who understood his disability and was able to help him communicate it to other agencies.

### Comparison of Employed and Unemployed Consumers

In the CLIMB database from May 2003, about one-fourth of the consumers were employed. Of the remaining consumers, two groups within the category of unemployed were removed for these analyses. These groups of consumers were removed for two reasons. First, the small size of these groups makes generalizations to a larger population difficult. Second, it is not uncommon for individuals in these two categories to choose to be unemployed. The first group removed (n=5) were those who described him- or herself as a caregiver, stay-at-home parent, or homemaker. In addition, those who were unemployed but also participating in a training or educational program (n=31) were removed.

By examining the relationship between employment classification (employed or unemployed), it appears there are few differences based on many demographic variables. For example, as identified in Tables 16 - 20, the distribution of individuals who are employed looks very similar to the distribution of individuals who are unemployed. Therefore, one can conclude that these variables do not explain why some individuals are employed and others are not. This is evidence that variables such as gender, primary impairment, and county do not seem to explain why some consumers are employed and others are unemployed.

Table 16. Gender of consumer by employment classification.

Work Status	Gender	
	Male	Female
Employed (n=152)	55%	45%
Unemployed (n=409)	50%	50%

Table 17. Primary impairment category of consumer by employment classification.

Work Status	Primary Impairment Category			
	Visual/Auditory	Other Physical	Cognitive	Mental Health
Employed (n=141)	9%	45%	12%	34%
Unemployed (n=365)	6%	53%	8%	33%

Table 18. Location of consumer's residence by employment classification.

Work Status	Location of Residence			
	New Castle County (not including Wilmington)	Kent County	Sussex County	Wilmington
Employed (n=152)	20%	24%	29%	27%
Unemployed (n=410)	27%	20%	25%	28%

There is some evidence that age and marital status may explain some of the differences. For example, those consumers who have remained single (never married) are more likely to be employed than those who are married. In addition, age seems to also make a difference. For example, as shown in Table 20, those over the age of 45 are less likely to be employed than those under the age of 45. These trends, however, are not unique to individuals with disabilities.

Table 19. Marital status of consumer by employment classification.

Work Status	Marital Status			
	Divorced/ Separated	Married	Never Married	Widowed
Employed (n=133)	25%	11%	61%	2%
Unemployed (n=349)	27%	24%	46%	3%

Table 20. Age of consumer by employment classification.

Work Status	Age		
	18-30	31-45	46+
Employed (n=153)	20%	49%	31%
Unemployed (n=413)	14%	40%	46%

## SUMMARY OF PERSPECTIVES OF PROJECT CLIMB SERVICES AND BARRIERS TO EMPLOYMENT

The three groups interviewed for this evaluation, consumers, benefits counselors, and consortium members, overwhelmingly stated that they felt Project CLIMB was benefiting the consumers who have received services. In particular, from consumer perspectives, Project CLIMB benefits counselors are very valuable and effective in their ability to communicate the impact that employment will have on consumers' medical, health, and prescription benefits as well as non-medical related benefits such as SSI and housing support eligibility. It is clear that these three stakeholder groups feel that the benefits counseling has accomplished its goal of communicating the effects of employment for consumers receiving disability benefits.

The three groups did, however, disagree on some of the continued barriers to employment for persons with disabilities. The consumers clearly felt that personal characteristics were significant barriers to employment. Their personal job skills, coping strategies and interpersonal skills were identified as barriers. Benefits counselors and consortium members, however, focused on systemic barriers as reasons why persons with disabilities continue to be under- or unemployed.

## REFERENCES

Aronson, S. R., Mutchler, S. E., & Pan, D. T. (1998). Theories of change: Making programs accountable and making sense of program accountability. Austin, TX: Southwest Educational Development Laboratory.

Evan, D. L., Price, J. L., & Barron, W. G. (2001). Profiles of General Demographic Characteristics: 2000 Census of Population and Housing. Washington, DC: U.S. Department of Commerce.

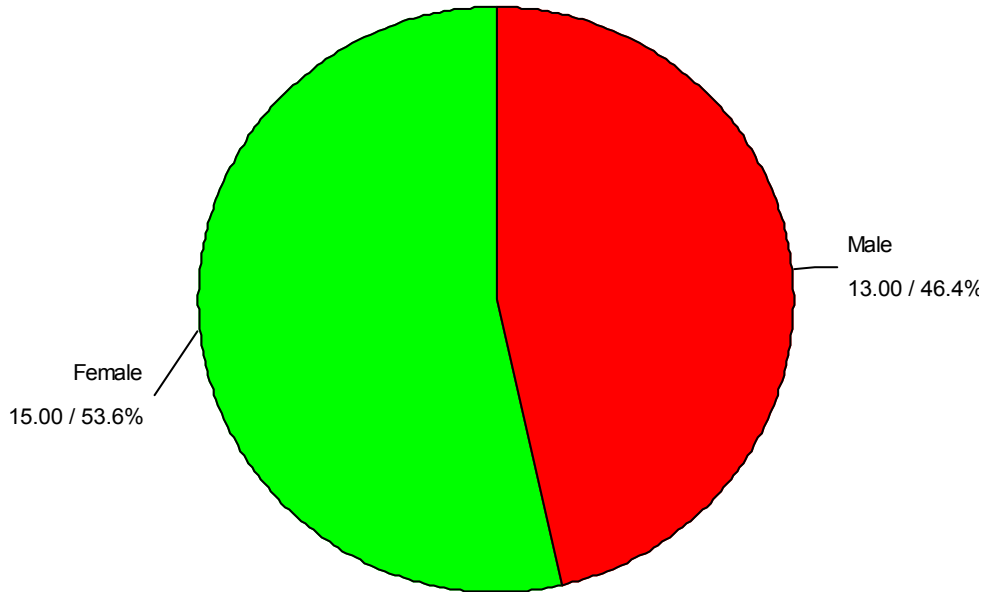
Weiss, C. H. (1995). Nothing as practical as good theory: Exploring theory-based evaluation for comprehensive community initiatives for children and families. In J. P. Connell, A. C. Kubisch, L. B. Schorr, & C. H. Weiss (eds.), New approaches to evaluation community initiatives: Concepts, methods, and contexts. Report by the Roundtable of Comprehensive Community Initiatives for Children and Families. Washington, DC: The Aspen Institute.

**APPENDIX A:**

**FIGURES OF DATA FROM CONSUMERS INTERVIEWED**



Figure 1. Consumer Gender



**Figure 2. Consumer Location**

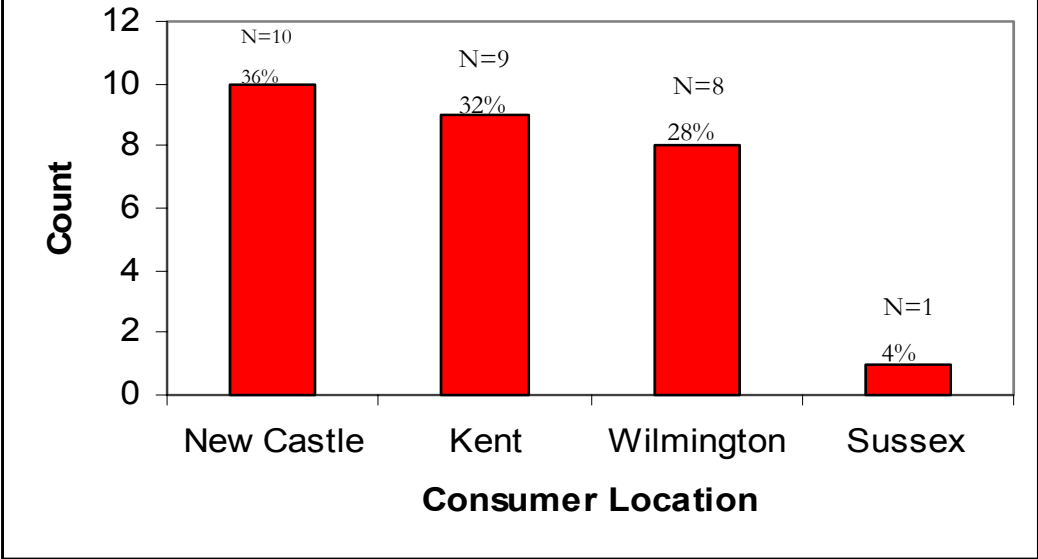
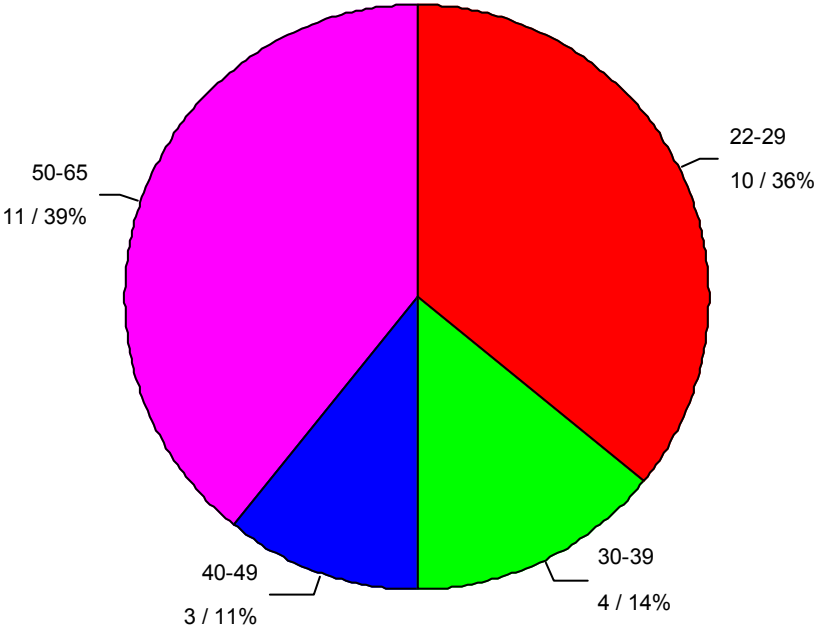


Figure 3. Consumer Age



Figure 4. Consumer Age by Category



**Figure 5. Primary Disability**

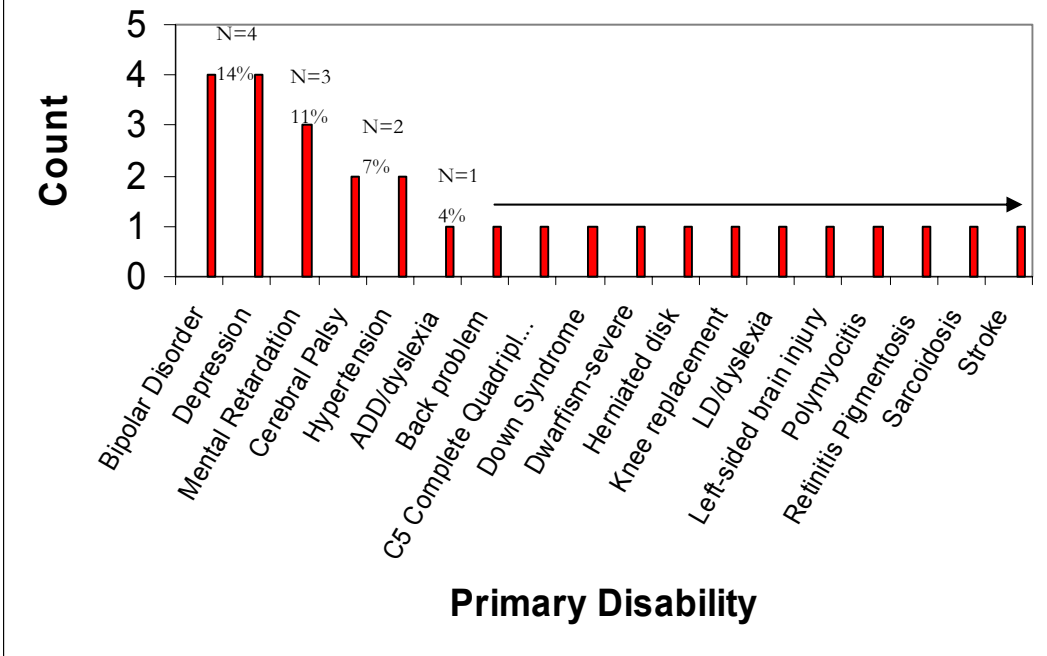
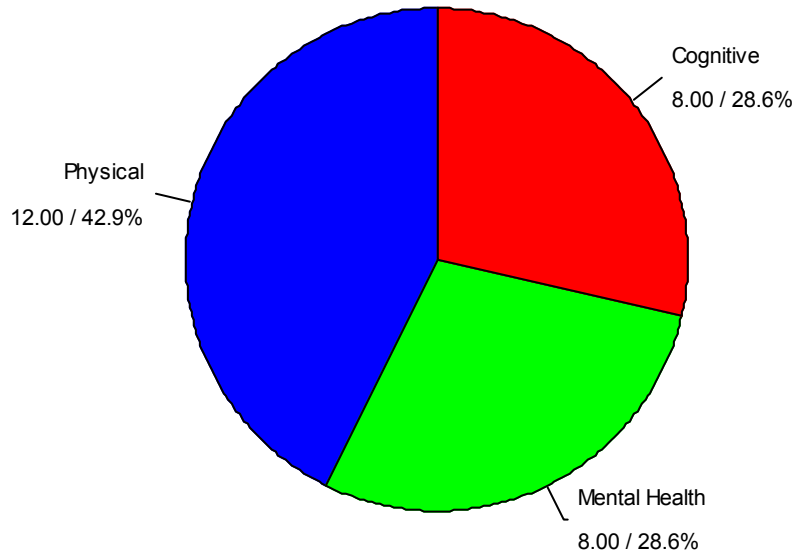
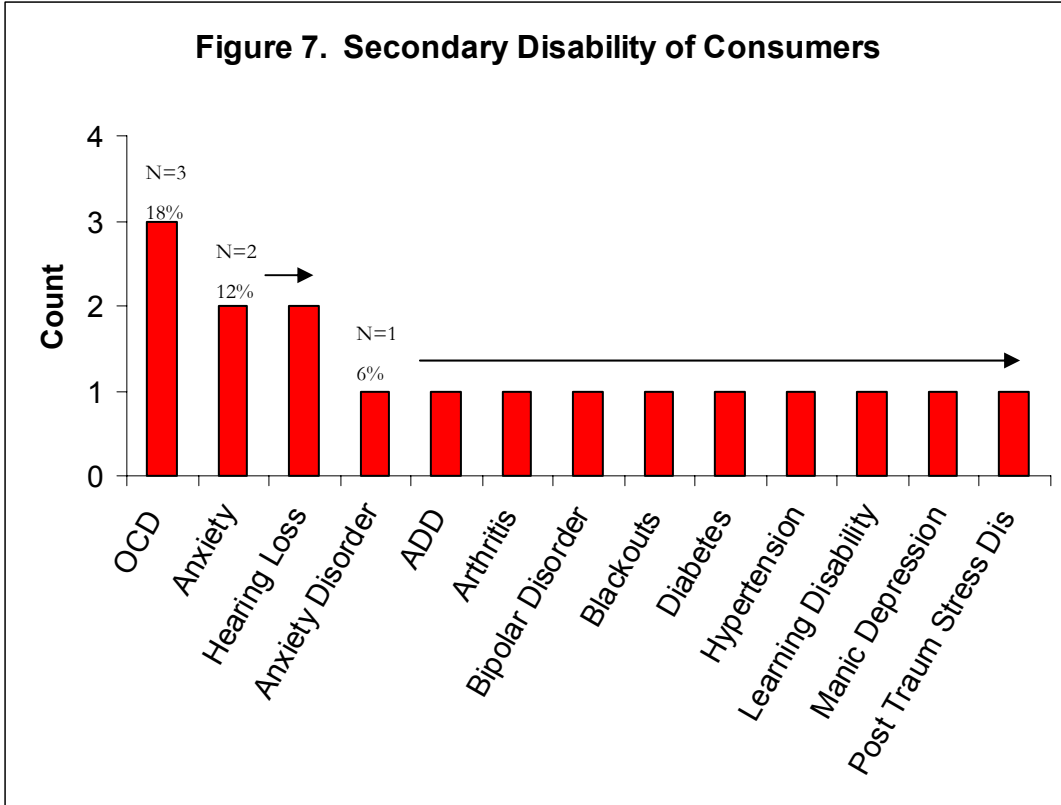


Figure 6. Primary Disability by Category



**Figure 7. Secondary Disability of Consumers**



**Figure 8. Tertiary Disability of Consumers**





Figure 9. Number of Adults 18 and Over  
Living in Household, Including Consumer

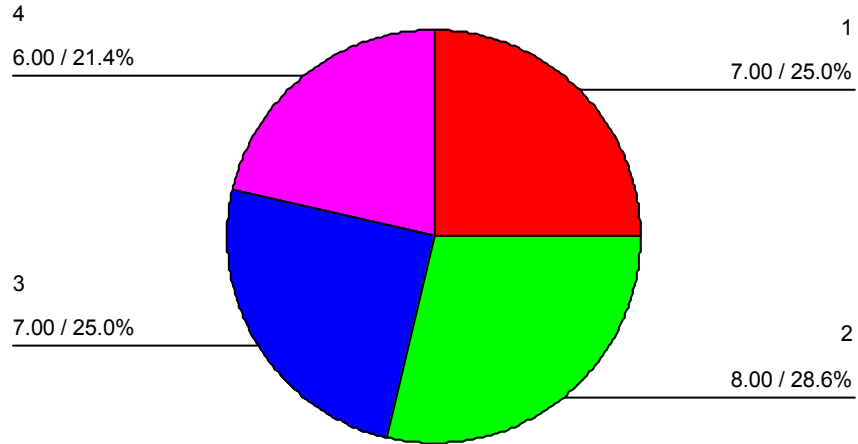


Figure 10. Number of Children Under 18  
Living in Consumer Household

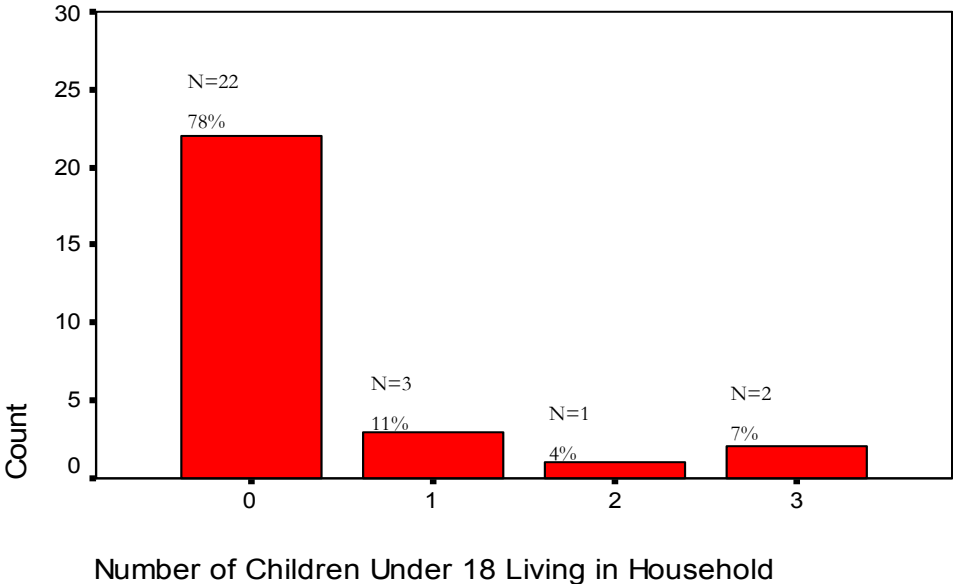
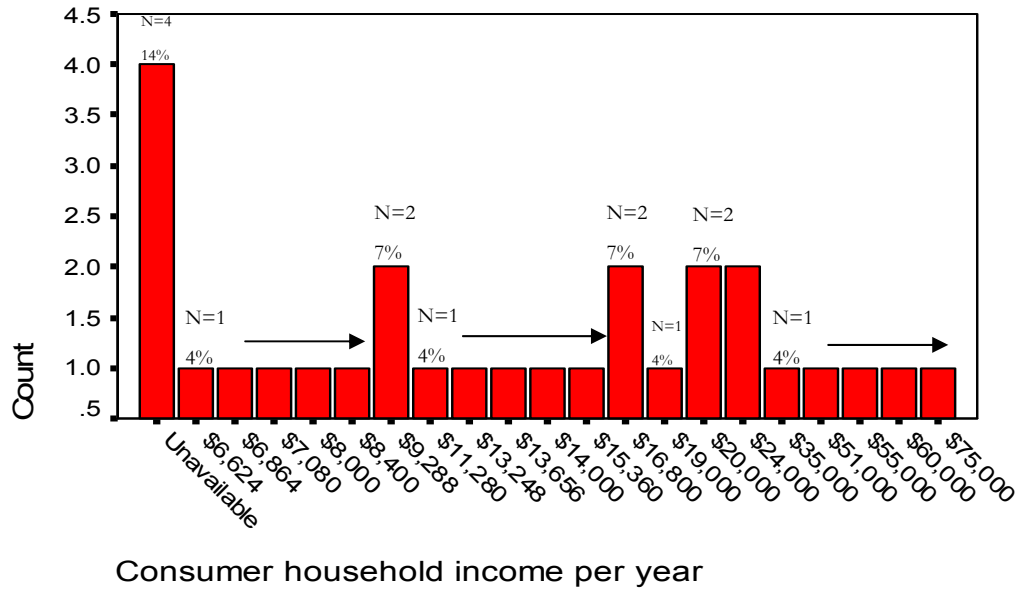


Figure 11. Consumer Household Income Per Year



Consumers Interviewed Mean Household Income: \$22,487  
 Consumers Interviewed Median Household Income: \$16,080

Figure 12. Consumer Household Income  
By Category

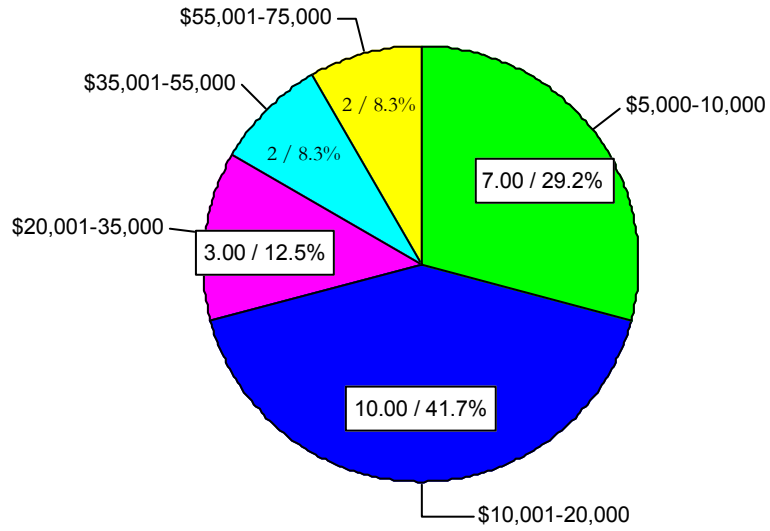


Figure 13. Consumer Level of Education

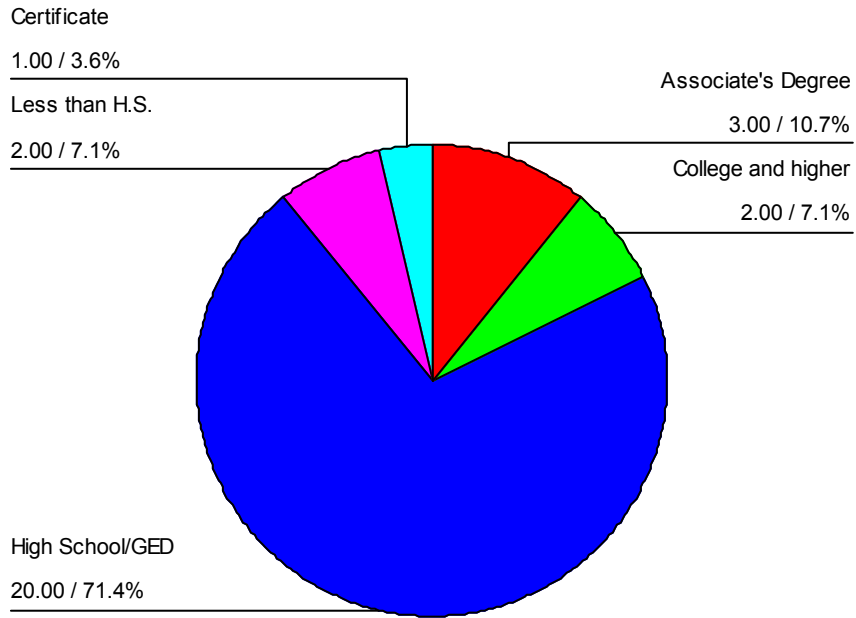


Figure 14. Consumer Homelessness Experience

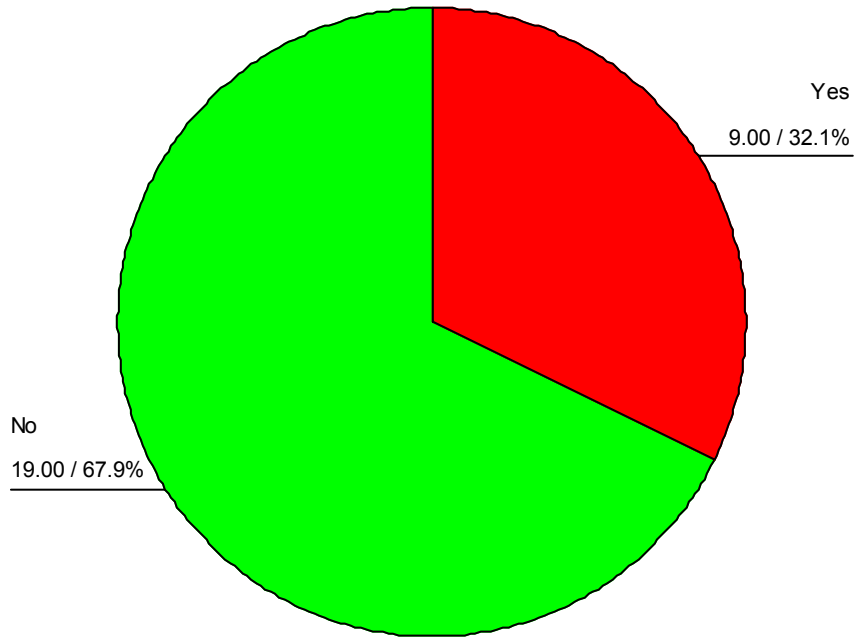
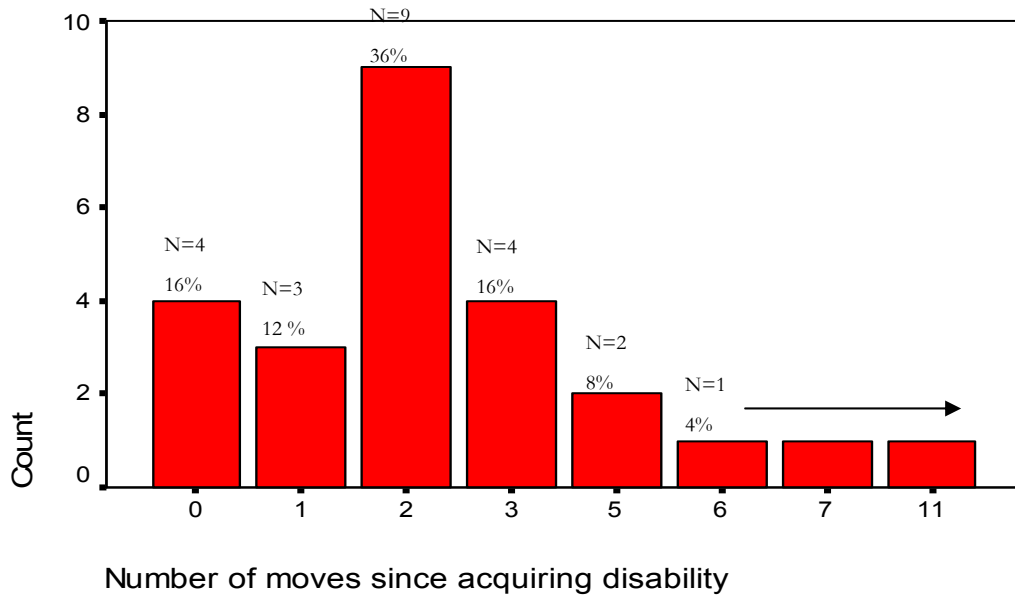
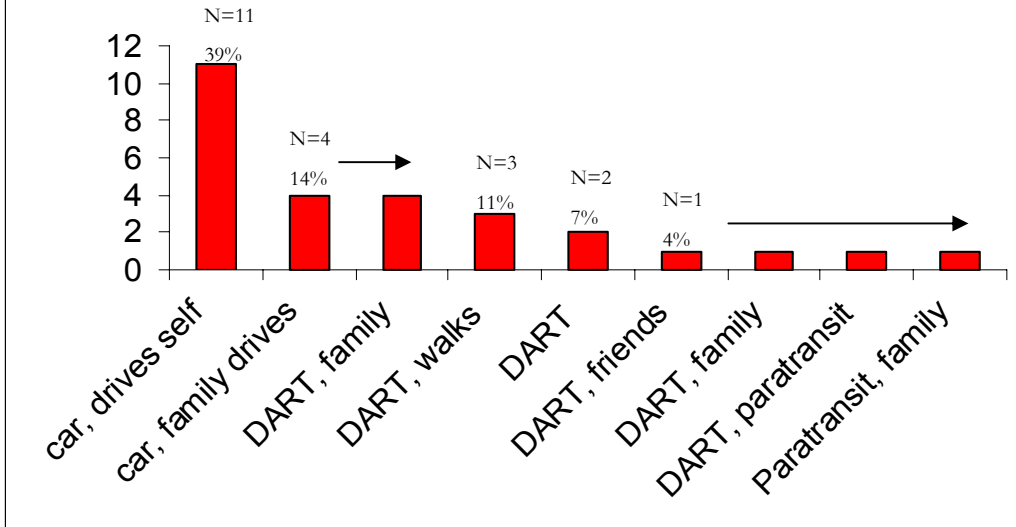


Figure 15. Consumer Number of Moves  
Since Acquiring Disability



**Figure 16. Consumer Primary Form of Transportation**





**Figure 17. Most Recent Consumer Positions of Employment Since Acquiring Disability**

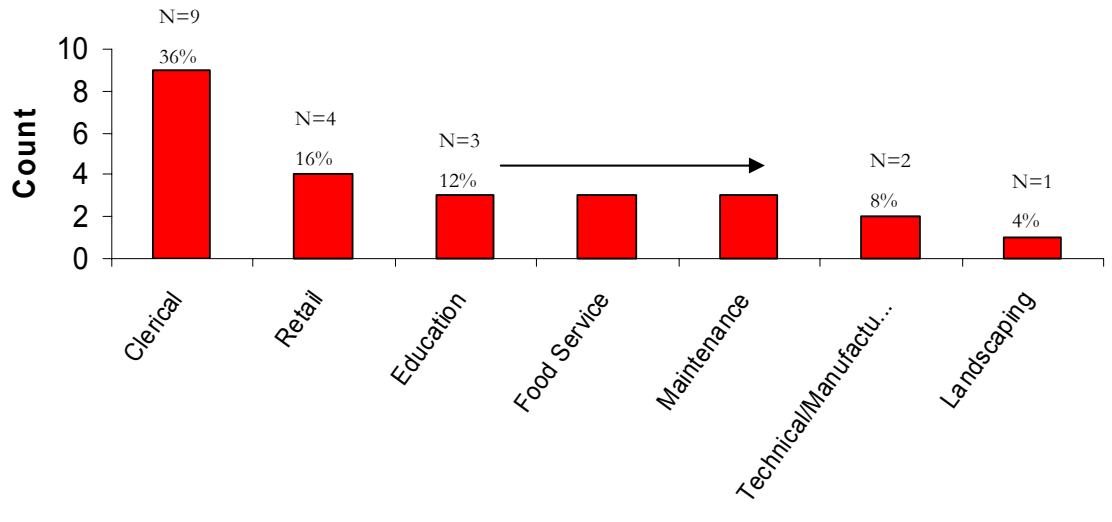


Figure 18. Consumer Hours Worked Per Week  
at Most Recent Job

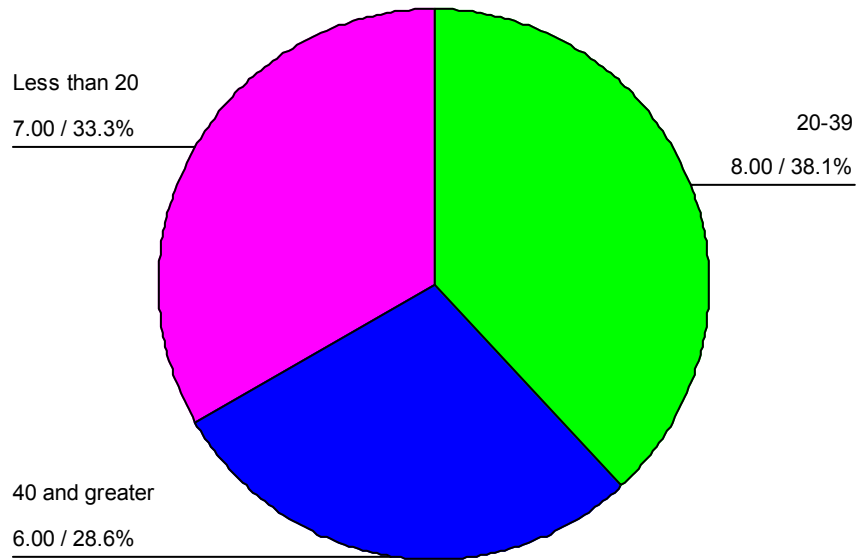


Figure 19. Consumer Current Employment Status

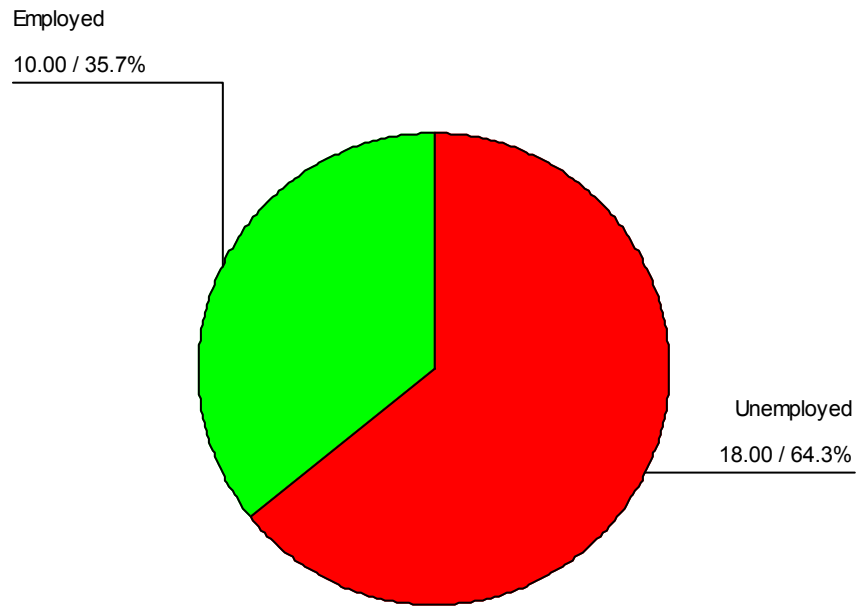


Figure 20. Consumer Receipt of SSI and SSDI Benefits

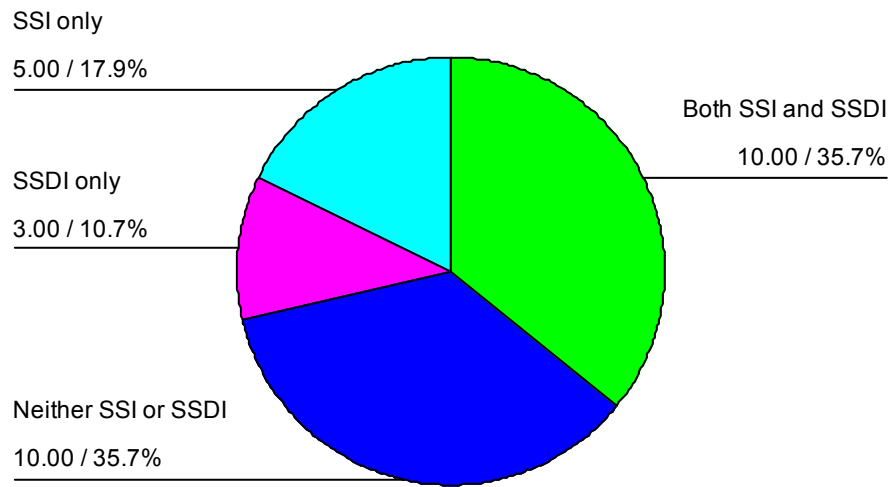


Figure 21. Consumers Receiving  
Medicaid Benefits

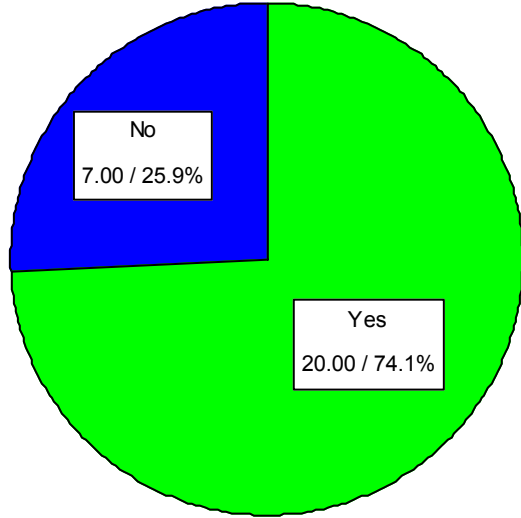


Figure 22. Consumers Receiving Medicare Benefits

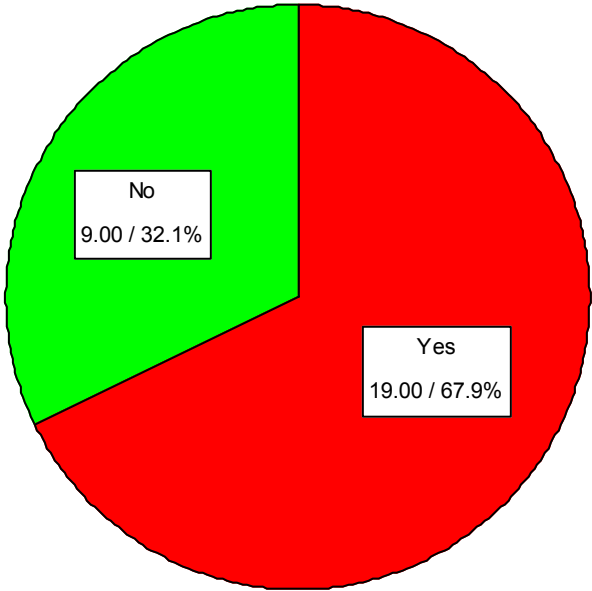


Figure 23. Consumers Receiving  
Section 8 Benefits

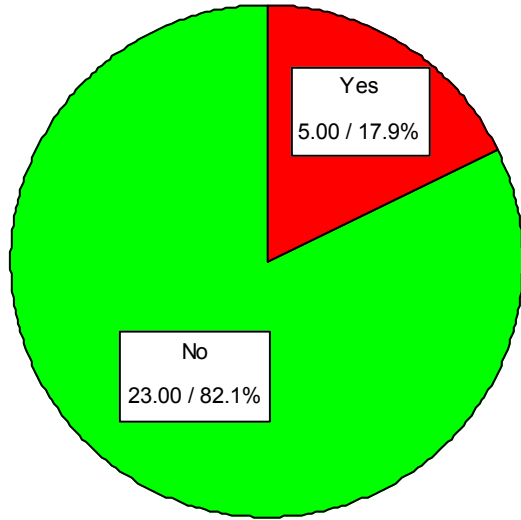


Figure 24. Consumers Receiving Benefits from TANF/ABC Program

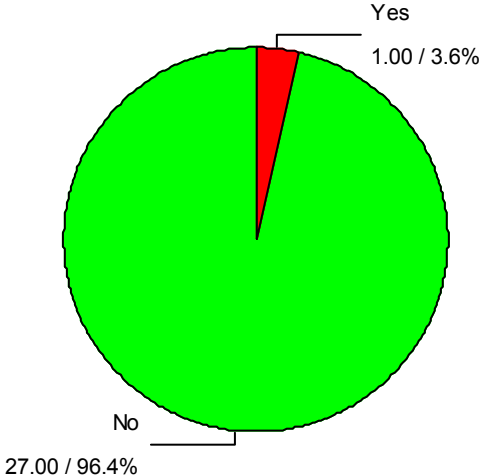




Figure 25. Consumers Receiving Benefits from Food Stamps Program

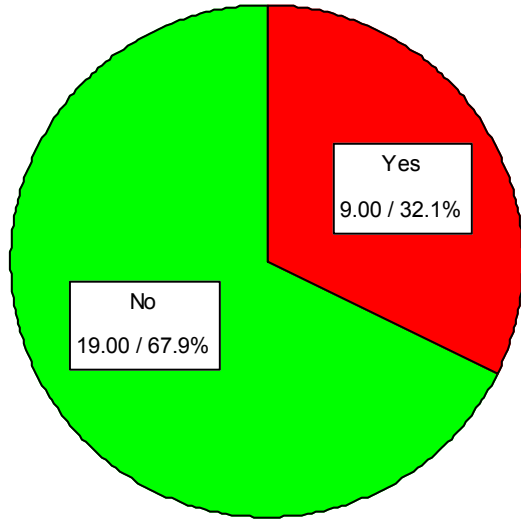


Figure 26. Consumers Receiving  
Unemployment Income

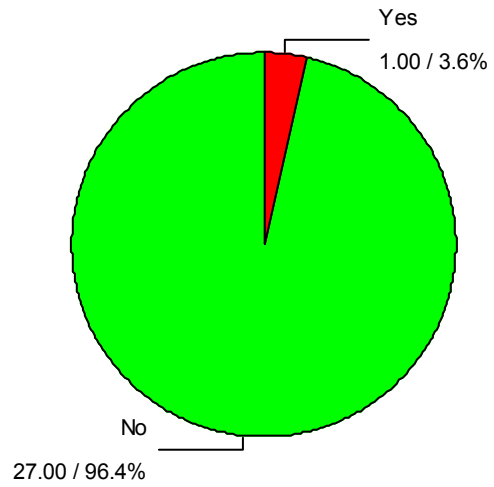


Figure 27. Consumers Covered by Health Insurance

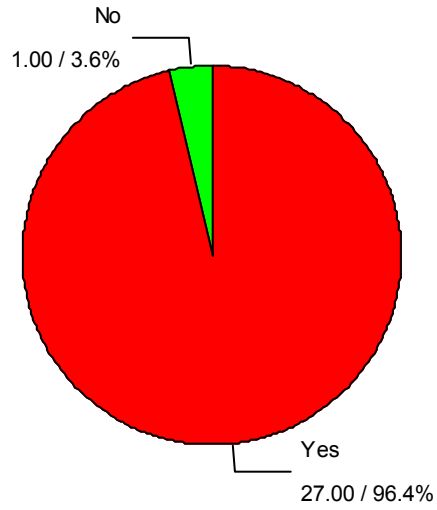
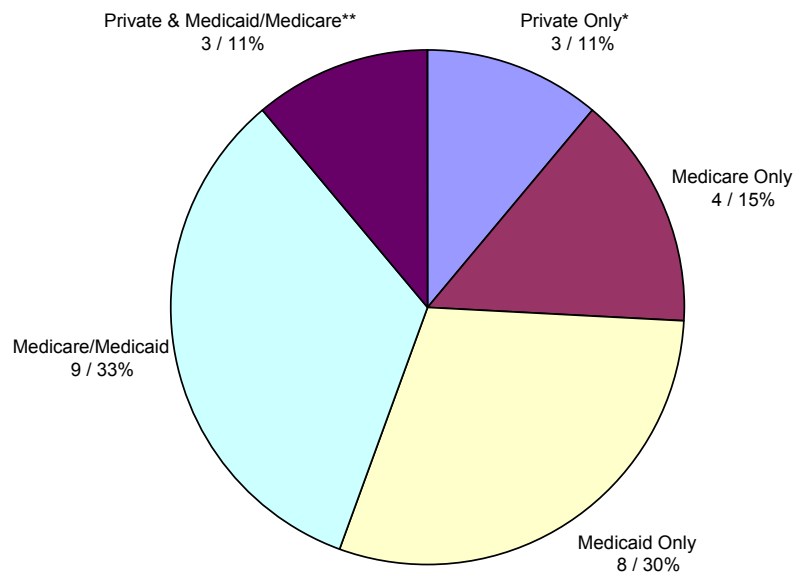


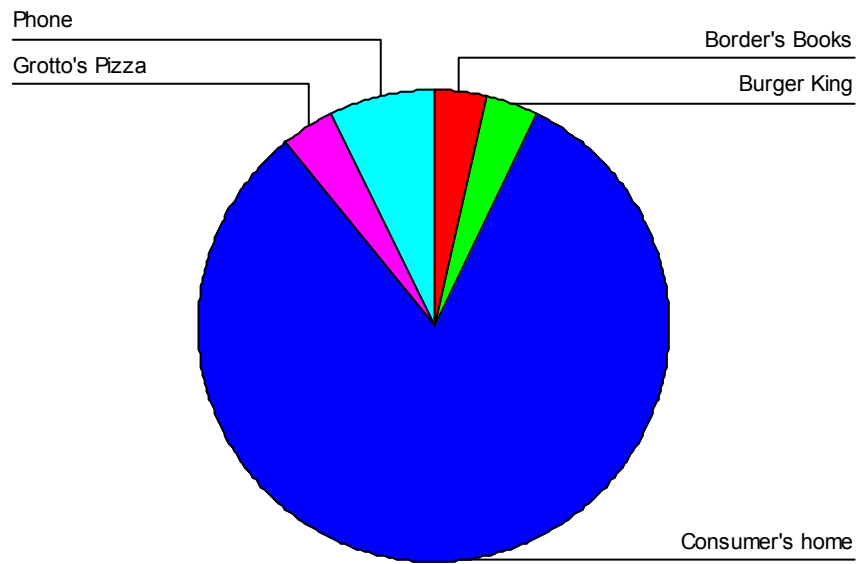
Figure 28: Consumer Health Insurance Coverage



\* Private health insurance includes NY Group Health Plan, Mid Atlantic, AmeriHealth, and Blue Cross Blue Shield.

\*\* Medicare/Medicaid means Medicare, Medicaid, or both.

Figure 29. Location of Interview



---

CLIMB Client Satisfaction Survey Results

Dec 2002 – Sept 2003

(n=169)

1. Benefits specialist by location.

Wilmington	26%
Dover	20%
Pencader	45%
Georgetown	10%

2. How satisfied are you with the benefits counseling you received?

Not satisfied	0%
2	1%
3	4%
4	9%
Very satisfied	87%

3. Would you recommend this service to others?

Yes	97%
No	1%
Not sure	2%

4. Did your benefits specialist encourage you to work?

Yes	90%
No	5%
Not sure	5%

---

5. Was the information provided to you useful in making a decision to return to work?

Not useful	1%
2	4%
3	16%
4	77%
Very useful	3%

6. Was the information provided to you in a way that you could understand?

Yes	98%
No	1%
Not sure	1%

---

**APPENDIX B:**

**SAMPLE INSTRUMENTS**





---

## Project CLIMB Consumer Interview Protocol

Consumer's Name: \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_

County: \_\_\_\_\_

Date of Birth: \_\_\_\_\_

Disability/diagnosis: \_\_\_\_\_

Disability description: \_\_\_\_\_

Data Collector's Name: \_\_\_\_\_

Date of Interview: \_\_\_\_\_

Thank you for agreeing to participate in this study and for your time in answering the questions in this interview.

Signed Informed Consent Form

The responses to your questions will provide us with important information about employment for persons with disabilities. We will begin the interview with background information about you, your family and your disability(ies). The interview will then move to the topics of benefits, benefits counseling, barriers to employment, and ideas that you might have to support those looking to be fully employed.

Please remember that you can ask that the interview end at any time and you can ask that any information that you have provided be destroyed. As an additional reminder, the information you provide will be kept confidential. You will not be identified by name, address, geographical location or disability type and any comments that you make may be slightly altered when reported to protect your identity.

Do you have any questions or comments before we begin?

---

---

**Section I: Background Information**

1. How many adults (those 18 and older) are there in the household now? \_\_\_\_\_
2. How many children (those younger than 18) are there in the household now? \_\_\_\_\_
3. Please tell me who you live with. That is, their relationship to you and their age. I don't need their names.

**Household Configuration:**

Individual	Age	Relation
Person 1		
Person 2		
Person 3		
Person 4		
Person 5		
Person 6		

4. What is the primary language that you speak at home? \_\_\_\_\_
5. Are there any other languages spoken at home? \_\_\_\_\_
6. What is your household income? \_\_\_\_\_ per \_\_\_\_\_
7. Amount                                      Year/month/week/hour

*(To the interviewer)*

- *If the income is given in month/week/hour, about how much does the family work? (Enough information to calculate an annual salary)*
- *Whose income is included in the annual income amount? If there are part-time jobs, two people working, child support - all of this income should be included.*

---

8. Tell me about your education. Which schools did you attend, when, and tell us if you received a degree, certificate or other type of graduation diploma from the school. Please start with the school you attended most recently.

**Education History:**

School	Dates Attended	Grades/Levels	Degree/Certificate?

9. Have you ever lived with relatives or friends, in a motel, in a shelter, or someplace else because you did not have another place to live? a. YES b. NO

10. How many times have you moved since acquiring your disability? \_\_\_\_\_  
\_\_\_\_\_

11. Tell me about these moves. When was the most recent move?

Date: \_\_\_\_\_ From: \_\_\_\_\_  
\_\_\_\_\_ To: \_\_\_\_\_

What was the reason for this move? \_\_\_\_\_  
\_\_\_\_\_

**Second most recent move:**

Date: \_\_\_\_\_ From: \_\_\_\_\_  
\_\_\_\_\_ To: \_\_\_\_\_

What was the reason for this move? \_\_\_\_\_  
\_\_\_\_\_

**Third most recent move:**

Date: \_\_\_\_\_ From: \_\_\_\_\_  
\_\_\_\_\_ To: \_\_\_\_\_

What was the reason for this move? \_\_\_\_\_  
\_\_\_\_\_

---

12. What type of transportation do you use to get where you need to go such as going to work, the doctor, shopping, or visiting family or friends?

*(To the interviewer) Do they own a car? Do they use public transportation? Which service? Do they rely on family or friends? Do they walk or ride a bicycle?*

---

---

## Section II: Disability Information

I am now going to ask some questions about your disability and employment; such things as when you acquired it and the types of jobs you have had.

13. What is your diagnosed disability? \_\_\_\_\_

\_\_\_\_\_

14. When did you acquire your disability? \_\_\_\_\_

\_\_\_\_\_

15. (age 16 or older for #13; otherwise go to #16) Were you employed when you became disabled? \_\_\_\_\_

16. What employment have you had since acquiring your disability? Please start with your most recent job.

Place of Employment	Position Held	Rate of Pay	Dates of Employment	Number of Hours Employed Each Week

---

17. What was your employment history prior to your disability?

Place of Employment	Position Held	Rate of Pay	Dates of Employment	Number of Hours Employed Each Week

### Section III: Benefits

This next section includes questions about the benefits that you receive. I will ask about specific types of benefits that you might receive.

18. Supplemental Security Income (SSI)

- a. Do you receive income from the Supplemental Security Income (SSI) program? \_\_\_\_\_  
\_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_
- c. Have you ever had an interruption in your SSI income? \_\_\_\_\_  
\_\_\_\_\_
- d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

19. Supplemental Security Disability Income (SSDI)

- a. Do you receive income from the Supplemental Security Disability Income (SSDI) program? \_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_

- 
- c. Have you ever had an interruption in your SSDI income? \_\_\_\_\_  
\_\_\_\_\_
  - d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

20. Medicaid

- a. Do you receive benefits from the Medicaid health insurance program (traditional Medicaid or a Medicaid waiver)? \_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_
- c. Have you ever had an interruption in your Medicaid? \_\_\_\_\_  
\_\_\_\_\_
- d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

21. Medicare

- a. Do you receive benefits from the Medicare health insurance program? \_\_\_\_\_  
\_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_
- c. Have you ever had an interruption in your Medicare? \_\_\_\_\_  
\_\_\_\_\_
- d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

22. Section 8 Housing Benefits

- a. Do you receive benefits from the Section 8 Housing program? \_\_\_\_\_  
\_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_
- c. Have you ever had an interruption in your Section 8 support? \_\_\_\_\_  
\_\_\_\_\_

---

d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

23. Temporary Assistance for Needy Families (TANF)/Delaware's A Better Chance (ABC)

a. Do you receive benefits from the TANF/ABC program? \_\_\_\_\_  
\_\_\_\_\_

b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_

c. Have you ever had an interruption in your TANF/ABC support? \_\_\_\_\_  
\_\_\_\_\_

d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

24. Food Stamps

a. Do you receive benefits from the food stamps program? \_\_\_\_\_

b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_

c. Have you ever had an interruption in your food stamps? \_\_\_\_\_  
\_\_\_\_\_

d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

25. Workers' Compensation

a. Do you receive income from the Workers' Compensation program? \_\_\_\_\_

b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_

c. Have you ever had an interruption in your Workers' Compensation income? \_\_\_\_\_  
\_\_\_\_\_

d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_



---

26. Unemployment Insurance

- a. Do you receive income from the Unemployment Insurance program? \_\_\_\_\_
- b. If yes, when (what month and year) did you begin to receive benefits? \_\_\_\_\_  
\_\_\_\_\_
- c. Have you ever had an interruption in your unemployment insurance income? \_\_\_\_\_  
\_\_\_\_\_
- d. If yes, for what reason(s)? \_\_\_\_\_  
\_\_\_\_\_

**Section IV: Medical Insurance**

The questions in this section have to do with your medical insurance.

27. Do you have health insurance? a. YES                      b. NO
- a. **If yes**, what insurance company is it? (Prompt: Blue Cross/Blue Shield/ Coventry/ AmeriHealth/Medicaid – State Chips Program) \_\_\_\_\_  
\_\_\_\_\_
28. Has your health insurance ever changed? a. YES                      b. NO
- a. **If yes**, why did the health insurance change? (Probes for why these changes occurred: found out about better plan; changed job; employment status changed; moved) \_\_\_\_\_  
\_\_\_\_\_
29. Have there been times since you acquired your disability that you did not have health insurance? a. YES                      b. NO
- a. **If yes**, what were those times and were there health or medical needs that were not covered? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

**Section V: Project CLIMB Services**

30. Describe the services and supports you have received through Project CLIMB: \_\_\_\_\_

31. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

32. When did you receive these services? \_\_\_\_\_  
\_\_\_\_\_

33. After receiving benefits counseling, did you have a better understanding of the requirements of the various state and federal benefits programs? \_\_\_\_\_  
\_\_\_\_\_

Tell me how your understanding changed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

34. After benefits counseling, did you have a better understanding of how becoming employed would effect the benefits you received? \_\_\_\_\_  
\_\_\_\_\_

Tell me how your understanding changed: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

35. Describe what you thought were the strengths of the counseling your received: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

---

36. Describe how the benefits counseling could have been improved: \_\_\_\_\_

---

---

---

---

---

---

---

**Section VI: Supports and Barriers to Employment**

37. In your opinion, what has or what would help you to be permanently employed? \_\_\_\_\_

---

---

---

---

---

---

---

38. In your opinion, what have been or are the barriers to you becoming permanently employed? \_\_\_\_\_

---

---

---

---

---

---

---

---

---

---

---

## Section VII: Closing Questions

We have a couple of last questions to ask you.

39. How likely is it that you will be employed at least for 20 hours per week by this time next year? Why do you say that? \_\_\_\_\_

---

---

40. How likely is it that you will be employed for about 40 hours per week by this time next year? Why do you say that? \_\_\_\_\_

---

---

41. What do you think will have the greatest influence on your ability to be employed? \_\_\_\_\_

---

---

---

---

---

42. Is there anything else that you would like to add or comment on?

Thank you for taking the time to talk with me. Please remember that if you have any questions about the interview you can call me at the number on the informed consent form. Also, if you change your mind about us using the information you have provided, please call. We greatly appreciate your participation in this evaluation of Project CLIMB.

---

**APPENDIX C:**

**EVALUATION PLAN**

---

## CLIMB TO EMPLOYMENT GRANT -- EVALUATION PLAN

The proposed evaluation is two-fold to address the two major goals of the project: (1) impact on persons with disabilities, and (2) impact on state and federal policies and practices.

### I. Impact on Persons with Disabilities

Project Goal: Improving the ability of individuals with disabilities to make informed choices during the employment process.

This component of the evaluation is focused on the consumers' understanding of federal and state disability benefits policies. It also focuses on the consumers' ability to seek, obtain, and retain employment. Due to the nature of the disabilities of the targeted population, face-to-face interviews will be conducted with a sample of consumers who have participated in the benefits counseling sessions and/or budgeting workshops. This sample will be selected by the evaluators to represent consumers living in various geographic regions of the state (e.g., Sussex County, Kent County, City of Wilmington, other areas of New Castle County) as well as those with various types of disabilities (e.g., physical, cognitive, emotional).

*Evaluation Question #1: To what degree is the CLIMB to Employment Program providing consumers with the knowledge to make wise financial decisions regarding employment and household budgeting?*

Method:

#### Interviews

Interviews will be conducted with a sample of consumers, benefits specialists, and DVR staff using a structured interview protocol. While the development of this protocol will be the responsibility of the external evaluators, it will require consultation with members of the program staff. These interviews will be conducted in person by a staff member from the Center for Disability Studies and will be designed to explore consumers' views of what they have learned about state and federal disability benefits policies and how this impacts their decisions to seek employment. The data generated from the interviews will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies.

---

## Data analysis

The data generated from the interviews will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies. To ensure confidentiality, the interview data will be presented in summary form across all interviewees'; however, exact quotes will be used to illustrate the narrative. In addition, transcriptions of the interviews will not be shared with anyone outside of the Delaware Education R&D Center or the Center for Disability Studies.

*Evaluation Question #2: To what degree are consumers seeking, obtaining, and retaining employment?*

Methods:

### Structured Database

The external evaluators will identify key data elements to be gathered from consumers' case files. While identification of the key data elements will be the responsibility of the external evaluators, it will require consultation with members of the program staff including the Management Analyst. These data elements will include data routinely collected, but may also include the collection of additional data from caseworkers. For example, data elements will likely include demographic variables such as date of birth, disability, county of residence, highest education achieved, and number of dependents as well as other employment related data such as:

- ◆ number of hours employed,
- ◆ weekly salary earned,
- ◆ eligibility for health insurance (through employment),
- ◆ type of health insurance coverage provided by employer,
- ◆ public support received (financial and medical).

This database will serve as the basis for identifying trends in consumers' employment activity over the five years of the grant.

### Interviews

---

Interviews will be conducted with a sample of consumers, benefits specialists, and DVR staff using a structured interview protocol. While the development of this protocol will be the responsibility of the external evaluators, it will require consultation with members of the program staff. These interviews will be conducted in person by a staff member from the Center for Disability Studies and will be designed to explore consumers' attitudes toward seeking employment. The data generated from the interviews will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies.

### Data analysis

The data generated from both the interviews and the database will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies. To ensure confidentiality, the interview data will be presented in summary form across all interviewees'; however, exact quotes will be used to illustrate the narrative. In addition, transcriptions of the interviews will not be shared with anyone outside of the Delaware Education R&D Center or the Center for Disability Studies.

## II. Impact on State and Federal Policies and Practices

Project Goal: Recommend changes to rules and regulations that have a negative impact on employment outcomes.

This component of the evaluation is focused on the impact to the system, rather than the individual consumer.

*Evaluation Question #3: What is the current status of state and federal policies on the ability of individuals with disabilities to become employed, stay employed, and to live independently?*

*Evaluation Question #4: What is the impact of the creation of a Benefits Consortium and a Consumer Advisory Board on state and federal policies affecting the ability of individuals with disabilities to become employed, stay employed, and to live independently?*



---

For each of the questions in this section, the following methods will be used to collect and analyze data:

Methods:

#### Document Review

The minutes, memos, subcommittee notes, reports, and other communications of the Consumer Advisory Board and Benefits Consortium will be coded and analyzed to determine the “identification of rules and regulations guiding the provision of benefits that impact the ability of individuals with disabilities to obtain and maintain employment,” to determine the quantity and quality of input from consumers, and to determine the recommended policy and regulatory changes made.

Document review will also occur within each of the Division and Agency members of the Benefits Consortium to determine the extent to which their procedures have been effected by the work of the Benefits Consortium and the Consumer Advisory Board.

#### Interviews

Key members of the Benefits Consortium and Consumer Advisory Board, as well as Benefits Specialists, will be interviewed to determine the extent to which the activities of Consortium and Consumer Advisory Board have had an impact on the referral process, individuals’ benefits, and their ability to work and retain the necessary health care, housing, and transportation to be as independent as possible. The data generated from the interviews will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies.

#### Data analysis

The data generated from both the interviews and the database will be analyzed collaboratively by staff from the Delaware Education Research & Development Center and the Center for Disability Studies. To ensure confidentiality, the interview data will be presented in summary form across all interviewees; however, exact quotes will be used to illustrate the narrative. In addition, transcriptions of the interviews will not be shared with anyone

---

outside of the Delaware Education R&D Center or the Center for Disability Studies.

Annual Reporting: Five copies of the annual report will be submitted to the program manager of the CLIMB to Employment Program at least 30 days prior to the end of the annual federal reporting period. The external evaluators from the University of Delaware will be available to report out on the findings of this evaluation at the request of the program manager.

---

# ACKNOWLEDGEMENTS

Many thanks to the following people for their time and effort:

Mark Bernstein

Paige Deiner

Susan Halulakos

Josephine Mealey

Ilka Pfister

Philisa Weidlein

We would like to extend our thanks to the consumers, benefits counselors, and consortium members for sharing their thoughts and opinions about Project CLIMB. Without their valuable input, this report would not have been possible.

~ Thank you