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>> Witter-Merithew: I'm ready whenever you want to begin.

>> Okay.

This is the last line of the text.

>> we're ready to begin. There is a red box right now on people's screens, it shouldn't interfere with anything that they are seeing. We are -- we are trying to -- figure out technology to record the interpreters

so that we may show it with our recorded webinars, which are offered on our MARIE website. So -- so we're going to give this a try, that's what that red rectangular box is on your screen.

First of all I would like to welcome all of you to our webinar, for VR as a system. I have a few housekeeping items that I need to go over with you. Captioning and interpreters are provided.

I will be putting the captioning in the chat function for those of you who want to access it on their own. As soon as I finish the house keeping items, I will do that.

The windows for the speakers, interpreters can be resized to create your personal viewing environment. If you would like to enlarge the video window, click on the side of the window and drag it out to make it bigger.

If you are going to utilize the interpreters, you may need to enlarge the window for the interpreter, which means if -- which may interfere with your ability to see the PowerPoint. Therefore, if you have not already printed the PowerPoint, you can access it after the

webinar through the attendee's materials list or I did send as an attachment through an earlier today. The captioning will appear on the bottom of the screen and I will also place the -- the link so you can access it for yourself in the chat box. If you access it through the internet, then you will be able to size it as you need for a better viewing environment.

Questions for the presenter will be in the chat function only. Please write down your questions and then wait for Anna to answer your questions and then type them into the chat box. All attendees are muted so we will not be able to hear you, but you can click on and chat with anybody that you would like within the chat function. Now, I would like to turn it over to Anna Witter-Merithew, we really appreciate all of the work she's done and the educational opportunities.

Thank you, Anna.

>> Good evening, everyone. As Carrie said, my name is Anna Witter-Merithew, I'm the director of the MARIE Center.

This is the second in a series of 10 webinars that we are hosting. Addressing aspects of interpreting in

vocational rehabilitation settings. This evening's webinar is going to focus on the topic of VR as a system. And it builds on some of the concepts that were introduced during the January webinar. On systems thinking for interpreters. This series of awareness is being hosted by the national consortium of interpreter education centers.

The PowerPoint is actually on a slide -- that shows you there are six centers that comprise the national consortium.

Five that are regionally based and one National Center.

So this slide shows you the location of each of these centers, the sponsoring universities and the states that are served by the respective center.

Can you click it, again, Carrie, one more time.

So the mission of the consortium is to increase the quantity and quality of interpreters nationwide.

So achieve that mission, we collaborate with different stakeholders. Interpreter education programs, interpreter educators, practitioners, consumers, government agencies like vocational

rehabilitation, commissioners for the deaf, administrative offices of the courts and we provide a variety of services including technical assistance, education programs, training resources, research, and other related activities that support interpreting and interpreter education.

Regional centers engage in services to the regions they serve as well as in cross-center collaborations on projects that have a national impact. One such project relates to interpreting in vocational rehabilitation settings. The MARIE Center and specifically myself have been serving as the lead for this VR project, but a number of the other centers are also participating.

And as part of this project, we have developed a series of five professional development modules that are being offered online through the MARIE Center. And you can learn more about these modules by visiting the NCIEC or MARIE websites and those addresses will be posted on the final slide of this PowerPoint. So the content for this webinar as well as the other webinars to follow is drawn from those five modules.

The goal of this particular webinar is to help interpreters gain a historical perspective of vocational rehabilitation and to gain insight into the personnel, structures and processes that form the foundation of VR as a system.

This -- this will help you as an interpreter to appreciate the world view of -- of those seeking services from VR and also those who work within VR.

And with a better understanding, interpreters can more accurately interpreter between consumers and VR counselors and other VR personnel and also learn to be a more effective member of the VR team.

As we established in the January webinar on systems thinking for interpreters, a system is essentially an organizational schema. System thinking is a way of viewing the inter-relationships between the parts of this schema. And viewing the system holistically. So in organizations or systems like VR, it is comprised of people, structures and processes that work together to make that organization function as a whole and that's what we're going to be looking at this evening.

Next slide.

Carrie, can we have the next slide?

I fear that Carrie is distracted trying to do a dual task. I'm hoping that you all have a copy -- I'm on the slide, there we go that says civilians with disabilities. First, let's put the VR system into a historical context and thus the overarching framework within the people -- within which the people, the structures, the processes exist.

In the early part of the 20th century, civilians with disabilities were largely invisible and unaccounted for by the government. However, in the latter half of the 20th century, the social and physical isolation of people with disabilities became the focus of civil rights legislation. Carrie I need you to click this slide again. There's more on this slide, please. Now we're ready for the next slide.

There are several things that affected disability rights and the way that disabled persons were viewed.

Starting with the Smith-Fess and progressing up to current legislation, so we're going to review these various things, these various factors that really affected disability rights. Next slide.

So first is the Smith-Fess vocational act, which was enacted after world war I and was later amended after each major war. world war II, the Korean war, the Vietnam war. Each war resulted in an increase in the number of veterans with disabilities. And as well, with each passing decade, new treatments and rehab, rehabilitation protocols offering hope for improved potential for work and assimilation into the broader society.

Next slide. Part of the changing landscape of services to persons with disabilities was evidenced in the 1954 transition of rehab services from the veterans administration, where it had been housed, to what was at that time the newly established department of health, education and welfare. So this transition allowed for attention to be given to all citizens with disabilities versus only veterans.

As well, with this transition came funding for research into disabilities and states were able to apply for and receive demonstration grants so that they could provide innovative models for service provision to various populations of individuals with

disabilities.

Next slide.

Although there were medical advancements and new federal legislation in -- developments in assistive technology, social attitudes about people with disabilities were much slower to change.

Through the efforts of advocacy organizations, for example, like the national Association of the Deaf, individuals with disabilities, that slow process of shifting from a medical and economic view of persons with disabilities to a more socio-political view began.

Next slide.

Looking further at this changing perspective, when disability is or was viewed as medical or economic, the focus was really on the functional and vocational limits, the focus was on what the individual was unable to do as a result of their disability. People with disabilities were viewed as inferior and in need of a cure.

But as -- as perspectives moved to a move socio-political view, the view of disability was more focused on social circumstances that create barriers.

And those social circumstances can be changed through social and political action.

So people with disabilities began to see themselves differently as well. They began to realize that society had created many of the barriers that they faced and that the real issue was that they experienced being undervalued and they were treated as oppressed or discarded minorities.

And that was really more their real disability.

And certainly those of us that are studying interpreting or are working interpreters have seen many examples of this within the experiences of individuals who are deaf or deafblind.

For example, even still today, but -- but more so earlier, you know, in the period when I was growing up with deaf parents, I remember how people were always shocked or surprised that deaf people could drive a car or that they were allowed to get a license, a driver's license.

And we know that -- that in terms of our society's structure there was a time when deaf people were denied life insurance, car insurance, because they were seen

as a higher risk.

And so through advocacy organizations, deaf people -- deaf people created their own insurance options. And eventually society caught up.

So as a result of the shift to a socio-political view of disability, in 1960s, legislation was enacted that sought to eliminate some of those social barriers that affected people with disabilities.

The first was the Civil Rights Act of 1964. which focused on racial discrimination. But that was a very important piece of -- of legislation for individuals with disabilities because it set the stage for other minority groups to broaden its coverage and to demand the -- equality. So then in 1973, the Rehabilitation Act was passed. And section 504 echoed Title VII of the Civil Rights Act. And offered the first definition of discrimination towards people with disabilities.

However, it was limited in scope and it only outlined -- outlawed discrimination by entities that received federal funds.

Next slide.

If you can click it again, there's more on this slide.

Carrie. And more.

Thank you. So although section 504 was passed in 1974, the regulations required to enforce it did not get published until 1978. So it took four years for the meat of that act to be published.

Unrelated to that, within the broader society at this same time, three new [indiscernible] were emerging in the broader field of vocational rehabilitation.

Program accessibility, the concept of mainstreaming and independent living.

The disabilities rights movement was examining what it meant to make programs accessible for individuals with disabilities.

This notion of accessibility addresses many different considerations. Physical barriers, communication barriers, attitudinal barriers, among other types of barriers that might exist and limit the ability of individuals with disabilities to fully participate.

So the disability movement became concerned with what was called full inclusion and participation by individuals with disabilities and finding creative and

meaningful ways for individuals with disabilities to be active and engaged in all aspects of society.

Next slide.

Now, vocational rehabilitation's interest in interpreters precedes the federal legislation by a decade. Because back in 1965, interpreting was authorized as a case service for deaf clients in VR. At that time, sign language interpreters began to provide services to VR clients in many different settings. Such as medical, vocational training, post-secondary schooling, any number of other kinds of services, job training, that was being provided to VR clients.

I came into the field in 1972 as a free-lance practitioner and at that time a very high percent of the work that I did was through vocational rehabilitation, that was true for many of the early interpreters.

And with this increase in demand came the need for interpreters who were more readily available to provide services. And ultimately, the need for qualified interpreters who were career professionals versus the

occasional volunteers or service providers, you know, individuals who may have come -- who may have been interpreting as an addition to what their regular job was.

So this reality impacted the need for more training of interpreters. And as a result, by 1978, the Rehabilitation Services Administration was funding five-year competitions for regional and national projects to increase the supply of interpreters for persons who are deaf, deafblind and hard of hearing.

And that funding continues today and is what underwrites these webinars.

Next slide. Other impacting legislation includes public law 94-142, referred to as I.D.E.A. 94-142 passed in 1975. And it impacts VR in a number of ways. Particularly because VR begins serving students as they begin their transition from school to work, generally they begin making initial contact around the age of 16.

So I.D.E.A. was the education of all handicapped children's act, informally called the mainstreaming law. And the result of children being mainstreamed into public schools was an accelerated demand for

qualified interpreters. And as we all know, the fields of interpreting and interpreter education were really not prepared for this increased demand and we are still reacting to it today.

Next slide.

And then in 1990, there was the Americans with Disabilities Act. That requires all segments of society serving the public to be accessible.

An individual can qualify as a member of a protected class at any time in his or her life when they have life circumstances that warrant it. So this also impacts services to individuals with disabilities and it also impacts VR as a system.

Services that were once paid for by VR for clients that were being served by VR are now often picked up under the ADA.

And as a result, it's very possible that you as an interpreter are doing work for a VR client and you may not even be aware that they are being served by vocational rehabilitation.

The ADA also created another significant acceleration in the demand for interpreters. And it

also led to the privatization of interpreting services delivery.

Prior to that time, much of the interpreting services were coordinated through non-profit, community service programs or commissions for the deaf, community service programs serving deaf people, often led by deaf people. And so this privatization of interpreting services has -- has created a major shift for sure on lots of levels. We could do an entire webinar just on that topic.

And again, although ADA is not directly part of VR, it impacts VR, particularly the partnerships within society that VR seeks to create in serving deaf and deafblind individuals.

And, again, it also impacts the availability of interpreters, who helped create accessibility to the VR system. And its services.

The next slide.

This one has self more things on it, Carrie, if you can go ahead. Thank you. So what has been done to respond to this demand in the area of interpreter education? Well, as I mentioned earlier, in 1974, RSA

funded the National Interpreter Training Consortium, which provided funding to institutions of higher education to provide in-service training programs for individuals who aspired to be professional interpreters.

In 1980, that funding increased and supported 10 regional and national programs. And today this funding remains the same. The amount of money remains the same and it's used to support six projects that form the national consortium of interpreter education centers.

And although the structure and the focus of this -- of this funding has changed over time, the primary goal of increasing the number of -- of qualified and available interpreters for deaf, deafblind and hard of hearing individuals remains the same.

Next slide.

It's -- it's interesting to note really very little has changed since this 2008 NCIEC study. About interpreter education. This study attempted to collect information on what interpreter education was

available at the time.

And 91 educational institutions responded to this study and 75 -- I mean 71 were offering an associate's degree, 27 were offering bachelor's degrees, and only four were offering master's degrees. Some institutions did offering multiple degrees, like a two-year and a four-year; or a four-year and a master's degree, but the field of interpreter education has yet to catch up with the standard that has been set by the interpreting profession of a BA degree because the majority of programs continue to reside in two-year institution and we know that two years is insufficient to master the competence required to consistently and effectively engage in successful interpreting practice. And nor is it sufficient time to prepare for certification.

Thus, we all talk about and know about the gap that exists between people coming into the field of practice and the -- them becoming competent autonomous professionals.

So it is this increase in demand for interpreting services and our inability to consistently and

effectively meet this demand with a sufficient supply of competent interpreters, that contributes to the tension between the systems in which interpreters work and interpreters themselves.

In part, not entirely for sure, but in part, because we don't have enough time to adequately prepare interpreters for the work they need to do, we have been overly cautious and narrow in defining the role and responsibilities of interpreters.

And as a result, interpreters have a very interpret-centric view of their work. And as we talked about in the webinar last month, in order for us to transition into being system thinkers, we have to learn to appreciate how systems like VR work and function, how we can best fit into that system, and how we can be productive contributors to the VR team. Or the system team.

Next slide.

Because we're often focused on ourselves and the energy that is required to preserve this -- this historic role of the interpreter, we fail to approach our work in more authentic ways. Ways that are more

natural to human interaction and allow for a more transparent approach to our work. We have a lot of behaviors that are intended to perpetuate this notion of neutrality, but it comes across as being detached, distant and disinterested and non-collaborative. And as a result, we limit our ability to rely on the resources and the strategies that exist within the very system in which we're working.

So system thinking allows us to find more effective ways to relate to the system and to collaborate and engage rather than -- rather than function in a detached and perceived disinterested manner.

So it's an approach that allows us to more actively engage consumers of our service, both deaf and hearing, in the decision making process that -- that impacts the interpreted interaction.

And so just as a -- as a quick example, whenever there's a barrier to our effectiveness, regarding of what that barrier is, it's essential, it's an essential part of our duty that we make that known, that we -- that we inform people of that barrier and we seek their assistance in finding a resolution to it.

Next slide.

And during last month's webinar, we also talked about different types of systems and we focused on the nature of socio-political systems and VR is just such a system. It's socio-in that it serves the interests of society and it's political in that it is governed by laws and rules and regulations that are a part of our society's overarching government structure.

And socio-political systems, human systems, are comprised of three primary components: People who do specific jobs and hold specific responsibilities and have varying levels of authority for the work that they do; structures that form the overall organization of the system. The structure includes how the personnel within the system are organized around certain tasks, job titles, functions around certain lines of authority. And the third component is processes, which are the ways in which the work of the system is accomplished.

So typically you'll know about the processes by watching what the people do. The procedures that they follow. The rules that they attempt to engage. The

paperwork that -- that they utilize to maintain the flow of information from one part of the system to another part of the system.

So let's explore these three elements as they relate to the VR system a bit more.

Next slide.

So in terms of its structure, RSA is located within the U.S. Department of Education and so it's a federal agency. And it is under the leadership of a commissioner who advises the assistant secretary for special education and rehabilitation services. And -- and this advisement is focused on programs and problems that affect individuals with disabilities.

Next slide.

Can you push more one time, Carrie. Just one more time.

Thank you. So as part of its structure, there is a federal-state relationship that is responsible for implementing VR programs and services. RSA, Rehabilitation Services Administration, that's the federal entity, offers funding to states in two different ways.

First, there's a -- there's a formula grant program that provides allocation of money.

So -- so this program provides grants to states to support a wide range of services designed to help individuals with disability to prepare for -- [Sound cut out].

And it -- it's distributed to states based on a formula. That takes into account the population and the per capita earnings. To cover the cost of direct services and program administration. So these -- federal to state grants are administered under an approved state plan by VR agencies and the state matching requirement is 21.3%.

So essentially the formula is like 79% of federal funds, matched by 21% state funds.

Next slide.

The second source of federal funding is a discretionary grant process. So congress establishes discretionary grant programs through authorizing legislation and then RSA usually writes program regulations based on that legislation, which describes how the programs are to be administered.

And then after these program regulations are published in a final form and congress appropriates the money for the programs, then RSA elicits application and makes selections and grants awards.

Unlike a formula grant, a -- a dictionary grant awards funds based on an awards process rather than based on per capita earnings and overall population of the state. Then RSA reviews those applications in light of the legislation and the regulations and makes their selection.

They fund that those that they think are most worthy, right? So RSA annually administers these discretionary grants. Next slide.

This slide shows you some of the -- of the types of discretionary grants that have been awarded. So as interpreters you may actually have interpreted for some of these grant activities if you've interpreted for the center for independent living -- for a center for independent living or you've interpreted for a projects with industry program. A lot of recreational programs that target individuals with disabilities. VR services that are provided to Native Americans.

American Indians. These are just some examples.

Next slide.

So that gives you a bit of a sense of VR's system. Now, let's talk a little bit about its processes.

The -- the VR processes are most evident in the individual state plan. So although each state has to adhere the federal legislation and regulations, each state has flexibility in determining its -- how they're going to do that, you know, what their programs are going to look like and how they will be administered. So they have flexibility in terms of their policies, procedures and business practices and they report this information in a state plan. The state plan is like a blueprint or a roadmap that defines how the state will comply with the federal mandate to provide VR services to individuals with disabilities. And once developed then that state plan has to be submitted to the federal government for review and approval and then once approved is when they would begin participating in that matching fund process.

Next slide.

Go ahead, Carrie, tap it one more time.

Thank you. So the state plan has two parts.

The blueprint lists the basic legal requirements about how states should operate VR programs. The attachments give more details about how each state will carry out the law.

The state plan defines the programs and services that help people with physical and mental disabilities go to work. Become self sufficient. Stay independent in their homes and communities.

And so you can just imagine a whole range of services that might be required to accomplish that for some individuals. It could include transportation skill training, the teaching of banking skills, budget skills, independent living skills, any number of -- number of skills, in addition to the skills related to specific jobs or specific job training.

So each state plan is articulated around a mission statement and a set of guiding principles. And that process helps define the structure of the state and local VR offices and -- and as well as its practices and programs that it will offer and so through this state plan we can start beginning to see the

interdependence between each element of the VR system.

Next slide.

So not all VR state plans are going to be the same.

So, for example, where the VR program is housed within state government could vary from state to state. Some states it might be under the Department of Labor. Another state it might be under the Department of Health and Human Services. Some states are in what is referred to as an order of selection. And thus only serve the most severely impaired. Some states have financial needs tests for some of their services. Some states have limits on what they'll pay for a hearing aid or for cochlear implants. Some states will only pay for college tuition, the base of in-state tuition rates. So if you have a student who wants to go to Gallaudet or NTID, they would be responsible for the difference between what VR is willing to pay up to the state rate and what the tuition cost might be at that out of state program.

A new states have specialists like deafness specialists, rehab counselors for the deaf. Many of whom are themselves deaf. They have hard of hearing

specialists. Some states have state coordinators for the deaf. Again, maybe of those state coordinators for the deaf are themselves deaf.

But many states have moved away from a counselor having a deaf caseload and have moved into generalist counselors who serve all disabilities.

Typically those counselors do not know sign language and so again they rely on the services of sign language interpreters as they're meeting with and working with deaf clients.

So these are just some of the ways in which a state plan can differ.

Another possible difference is in the way that states may have combined or separate agencies for the blind and general populations. So, for example, in Oregon, individuals who are deaf are served by the general agency, but individuals who are deafblind are served by the commission for the deaf. So then this sometimes results in the need for the duplication of personnel with a specialized competence in working with specialized populations.

The next slide.

So certainly these differences can have an implication for us as interpreters. And understanding the differences in each state will help us to -- to better appreciate the way VR functions in our state. And to be able to make informed decisions around our actions and our interpreting process. Especially at higher levels of administration when you may be working with deaf professionals, deaf professionals who are the state coordinator for the deaf or who are VR counselors for the deaf. And in such capacities the interpreter may have a basic understanding of this federal-state relationship and its implication for the state VR plan, the budget and just generally decision-making related to the budget. So what services can be provided, what services can't be provided.

The next slide.

So who is eligible for VR services?

In order to be eligible for VR service, an individual must have a physical or a mental impairment, which is a substantial barrier to employment, and they must require vocational rehabilitation services to prepare for, secure, retain or regain employment; and they are

able to benefit from VR services in terms of an employment outcome.

So VR cannot discriminate on the basis of race, color, you know, national origin, disability, political beliefs, sexual orientation, age, religion, or gender in the acceptance for or provision of services, employment or treatment in its educational and other program activities.

Next slide.

And there is a presumption of eligibility for any individual who is currently receiving Social Security disability insurance or supplemental security income. So SSDI or SSI. If an individual with a disability is receiving those, then VR will presume that he or she is eligible for vocational rehabilitation services.

So VR works closely with -- with the Social Security agency. Next slide.

So a little bit ago I talked about order of selection being part of VR's processes. So just a little bit more about that.

State VR agencies, which rely on a combination of federal and state funding, to carry out their mandate,

sometimes face a challenge as they attempt to meet the needs of this potentially increasing population of individuals with disability who seek their services. We know nationwide that unemployment is relatively high. And so certainly that increase in unemployment would impact individuals with disabilities in the same manner, possibly more, than it would the general population.

So fiscal restraints and federal and state budget cuts mean that VR agencies need to look at ways to save money within their program structures or to move to limit the number of individuals that they can serve.

And so the latter, this -- this limiting the number of individuals they serve can be done if the state VR agency moves to what is called an order of selection. So that creates a federally sanctioned waiting list in which individuals with the most severe disabilities get served first and others are placed on a waiting list. And moved up and served as funds allow.

So the implication of that, for interpreters, is that interpreters would be working with individuals who are deaf or hard of hearing who may have multiple

disabilities and greater challenges, linguistically. So that's something to keep in mind. It takes highly skilled interpreters to be effective in working with the VR target population.

Okay. Next slide.

The philosophical tenets of VR have remained relatively stable over time, although many changes have occurred in circumstances surrounding rehabilitation service delivery.

A study of rehab philosophy over the years reveals really a very long history of belief in and advocacy for the rights of people with disabilities. Next slide.

Here's just a couple of examples of rights. Individuals with disabilities are generally presumed to be capable of engaging in gainful employment and the provision of individualized rehabilitation services improves their ability to become gainfully employed.

And individuals with disabilities must be provided opportunities to obtain gainful employment in integrated settings. Integrated settings meaning mainstream settings, meaning the general job market,

versus sheltered employment where they are restricted to working with other individuals who also have disabilities.

So these rights, these are just a couple of many of the rights that are broadly stated in the rehab philosophy and they are drawn from the 1990s, Americans with Disabilities Act, and the 1973 Rehab Act and all of its subsequent amendments.

Next slide.

Another, really the cornerstone of the VR philosophy is around this notion of informed choice. The 1998 amendments to -- to the Rehab Act provide that individuals with disabilities must be active participants in their own rehab programs. And the goal of which is to -- to achieve gainful employment.

Active participation, it includes making meaningful and informed choices about -- about the selection of their vocational goal, the services that they need, to achieve this goal and any number of other things.

So think about how this notion of informed choices impacts the work and duty of sign language interpreters working in the VR setting.

what does it take to clearly establish and indemnify the choices that are available to -- to a client.

And also to accurately interpret their inquiries and -- of the client and the -- and to voice their responses to this informed decision making process.

Certainly in the event that an interpreter is confronted with a barrier to conveying those clear choices, then there is a consistent duty to report this and to seek an acceptable resolution. So what barriers might exist. It might be that the interpreter has a lack of knowledge regarding how to talk about some of the choices in a manner that is readily accessible to the deaf individual.

Or perhaps the deaf individual has some unique or idiosyncratic way of communicating. There could be any number of barriers. And barriers really are to be expected when working in the VR setting and interpreters have to have controls that they can employ to manage or mitigate those barriers. So an example might be if you encounter a deaf VR client who has a very unique or idiosyncratic way of communicating, you would partner with a deaf interpreter who may be more

qualified to provide communication, linguistic access.

So again, what does the informed choice look like in action?

This slide speaks to both the personnel within the VR system and then the process that that personnel engages in with the VR client. To achieve informed choice.

So again this is another example of the interdependent nature of systems, personnel incorporates specific processes that are inherent within the structure of the system. And in this way systems are circular, meaning that there are patterns of behavior or activities that can help you as an interpreter to predict what's going to happen or what the general flow or sequence of events will be.

So in the case of informed choice, you can think of it as the anchor upon which the other practices of the VR counselor are going to rely. They are hinged on.

So let's consider informed choice just a little bit further.

So the process of involving a participant in his or her rehabilitation program has to begin with an

attitude of respect for persons with disabilities, a recognition of their right to make appropriate choices regarding their own lives, all participants regarding the level of disability, education, functioning, skills, have the right to develop and maximize their decision making skills.

So how might the interpreter participate in this partnership?

Certainly, through remaining extremely focused, giving focused attention to each element of the process and a -- ongoing commitment to rendering the most clear and accessible interpretation possible, as well as whenever barriers are encountered, being transparent about that and letting the consumer and counselor know and then negotiating for adjustments.

Next slide.

So we're moving into the latter part of the webinar.
Next slide.

And we're going to talk about the major milestones in the VR process.

Moving from one step of the process to the next requires information, actions and/or decisions by the

rehabilitation counselor and the VR client. Thus the interpreter needs to be attuned to each one of these steps and how their work fits in. So that the goal of each one of these milestones is achieved.

First, the individual applies and goes through an evaluation process.

Based on the evaluation, eligibility is determined. If eligible, then the planning process ensues to plan what services and actions need to be taken to help the individual obtain employment. The individual receives those services and hopefully gain employment. But the process doesn't necessarily end there because VR clients also often receive post employment services.

Next slide.

So again, let's look at each step of the process a bit further, so you can try to project yourself as an interpreter into each one of these.

First the application process. So any person with a disability may apply for VR services by contacting a VR office and making an appointment.

VR staff will arrange for the individual to make an application and to meet with a vocational

rehabilitation counselor so that eligibility can be determined.

The application process is more efficient if the applicant brings current medical, psychological and educational records or other information, you know, about their disability with them to the appointment.

During the first interview, the counselor explains the rehabilitation process and gathers information about the applicant. An interesting fact is that in some states an individual who is applying for VR services can also register to vote or they can change their voter registration while they're there.

Next slide.

And then VR must evaluate the individual's disability to find out if they are in fact eligible. If additional tests are needed, VR will pay for the tests required to determine eligibility. And the purpose of the evaluation is to gather diagnostic information and to explore the applicant's background, abilities, and their disability-related barriers to employment and rehabilitation services.

Next slide.

Generally, VR has 60 days from the time of application to determine whether or not an applicant is eligible for services. If the applicant is eligible, she or he is assigned to a priority group based on the significance of the disability. So again when services are restricted during an order of selection, clients and priority groups whose disabilities are less significant barriers to employment may have to wait for funds to be available to pay for the services that they need.

Even when an applicant is not eligible for VR services, or is placed on a waiting list, VR will still provide vocational rehabilitation information and referral assistance to help the person obtain services from other sources.

But once eligibility is determined, then the applicant becomes a client of VR and the next step, the plan for employment will be developed.

Next slide.

Next slide.

Thank you.

If an individual is eligible, the VR counselor

provides information about choices for developing the IPE, the individualized plan for employment.

Very similar to the IEP. which is used in the public school settings in planning the individualized education plan for students with disabilities.

But this IPE is a plan of VR services that VR will provide to help the individual get or keep suitable employment in an appropriate career.

And the IPE is based on the client's strengths, resources, priorities, concerns, abilities, capabilities, interests and informed choice and it must be approved by VR according to the Rehabilitation Act requirements.

A client may choose to write the plan independently or with assistance from someone in VR or from someone else who is willing to help.

And the plan must be completed within 90 days of eligibility determination.

Unless some type of an agreement for an extension is -- occurs.

Next slide.

So you can see here some of the different types of

services that could be made available as part of the planning and the client will have the opportunity, with the help of the VR counselor, to choose an appropriate employment goal and the services that are going to be provided, the businesses or companies that will provide the services, and the methods for providing those services will also be delineated.

And there's lots of different services that are available to help VR clients meet their employment goals. So throughout this process of -- of -- of planning, evaluation, counseling, guidance is provided and the IEP may include the need for the client to attend different types of training, could be job training, post-secondary schooling, technical schooling, any number of training programs to prepare for employment.

And again all of those would need to be made accessible through an interpreter.

Next slide.

So the next milestone is employment and the VR counselor will assist the client in finding a job. And you can see all of the different aspects of employment, the interviews, the meetings, the employer meetings

on -- once the individual has been employed where there may not be a need to talk about challenging behaviors, there's job coaching, there's supported employment. So VR employs specialists who work with counselors and potential employers to match qualified clients with suitable employment.

And when a client starts working at a new job, the counselor should be informed so that they can assist with any problems. Typically, after a client has been successfully employed for about 90 days, their case will be closed.

Next slide.

You know, an interpreter may become involved in any one of these milestones. Or they may be the interpreter for all or most of these milestones. Regardless, it's imperative that the interpreter always keeps in mind the purpose of the specific -- in mind the purpose of the specific milestone but also what came before it and what will come after it and how all of that contributes to the overall goal of the system. So in those instances where the interpreter is assigned to only one of those milestones, it's important to

remember what came before and how what came before may be influencing what's being talked about now. And in terms of what we're doing now, how that might inform the next step in the process.

If a client situation changes, perhaps they lose or they have trouble keeping a job, they can go back to VR for more help after their case is closed. They may be eligible for post-employment services to help them keep their job, get their job back, move ahead on their job or move to a better job.

If a client needs a lot of assistance, she or he may be asked to reapply for services.

Individuals may leave or exit the VR program at any time during the process. Any one of the steps or milestones that we've talked about.

The VR counselor's job is to navigate individuals through this process in an efficient and effective manner with the -- with the clients' interests at the forefront.

Next slide.

So we're just about ready to wrap up and this slide then provides a quick review of those major milestones.

These are the steps that are required and the activities and services that might occur as part of the VR process. And again an interpreter can be involved in any one of these steps in the process and have to work to adapt their role accordingly.

So, for example, an interpreter assigned to the planning step would benefit from being familiar with the evaluations that were administered during the evaluation process.

Because during that planning process, the findings from those evaluations will be discussed. So the interpreter may ask to -- to read the evaluation reports as part of their preparation. Likewise, the interpreter who's interpreting the employment processes is going to benefit from being familiar with the interview techniques that were rehearsed during the planning and preparation process, so that they would know how to appropriately interpret the form of the responses during a job interview.

As well, at any point during this process, particularly when the VR counselor and the client are not connected, you know, the client is off going through

training or is now on the job going through various situations, this relationship between the interpreter and the VR counselor may continue and the VR counselor may ask for periodic follow-up to talk to the interpreter about how things are going and what concerns they may have and what adjustments might be necessary or what is going on that may have implication for their ability, the interpreter's ability to work effectively with the VR client or for VR to provide services to this client.

And that type of collaboration is an example of interpreters finding ways to fit in effectively in a collaborative manner with the system.

Next slide.

So a couple of take away messages. As we begin to wrap up this webinar. As is true of most systems, VR is a complex system. It's a socio-political system. Socio-political structure because it is related to our societal government structure. It has personnel who have unique skills and ability that provide the services to deaf, hard of hearing, deafblind individuals seeking service from VR. And its various

policies and procedures, the actions of the personnel are all impacted by state and federal rules and regulations. So systems thinking then can be useful to you because it's a way for interpreters to gain valuable insight into how the VR system works. The things that we've talked about tonight and other investigations that you will want to have as you work in the VR setting.

And systems thinking provides you with a way to identify how you might adapt your role and responsibilities. So that you can function more effectively as part of the VR team.

So, for example, keep in mind the goal of informed consent. And respect for the rights and dignity of the VR counselor. And think about how you would manifest this in your own behavior as an interpreter working with VR counselors. And also how you would extend similar courtesy to the professionals in that system.

How might you have to adapt your practices and acts to fit more effectively within that system. Next slide.

Next slide.

Okay. I'm going to open it up to questions and answers in just a moment. But I also wanted to encourage all of you to participate in the next webinar, on Monday, March the 24th, which is on the roles and responsibilities of VR personnel. Presenters for that webinar will be Dr. Cheryl Davis from Western Oregon University and Ms. Pauline Annereno who is the director of the Western Regional Interpreter Education Center of the NCIEC, which is also housed at -- at Western Oregon University.

In addition -- Carrie, first of all, I need to let you know the slide is not correct. I need the slide that says training opportunities, please.

The next one.

There are two other training opportunities we want to make sure that you know about.

First, as mentioned earlier, we have these five modules that are part of an online professional development series that's being offered through -- by the NCIEC through the MARIE Center. And registration for module 3, 4 and 5 still remain open.

And you can learn more about the modules on the MARIE

website.

As well, PepNet will be offering a free six-week quick class on interpreting in VR settings which feeds into our modules and that class is going to run May 19th through June 29th and registration for that begins on April 19th and the website to go to for that is identified here.

Okay. Next slide.

Open for questions and answers.

>> Okay, we have a question from Stephanie. Who asked is it typical for all/most professions to struggle for such an extended time to address and catch up with the increased demands and higher standards or is it unique to our field?

>> Witter-Merithew: Yeah, Stephanie I think that's a great question. It's not -- [Echoing]. Well, Dr. Leilani Johnson [indiscernible] and myself we wrote and published an article in the 2004 journal of interpretation that talks about market disorder. In the field of interpreting. For sure, we -- we experience a high degree of market disorder. We the profession do not have a good control over many of the

factors that are impacting our work.

And we have found it difficult to get ahead of the game. In part because we have been very resistant to some of the change that has come. So, for example, public law 94-142 is a significant example of that. Many interpreters feel very strongly that -- that the education of deaf children in mainstream programs is philosophically or, you know, just functionally not the most effective way. And -- of educating a deaf child and they feel more strongly that deaf children should be educated with other deaf children in an environment where natural language is used and the environment is accommodated to meet the needs of a deaf child.

Whether those beliefs are legitimate or not, I don't intend this to be a philosophical discussion, I certainly have my own views of that as -- as a CODA, having grown up with parents who were very integrated into the deaf community, but they are resistant to public law 94-142. And our continued resistance to our colleagues in K through 12 settings is just an example of how then the -- the broader society has taken over the setting of standards around that particular work

group. That as we have struggled to come to grips with it or to wrap our minds around it, society has continued to move forward. And the same has happened with VRS, video relay services. Initially a lot of interpreters were resistant to the working conditions that are a part of V.R.S. where the interpreter doesn't have the opportunity to prepare in advance or to negotiate information in a more authentic way with deaf callers and that resistance, you know, has delayed our ability to be at the table, helping to set policy and procedure around how that's going to process.

Are we the only profession -- so, there are very legitimate reasons, the demand has always been more than the supply. And legislative trends have impacted that. But our own lack of vision and foresight and willingness to adapt to changing societal trends, the changing needs and interests of the deaf population, et cetera, have slowed us down further. I don't think we're the only profession. Certainly in that article that I mentioned, on market disorder, we -- we talk about the professionalization of different fields and we talk about the professionalization of interpreting.

We have done very well in terms of some of the traits associated with professions but we are very much behind in other traits. So that article may give you more insight. But I would say we are just now an emerging profession and we're behind where teachers are and we're certainly very much behind where the honored professions of medicine and law, psychiatry, psychology, you know, are. And we may always be. I'm not sure.

Some of that may relate to the nature of the work that we do and the individuals that we serve. It's a complicated process, but, yeah, we still have a ways to go.

>> Okay, Jamie would you like you to please further explain how VR is based on eligibility and not on entitlement program. Many individuals who apply believe they have the right to services rather than to be eligible based on a VR specialist's decision. An individual's deafness may presume an individual eligible but he or she may not eventually become a client.

>> Witter-Merithew: Yes. Well, this goes back to

what we talked about in terms of the State's priorities. If there is an order of selection, in processes, then an individual who would otherwise be -- you know, eligible, but whose disability is not so severe as other individuals, who are also deaf but may have secondary or co-current or other challenges that they're dealing with, would have to wait. Or if you go back to the slide that talks about the eligibility requirements, they may not satisfy one of those requirements. They may be deaf. But they may have already been trained or already have specific job skills and so their deafness is not necessarily a barrier to employment.

They have to have a documented eligible disability, but they also have to be someone who is going to be able to benefit from services. And VR has to evaluate that and make a determination.

So it's not -- it's not an automatic entitlement. With the exception if that person is already on SSI or SSDI, and seeks services, they are determined, you know, to be eligible but they may still have to go on that waiting list because their need is not as great as someone else's.

>> Elaine asks: Dealing with the order of selection, is it the customer's responsibility to find outside resources or does the VR counselor assist with that?

>> Witter-Merithew: Yes, we talked about that on one of the slides, even if someone was to be determined not to be eligible or they're placed on the waiting list, the VR counselor is still going to provide them with resources about where they could go to get assistance other than within VR.

What other agencies, what other, you know, organizations might provide similar types of services like a Goodwill Industries or, you know, some other entity.

>> Can you differentiate between what you refer to as adapting our role in the system as part of the VR team and that of becoming advocates instead of facilitators of communication as interpreters.

>> Witter-Merithew: Well, you know, advocacy is a very broad term which means a lot of things to a lot of different individuals. And so I'm not using the term advocacy. What I am encouraging is that we move

from this faulty execution of our role as detached and disinterested, this, you know, in our effort to be neutral and invisible, to being engaged and attentive and collaborative where we very clearly want this all to work well and that we -- we more openly talk about and negotiate for what we need to make the process even more effective.

And that if we are part of the system, even if it's just for the moment that we're a part of the system, you -- meaning I'm a free-lance interpreter and I've just come in for these few hours today with the employee, I always have the goal of VR in mind and I appreciate its goal in working with this client and I do everything that I can to create a -- an interpreted interaction that is successful. And if necessary, that I -- then I would reach out and collaborate with other individuals within the system, VR system, the VR counselor, the agency that sent me there, you know, to report anything that was a barrier to it working well.

That's -- that is what I am suggesting. And then, you know, to the degree that our code of ethical conduct indicates that we can, inform parties of resources that

exist, that may be useful to their goals, certainly, we could do that as well.

What I see happening, the reason that I'm emphasizing this adapting of our role is because here's what I see happen. I see too many instances of interpreters who -- we're always so concerned about breach of ethical standards because interpreters cross the boundary, what we perceive to be the boundary. Really and truly I'm less concerned about that. I'm more concerned about the acts of omission where interpreters fail to do something they should have done and nobody is the wiser. Like they failed to ask for clarification when they needed it. They failed to use consecutive interpreting when they should have, they failed to let people know that things were not happening the way the parties might be assuming that it was happening. Those failures of omission are severe breach of duty, in my opinion. And I think that it's -- you know, it's essential that as interpreters we -- we take a step back and look at how we interface and how we relate to the systems in which we work and we strive to become more collaborative. We always look

for the system to adapt to us. And I think that's very interpret-centric. I think it's time -- because we're usually what's unique to the system, the system is always there, always operating and we move in and out. So therefore it's incumbent on us to figure out how to adapt and fit in rather than expecting that the system can change what it is to adapt to us.

So I hope that that's a helpful response.

And you might benefit, if you would like to know more about what I'm talking about, by going back to the first webinar we offered which is archived on our website. And it talks about interpreters as system thinkers. And what that looks like.

>> Thank you, Anna, that's all of the time that we have for today for questions.

>> Carrie, just real quickly, if you could go to the next two slides. I just want to make sure that people know our funding source on this next slide. And then on the next one is our contact information, and also I can be contacted at Anna.witter-merithew@unco.edu. If there are questions that remain that didn't get answered tonight, please be sure to send them to me,

I would be happy to send you a response. Thanks, everyone.

>> Thank you, Anna, and thank you to our interpreters, Kirk and Darlene, and our captionist Terry and of course to NCIEC for helping us fund this webinar. For earning your CEUs it is important that you are here for the entire webinar. I checked the list of people who are logged in, compared to CEU requests. There's a survey under the materials list and I will be sending out a -- a link in a few minutes to all of the participants. Please fill it out, whether or not you're going to ask for CEUs or not because we need your opinions. It's a satisfaction survey, but it also does include CEU questions and your opinion is very important to us.

If you are requesting CEUs please be patient, it can take up to eight weeks for the CEUs to be posted through your transcripts to go through the entire process. If you were in a group of viewers in the email that I sent out today there was an attached sign-in sheet. That is only for groups of people. People who could not log in or who were logged in under one name. If you were

an individual and you were sent a link and you logged in, please do not send me a sign-in sheet. The software has recorded your log in times for me.

If you have any questions, please send me an email at Carolyn.white@unco.edu and I hope to see you all next month. Thank you very much. Good night.