Follow-Up Survey Into the Residential Needs of the Physically Disabled of Waterloo County: Participation in an On-Going Research Study

Larry Elgin Brigham

Wilfrid Laurier University

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Follow-up Survey Into the Residential Needs of the Physically Disabled of Waterloo County: Participation in an Ongoing Research Study

by

Larry Elgin Brigham B.A.

A Research Essay submitted to the Graduate School of Social Work, Waterloo Lutheran University, in partial fulfillment of the degree Master of Social Work

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I. HOW I BECAME INVOLVED AND AT WHAT POINT

The Social Planning Council of Kitchener-Waterloo had appointed a committee to investigate the needs of the physically handicapped in Waterloo County. A detailed account of the evolution of this committee can be found in a paper by my classmates, Edward Mavor and Judy Rees-Thomas.

The sub-committee to which I will be referring throughout this paper is the sub-committee on the residential needs of the physically disabled. This sub-committee was formed as it was felt that there were too many facets to the problems facing the physically disabled to be handled easily by one committee. In order to organize most efficiently, the Executive Committee on Needs for the Disabled, of the Kitchener-Waterloo Social Planning Council, formed three sub-committees on recreational, vocational and residential needs. The sub-committee on residential needs is chaired by Bruce Lumsden who himself sits on the Executive Committee.

To understand the progress of the sub-committee in the area of research, I again refer the reader to the paper by my classmates. They have outlined the topic area, and the formulation of both the research problem and the hypothesis.

One further point needs clarification. This is a "Follow-up Survey" to a more general study completed by Ronald Walsh in partial fulfillment of his Master's degree in psychology. The
original study involved a sample of 137 physically disabled persons of 275 who were sent by mail an invitation to assist in the research. The original study dealt with all areas of need; residential, vocational and recreational. The findings in the area of residential need were not considered adequate, by the sub-committee on residential need, to make any definite plans, as they were only of a preliminary nature. It is from this original survey that our 32 cases for intensive study, with regards to residential needs, were chosen.

In July of 1969, I received a telephone call from the Executive Secretary of the above-mentioned Executive Committee and agreed to assist the sub-committee in a test-run of their "Follow-up Survey" during the month of August. As time went on, I was to become involved in the actual administration of the interview guide, and then in the collation and analyzing of the data, while acting in an advisory role to the sub-committee. These, then, are the topic areas which follow in this paper.
II. DESIGN

(a) Objectives of this Particular Study:

The feasibility of a "pilot residence", in Waterloo County, for the physically disabled was to be explored. The "pilot residence" was to be a test to ascertain the needs for any expansion to a larger size residence or residence system. The problems and assets of the persons, possibly entering such a residence, were to be ascertained. The knowledge of these problems and assets would hopefully lead to a more reasonable, physical structure for the residence. It would also, perhaps, indicate the emotional and social needs of possible residents. An indication of the area of locating the residence, whether rural or urban, was also to be gained. The amount of involvement in the actual planning of the residence, which the disabled persons would take, would also need to be assessed.

(b) The Method of Data Collection:

An interview guide was derived largely from similar studies completed by the Minnesota Society for Crippled Children and Adults (MSSCA) and the State of California. A copy of this interview guide is enclosed. (Appendix A). It was felt, by the sub-committee on residential needs, that reliance on the research completed by other groups and on their format of investigation would greatly reduce the amount of work needed to construct an interview guide. The questions extracted from these two studies were comprehensive, but it was necessary to change some of them to adapt
them to the local Ontario situation.

(c) Test-Run and Changes

The interview guide had been developed by the sub-committee, but in order to work out any flaws in it, a test-run of four cases was done. These cases were selected from the original survey by Ronald Walsh. The cases were meant to be representative of the larger sample, especially in the following three areas: male-female, in home or in an institution, and answers of "yes" and "uncertain" to a question enquiring if the disabled person would be interested in entering a residence.

It was proposed that the test-run would be used to indicate the need for additional questions or the deletion of others. Unforeseen difficulties in phrasing, sequence of questions or meanings of questions were to be clarified and any needed changes made by the sub-committee.

The interviews were all done in the living accommodations of the disabled respondents. The original interviews in Mr. Walsh's study had been done by volunteers from various walks of life. Since the disabled persons were familiar with these volunteers, the sub-committee arranged for the volunteers to make the appointments with the disabled persons. The interviews were done jointly by myself and a volunteer, following a training session with the four volunteers, to familiarize them with the questionnaire and its purpose.

An attempt was made to elicit the feelings of the disabled
persons about the questions. The emotional reactions of the respondents seemed quite generally relaxed during the questioning. Replies were all made by the respondents themselves although it was noted that in some cases, in which speech was a difficulty, help might be needed from an outside person, such as a parent or friend.

At times during the interview, when fairly intimate questions were asked, the volunteer seemed to me to be somewhat uncomfortable and this was conveyed to the disabled person making it more difficult for them to answer these questions.

In conference with the sub-committee, the interview guide was changed. The original interview guide was far too difficult to read. It was decided that the interview guide would be made more clear by a different printing process. A consecutive numbering system for questions would cut down on confusion in coding and tabulating and this also was to be changed.

In content, several of the questions had missing responses added. For instance, in the question "would you help with administration?" in addition to "yes," "no," and "uncertain," the possibility of an "unable" response was also given.

The question on finances was completely deleted. This question caused concerns in the disabled persons' minds which we were unable to answer or help them solve at this point in time. It was thought that this particular question raised far too much anxiety. If the area of financing was to be examined it should either be done in full, or not at all, the sub-committee decided.
As the sub-committee did not know what was hoped to be gained by such a question it was deleted.

The "use of hands and legs" each had a respective question on the original interview guide. It was decided that if someone could feed, bathe, dress himself or carry on these daily living routines by himself, this would be the thing which interested us and not the use of arms, hands or legs. These questions were omitted on the second interview guide for that reason.

Many general questions arose from the respondents during the interview. In each case these questions were somewhat unique and were thought to contain important material which might be valuable to the sub-committee in the future. For this reason two rather open-ended questions were included at the end of the second interview guide: "What further information or help would you like to have before you can make a decision?" and "What worries you about considering life in residence?" Also, the interviewers on the regular survey would be encouraged to note any points made by the respondents which were not directly required by the interview guide. After all changes were made a new interview guide evolved. (Appendix B).

(d) Observer and Observed:

The sub-committee discussed the relative advantages and disadvantages of having volunteers from the community involved in the "Follow-up Survey." Community involvement was seen as advantageous both to better inform the public and because in
the case that private financing was to be attempted for a pilot residence a reservoir of support would be readily available. On the other hand, the problems in administering an interview guide which was fairly personal, dictated against the use of volunteers. On Mr. Walsh's survey difficulties in arranging times for interviews was also found. The committee decided that, in light of this, an attempt would be made to involve the students from the Graduate School of Social Work (G.S.S.W.) at Waterloo Lutheran University. These students would be capable of handling such interviews. They would also have the benefit of interviewing handicapped people thus offering them a unique learning experience. Mr. Walsh approached Dean F. Turner of G.S.S.W. and received support for the research.

As mentioned earlier, the respondents were 32 physically disabled persons from Waterloo County drawn from the 137 surveyed in the original study. These particular cases were chosen because they had responded either "yes" or "uncertain" to a question intended to derive whether they would enter a residence if one were available.

They were actually a sampling of the group Ronald Walsh refers to in his study:

Nineteen persons of 20% answered that if a Community Residence were made available in Kitchener or Waterloo within a year or two, and were within their approximate financial means, they would want to live there as soon as it was completed or within 2 to 6 years after completion.

Moreover, an additional 35 persons (or 36%) replied that they were "uncertain, depends upon my parents or others being able to continue to care for me."
Mr. Walsh suggests a follow-up of both groups and this then is the derivation of the sample chosen.
III. RESEARCH PROCEDURE

(a) The Letter:

On October 20, 1969, a letter was addressed by W. R. Woods, Executive Secretary of the sub-committee to the 32 persons who had been selected. (Appendix C). It was intended to inform these disabled persons that a student from G.S.S.W. would be calling them to arrange an appointment. The area of discussion was clearly defined as concerning the pilot residence.

(b) The Interviewers and Their Training:

Five other students from the second year class at G.S.S.W. on a field work placement at the Waterloo County Children's Aid Society were approached individually and agreed to help in the administration of the interview guide. Miss Marion Shiell supervised the following students: Dale Ackerman, Leslie Jordahl, Ted Mavor, Judy Rees-Thomas, Richard Weber and myself.

The interviewers were instructed:

1. To arrange by phone a suitable time and date for an appointment in the present residence of the disabled person they were to interview.

2. To interview the disabled person and not his parents if possible. If the family are present, keep the direct questions to the disabled person. Make a note of any material which is not gained from the disabled person so that the two are separate.

3. Be sure to emphasize that the interview is for fact-
finding and on behalf of the Kitchener-Waterloo Social Planning Council. Our hopes of possibly establishing a residence can also be mentioned.

4. Every attempt should be made to obtain unbiased answers. If one word replies do not answer the question, a longer written form should be used.

It was assumed that confidentiality would be respected by the professional interviewers. Also, a great deal of skill in interviewing was assumed as the interviewers were social work students. It was indeed interesting, however, that many of our experiences with the disabled during the administration of the questionnaire were shared. Many of us had never interviewed a disabled person before and this offered a unique experience.

(c) The Interview:

The interviews were of a semi-structured nature. Thus very clear-cut, factual information was obtained but room was also allowed for more non-directive questions in certain parts of the interview.

In some cases, students from the first year class at G.S.S.W. accompanied a second year student to do the interviews. This, I feel, would not have changed the research results to any great extent. Parents of the disabled person may have been present, in some cases, while the interview was in progress. In these cases one wonders at what effect family pressure has on the disabled persons responses. Parents were necessary, however, in some cases
as the disabled person could not communicate or could not communicate except through them.

The respondents all wanted and arranged time for an interview with the exception of three people. These three indicated that they did not want to talk. Two felt that they would not be in need of residence for some years and resented having to help fill in a questionnaire. One felt that he would like a residence but indicated some concern about confidentiality of information, and the fact that he would like to talk when the residence was more of a reality.

Other than these three, judging from the comments of my colleagues, many of the disabled took a great deal of interest in the interview guide and the possibility of a residence. Many comments of length were added to the margins to further clarify some issues and to raise new questions. Both indicate the amount of interest and enthusiasm generated by and for the interview.

(d) Interim Report to Sub-committee:

The chairman of the sub-committee was realistically very concerned that interest be maintained within the committee and in the community with regard to the pilot residence. The need for work which the sub-committee could carry on while the research was being completed posed a problem.

A discussion between the chairman of the sub-committee, on the residential needs of the disabled, and myself derived the
following conclusions:

1. A pilot residence was needed;

2. Many of the respondents to the interview guide were willing and should be involved in the planning of this pilot residence. A number of these people would be useful in an advisory role to the sub-committee or actually sitting on it.

3. The committee had vast areas which could be examined aside from the research, such as financing, building permits, and government regulations.

4. Respondents should be made familiar with the progress of the sub-committee from time to time.

Following our meeting, a letter was sent to the chairman to give him more details of the study. (Appendix D).

(e) Collation of Data:

The establishment of categories was made as follows: present living accommodations, location of residence, residential life, communication skills, interests and hobbies, activities of daily life, professional services required, desire to enter a residence, and desire to assist in plans for residence. The material collected on the interview guides occupied too much space and was cumbersome to interpret in this form. The material was therefore extracted from the interview guides and placed on a simple face sheet, (Appendix E) by coding it as shown in Appendix F.

Each of the interview guides was reduced through this procedure to one page of data which could be more easily tabulated.
The questions which required "yes" or "no" answers were easily coded, but some questions, notably the final two refused any form of coding. Question #4 also posed many problems in coding, and although lengthy responses were given in some instances, only three possibilities were finally decided upon: "yes", "no", and "no response." The inevitability of losing some material through this method causes the researcher some concern. Although this may have occurred to a greater or lesser extent in other questions, the need for a coding system outweighed other considerations.

(f) Analysis of Data:

A simple tabulation, by hand, of each question was made. The need for cross-tabulation did not seem present. With regard to the open-ended questions (#36 and #37) a general narrative analysis is given in the first section of the findings.

All the interview guides were examined with regard as to whether the disabled person would like to act in an advisory capacity to the residential sub-committee. It was felt that persons who were disabled, but did not intend to enter the residence, might have as much to offer in planning as the disabled persons wishing to enter the residence.

Only the interviews in which the respondents answered "yes" or "uncertain" were examined with regard to the possible needs within a disabled persons' residence. The first assumption was that the information supplied by these particular individuals would supply the only valid answers to the actual needs in such a residence.
Secondly, it was assumed that the disabled persons were aware of and did know their own needs better than anyone else. This includes both: (1) whether they would require a residence or not, and (2) if they did require a residence, what their needs would be within such a residence.

The main categories in the findings section, then, relate to the actual needs of the disabled as they themselves see them, including (1) physical-biological needs and (2) social-emotional needs. The answers to the questions on the interview guide almost entirely fall under only one of these categories and therefore there is a high degree of exclusiveness in the categories.
IV. FINDINGS FROM DATA ANALYSIS

(a) General Findings:

The replies to the question "Would you be interested in meeting, from time to time, to discuss residence as an advisory group to the Residence Committee, Social Services for the Disabled, K-W Social Planning Council?" brought 21 "Yes" replies, 6 "No" replies and 5 were unanswered. This, I would suggest, shows a great amount of interest in participation with the Committee.

A number of replies indicated a need for some service to relieve parents or relatives of the physically disabled person, in order that the parents might go on a holiday or have a weekend without the responsibilities of caring for the disabled person.

Again, from the 32 respondents it was noted that 20 were very concerned about what they would do if their present help (parents or relatives) failed.

The term "pilot" residence was perhaps a poor one in talking with the physically disabled. It worried many of the respondents whether this would be a permanent residence or whether they would find the residence closed in a period of time with themselves having no place to go. A better choice of words might be made in lieu of "pilot" residence as this terminology has a connotation of temporary or not permanent.

In the later sections of the findings the needs of the 17 persons who showed a definite interest in the residence will be outlined. Now, however, I intend to give the factual findings as to the
present status of these people:

Age: 9 were 15–20 years of age
      5 were 21–40 years of age
      3 were 41 years and over

Sex: 9 were male
     8 were female

Marital Status:  
      16 were single
      1 was widowed

Present Residence:  
      12 live in Kitchener or Waterloo
      5 live outside these cities

Live With or In:  
      10 parents
      3 relatives
      2 nursing home
      1 hospital
      1 themself

Plans If Present Help Fails:  
      4 have plans
      7 are uncertain what they will do
      6 did not reply

Disability:  
      12 cerebral palsy
      1 quadriplegia
      1 rheumatoid arthritis
      3 polio

Employment:  
      4 employed
      13 not employed

Education:  
      11 public school
      4 high school
      2 gave no reply

(b) Physical-Biological Needs

(i) Professional Services Needed:

Nursing:  
      2 had a need
      14 did not have a need
      1 no reply
Medical: 3 had a need
13 did not have a need
1 no reply

(ii) Diet: all 17 had a basically normal diet

(iii) Medication:
- 9 no medication normally used
- 4 can look after own needs
- 1 require non-medical help for medication
- 2 require medical help for medication
- 1 no answer

(iv) Weight of Person:
- 4 weighed under 100 lb.
- 6 weighed 100-125 lb.
- 3 weighed 126-150 lb.
- 2 weighed over 150 lb.
- 2 gave no reply

(v) Activities of Daily Life:

Mobility: On Level:
- 5 walk without the aid of another person or device
- 1 walk with aid of cane, crutches or walker
- 4 were confined to a wheelchair but completely independent
- 2 were confined to a wheelchair needed assistance occasionally
- 5 were confined to a wheelchair needed assistance to move chair

Mobility: On Stairs:
- 5 climb stairs unassisted
- 1 climbs stairs with assistance
- 11 can't climb stairs

Eating:
- 8 feed themselves without help from another person
- 1 food must be carried to them and arranged
- 1 food must be carried to them and arranged, meat cut, etc.
- 2 food must be carried to them and arranged, meat cut, special feeding equipment needed
- 5 food must be brought and fed to them
Dressing:

5 can dress themselves
2 need help with buttoning clothes/or putting on or removing shoes
3 need help getting into some clothes and the above
7 must be completely dressed by another person

Bathing:

7 can get in and out of bathtub or shower and can bath without help
1 bathes self in bed
5 must be lifted in and out of the tub and must be bathed
4 must be bathed in bed by another person

Toileting:

8 can go to toilet by self without any aid from another person
1 must use bedpan and urinal
3 must be helped on and off the toilet but need no further help
2 must use bedpan and urinal and must be helped on and off
2 must be helped on and off the toilet and assisted while toileting
1 must use bedpan and urinal, be helped on and off, and need assistance while using

Hair Care:

6 can completely care for own hair
3 must have hair combed by another person
10 must have hair washed by another person
1 other

Tooth Care:

10 can brush own teeth
7 need help to brush teeth

Shaving:

3 shaves self
5 needs assistance
1 other
8 not applicable
Bed Transfer:

7 can transfer in and out of bed without help
1 can transfer out of bed but needs help getting back in
8 must be lifted both in and out of bed by a person
1 must be lifted both in and out of bed by a mechanical lift
1 cannot leave bed

Special Assistance:

Is required for catheters, limb braces and during menstrual periods of some of these disabled persons.

(c) Social-Emotional Needs:

At the present time the disabled are experiencing many frustrations which might be remedied by a residence to some degree to make their social-emotional life more gratifying. They stated that in their present situation:

(i) Architectural Barriers Pose A Problem:
   12 Yes
   5 No

(ii) They had a Desire for Independence and a "Home of Their Own":
   6 Yes
   7 No
   4 Not applicable

(iii) The Rising Cost of Living Was a Problem:
   5 Yes
   6 No
   5 Not applicable
   1 Not answered

(iv) Had Difficulty Getting Help When Needed:
   5 Yes
   12 No

(v) Needed More Friends Their Own Age and Disability:
   15 Yes
   2 No
(vi) Were Having Conflicts With Persons They Were Living With:
   5 yes
   11 No
   1 No Answer

(vii) Further Information:

In answer to "what further information or help would you like to have before you can make a decision?" to enter the residence it became apparent that the prime concerns were with "what the residence would be like." Administrative details such as staffing, how many people would be there, who they would be and what facilities would be offered all, were given as responses in more than one interview. The problems concerning personally financing a stay in a residence were mentioned by five respondents.

(viii) Concerns in Moving Into a Residence:

The last question on the interview guide, "What worries you about considering life in a residence?" brought responses of great variety. Financial arrangements were given as the paramount "worry."

The adjustment problems were seen as very important. Remarks such as: "adjusting to the time schedule," "going into a strange place with strange people," "adjusting to a new life," "what would happen to my cat?" and "worried that someone working there would not understand my needs" all show a concern for social and emotional adjustment.

(ix) Accommodation Preference:

   Location:
   10 preferred a city location
   2 preferred a rural location
   5 had no preference
3 who chose city said that the location would make a difference
14 said that location would not make a difference to their desire to enter or not enter it

Single or Double Room:
10 preferred single room accommodation
6 preferred double room accommodation
1 gave no preference

Male or Female Residence:
2 preferred an all-female residence
13 preferred a mixed sex residence
2 gave no preference

(x) When Used:
4 would plan to be out during the day from the residence
9 would plan to be in all day at the residence
3 would use residence in other times
1 gave no reply
12 would use the residence seven days a week
2 would use the residence five days a week
3 would use the residence periodically
2 would use it on weekends
1 other use for residence

(xii) Employment:
4 were employed
12 were not employed
1 gave no reply

(xii) Education:
11 had public school education
4 had high school education
2 gave no reply

(xiii) Ability to Communicate:

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(xiv) Willingness and Ability to Help:

With Administration
9 would
2 would not
3 were uncertain
3 could not, were unable

With Janitorial or Housekeeping Chores:
8 would
3 would not
1 was uncertain
5 could not, were unable

In Own Room:
8 would make their own beds
8 would change their own beds
10 would dust and clean their own rooms

With Another Disabled Person:
15 would help
1 would not
1 was uncertain

3 stated specifically that they would help emotionally
5 stated that they would help emotionally and physically
9 gave no reply

(xv) Meal Preparation:
11 would like all three meals prepared
5 preferred to prepare their own meals
1 gave no answer

9 would help with meal preparation
2 would not help with meal preparation
1 was uncertain
5 were unable to help

(xvi) Interests and Hobbies:
14 watch T.V.
9 enjoyed reading
5 played cards
3 enjoyed playing games
2 sewed
9 had other interests or hobbies

Many seemed interested in the possibilities of socializing with other handicapped people and there would be organized recreation,
an occasional guest speaker or trip. One specifically mentioned that she would like work brought into the residence suggesting that she could baby sit.
V. CONCLUSION

The focus of this formulative-exploratory study was the physically handicapped people 15 years of age and over in Waterloo County. The research was specifically designed to provide information from a series of interviews in order that recommendations could be made concerning a possible new resource: a "pilot" or experimental residence for the disabled.

Because of the nature of the research design there was no implicit or explicit hypothesis. To my knowledge no hypotheses have been formulated in this particular area of study, that being residential needs of the physically disabled. Several hypotheses seem to have emerged: (1) It seems that a relationship exists between the biological-physical needs of the disabled who have shown an interest in possibly entering an experimental residence and the personnel policy which should be implemented. (2) It seems that a relationship exists between the social-emotional needs of these same persons and (a) the program (b) policy and (c) structure of the building. Several suggestions as to what these relationships might entail are found in Section VI.

The lack of any studies proving that certain physically disabled persons do in fact benefit from being in a residence was of constant concern to the researcher. It has not been proven that some persons are actually freed to live more full, pleasant, and rewarding lives by moving into a residence. There are no studies to say which physically disabled benefit or do not benefit by such
a move. It is therefore suggested that further research is necessary
to discover (1) if a residence does or does not benefit some physically
disabled persons. (2) who the persons are who benefit. Some methods
might be suggested: (1) a study of the group moving into the residence
both "before" and "after" by (a) interviewing these persons to obtain
their feelings (b) use of projective psychological tests (c) inter­
viewing relevant others, such as parents, who are close to the
physically disabled person. (ii) A study of a comparative group of
disabled persons, who were not moving into the residence, by similar
 techniques to those mentioned above.

A study such as this might lend more credibility to the need
to establish more residences for the physically disabled both in
Waterloo County and indeed throughout North America.

A comparative "before" and "after" study might also be done
between the Waterloo project and Bellwoods in Toronto in order to
establish the benefits and detriments to the physically disabled
inherent in a large residence (Bellwoods having 56 residences) as
compared to a smaller scale project.

It must be mentioned now that an experimental stage would only
come when the pilot residence was ready for use. At that time the
earlier hypotheses could be tested. At the same time the "before"
and "after" study of the clients health and social functioning could
be made.
VI. IMPLICATIONS

(a) General

This research was to determine the need for a residence for the physically handicapped over 15 years of age in Waterloo County and to make planning recommendations for this new resource. In the earlier survey 275 disabled persons were identified in the county, by various social agencies. Of these 275, only 137 responded to a letter sent to them. From the 137 persons originally interviewed it was determined that 34 would be possible clients for a residence.

It is interesting to speculate whether most of the disabled persons in the county had been identified by the original survey. If we assume that they were not, as we have good reason to believe, we would then suggest more persons are in need of a residence than the actual number shown in the Follow-Up Survey. Again, it is also interesting to speculate as to the 138 disabled persons who did not reply to the original letter. If we assume that they are somewhat similar to the sample interviewed, we might then immediately double all the figures shown in our results. For example, it was found through this Follow-Up Survey that 17 persons could use or had a need for a residence. Taking the above-mentioned assumptions we can say that at least 34 persons in the county, or more, have a need for a disabled persons residence — a clear mandate for action towards its establishment.

It should also be mentioned that as Bellwoods in Toronto is the only residence in Ontario, a residence in Waterloo County would
probably receive applicants from other parts of the province as well. At this time, however, a pilot residence in Waterloo County will not even meet the needs of this location. Further consideration will have to be given to a larger size project in the future. A word of caution, it would be a mistake to assume that a larger project would necessarily mean a larger building as it might just as well mean many small residences throughout the community with centralized administration. Only through examining by research, the relative advantages and/or disadvantages both socially-emotionally and physically-biologically to the disabled persons entering both types of accommodation can any conclusions be made.

The disabled have undoubtedly shown a willingness and interest in assisting in the development of the plans for residence. This great human resource would be valuable to give first hand information as to needs and concerns. Collaboration with the disabled at all stages of planning would also keep them informed, and less weary and fearful of entering a residence.

Two points mentioned earlier will be restated: (1) There is a definite need for some form of vacation or weekend relief on occasion for parents of the disabled. (2) Many respondents are worried about the possibility of losing their present form of help and what they would do in such a case. I mention these as they are the points which seem to fall somewhat outside of the realm of direct ongoing residence accommodation. The second point indicates a possible future need. The first point a present need which might indeed be
met by the residence or perhaps by a visiting homemaker hired by Services for the Disabled for the purpose of living-in the home while relatives of the disabled are on holidays.

From the results of this study who are the disabled wishing to enter a residence? An examination of 17 cases was made of those showing a definite interest in a residence. Most (14) were under 40 years of age. There was almost equal division of males and females. All were unattached. Most live with their parents in Kitchener or Waterloo. Twelve had cerebral palsy. Four were employed and most (11) had a public school education.

(b) **Physical-Biological Needs**

Both medical and nursing attention will be needed from time to time but it would appear that there is no need for full time professional help but rather an appointed physician and nurse. It would be assumed that the physician would fulfill the duties specified in Sections 11, 12, and 14 of *The Charitable Institutions Act*. A space for examination purposes would be necessary. The Victorian Order of Nurses might be reimbursed for services rendered on an occasional basis if this were feasible. It would not be necessary to have a registered nurse on staff if there are no residents in bed care as specified under Section 13 of *The Charitable Institutions Act*.

The administration of medication can normally be handled by the disabled person himself. Over half were not on medication. Each case will have to be regarded individually with respect to medication.

It appears that no special arrangements will have to be made
for diet as all respondents have a basically normal diet. I would again refer the reader to Section 5(1)(a) of The Charitable Institutions Act for further specifications.

As to mobility it seems greatly limited in the cases studied. There is a special problem in manoeuvring on stairs with a majority (11) being unable. It seems imperative, therefore, that the residence be on one floor or at least have an elevator. Other architectural changes will have to be made such as railings in rooms, toilet facilities, and halls. A larger space is generally required for wheelchairs than is normal.

Eating, dressing, bathing, toileting, hair care, tooth care, shaving and transferring in and out of bed caused problems for a significant number of the disabled persons being referred to here. The most help would probably be needed in dressing. If a disabled person can help another disabled person in any of their daily activities it should probably be encouraged as at Bellwoods. Special assistance is required for catheters, limb braces and during the menstrual periods of some of the disabled persons.

(c) Social-Emotional Needs

Very little is stated specifically in The Charitable Institutions in Section 6 b, which outlines the social-emotional needs: "In every charitable institution the board shall,

(a) arrange for suitable religious services to be available for all residence;

(b) provide opportunities for the residents to participate in recreational, rehabilitative and hobby craft activities; and
(c) ensure that each resident receives, at all times, care adequate for and consistent with his individual needs.

It is easy to agree in principle and intent with these regulations. In the following paragraphs I will explain more fully "the needs" as outlined by the disabled persons interested in entering a residence.

The disabled person entering residence seems to have a great need for more personal contacts. He simply needs more friends. But before moving into a residence he will want to know much more about the building, the administration and the financial cost to himself. He will also require help in socially and emotionally adjusting to this new setting.

A city location would best meet the handicapped persons' needs. Most of them come from the city themselves. Although operating expenses such as taxes may be higher in the center of the community, such a location would meet many of the needs such as transportation to work, access to shopping and access to recreation much more effectively.

There was an overall preference for single rooms (10) but this did not exclude an interest in double room accommodation. Both types are probably needed. The first, for privacy and because of previous arrangements before coming to the residence and the second because of the benefits which might arise by a mutual helping with the activities of daily life. Some people, too, just seem to be more gregarious than others.

The disabled persons seemed to favour a mixed sex residence. Social adjustment with the opposite sex has generally been thwarted
due to lack of contact in many cases. A mixed sex residence, however, will cause certain structural problems which the subcommittee will have to examine in whatever building is available.

Four of the seventeen disabled persons would plan to be out of a residence during the day in order to work. Others (9) saw the residence as a place where they would spend the entire day. Most (12) would use the residence seven days a week. This indicates the need for available activities and hobbies. Most (14) of these people do watch television from time to time and this seems to be the first and most important item. Other hobbies and interests include reading, playing cards, playing games, and sewing. There is a wide range of other activities that individuals have. Any activities or involvement within the residence must keep in mind that most (11) of the persons interested in entering have only a public school education. This was a major problem at Bellwoods in that anyone having more education felt ostracized or isolated from some of the programmed activities.

There is no problem in having the disabled persons understand communication to them as they all have good hearing and sight. The problem is the person on the receiving end of communication as there is some difficulty in speaking in many (9) of the disabled. This could be a frustrating experience for the disabled person.

A majority of the disabled would be willing and have the ability to help with administration, janitorial and housekeeping chores, making their own beds, changing their own beds, dusting and cleaning. They would also assist another disabled person in any way they possibly
could. A community effort in all these would lend itself to the bolstering of dignity and self-respect by the self-help process. It would also lighten the burden on the residence staff.

An attempt to meet the physical-biological and social-emotional needs of the possible residents in the pilot residence, which is indeed needed, will show its benefits both to the disabled individuals and to the community.
APPENDIX A

Services for the Blind
Residence Committee

RESIDENTIAL INFORMATION

NAME ____________________________ ____________________________
(last) (first)

ADDRESS ____________________________ ____________________________

CITY or TOWN ____________________________

TELEPHONE __________ AGE __________ BIRTHDATE __________

SEX ________ CRITICAL STATUS __________ QUEST. NO. __________

WEIGHT __________ MEDICAL NAME OF DISABILITY ____________________________

INTERVIEWERS ____________________________ ____________________________

Physical Impairments

1. I presently live: (check one)
   _____ with my parents   _____ in a nursing home
   _____ with relatives   _____ in a hospital
   _____ with friends
   _____ Other __________

2. Who provides most of the help which you now require? (check one)
   _____ independent and do not need anyone to help
   _____ mother and father ages: _____ and _____
   _____ mother only age _____
   _____ father only age _____
   _____ relative/friend age _____
   _____ hired employee
   _____ Other ____________________________
Physical problems/serious health problems of a member of the family.

Increasing cost of living.

Difficulty in getting help when needed.

More friends my own age and disability.

Increasing disability.

Marriages or brother/sisters.

Failing health of parents.

Needed for parents to handle.

Death of parent(s).

Other ________________________________

________________________

4. I strongly support the idea of having a Variety of assistance programs to help people of your situation. I feel that the various programs help people of your situation
as an advisory group to the residence committees, social services for the disabled, K-W social planning council?

Yes ________ No _______
A residence is more than a place to eat and sleep. It is a community where each adult must give and take to the best of his ability for the benefit of all.

1. a) Preference: _____ City _____ Rural why?
   b) Would the location make a difference? _____ Yes _____ No why?

2. a) Type of Accommodation: _____ Single room _____ Double room why?

3. Prefer residence to be: _____ all male _____ all female
   or _____ both

4. Willing to help another disabled person in residence?
   _____ Yes _____ No _____ Uncertain

5. Help with administration (typing, etc.)?
   _____ Yes _____ NO _____ Uncertain

6. Help with janitorial or maintenance chores?
   _____ Yes _____ No _____ Uncertain

7. Would you
   _____ Make own bed
   _____ Change bed
   _____ Dusting and cleaning own room

8. Meals
   _____ All three meals prepared
   _____ Two meals prepared
   _____ One meal prepared
   _____ Cafeteria style - "pay as you eat"
   _____ Prefer to prepare my own meals

9. Help with meal preparation?
   _____ Yes _____ No _____ Uncertain

10. Do you have transportation to church?
    _____ Yes _____ No _____ Do not need
15. Have you served in the military?
   - Yes
   - No

16. Leisure and hobbies:
   - Plays cards.
   - Plays other games.
   - Knits.

If female:
   - Sews.
   - Knits.
   - Cooks.

17. Would you use the residence? (check one)
   - Seven days a week (weekends included).
   - Five days a week (Sunday night through Friday supper).
   - One half day to work on school.
   - In the residence all day.
   - In residence all days except for HOLIDAYS (all weekends).
   - In residence part of the day (between 9:00 - 5:00).
14. On an assumption that the cost of residence is approximately $9.00 per day ($63.00 per week), what amount do you feel would be within your financial means?

$_______ per week.

**ACTIVITIES OF DAILY LIFE WITHIN A PROPOSED RESIDENCE (INDOORS)**

1. Check one:

- Walk without the aid of another person or device (appliance).
- Walk with the aid of cane, crutches, walker, or by holding on to walls or furniture.
- Walk without the aid of another person, but also use wheelchair part of the time without aid.
- Confined to wheelchair but completely independent except for architectural barriers (including all customary transfers).
- Walk without the aid of another person but also use wheelchair part of the time with the aid of another person, or walk only with the aid of another person.
- Confined to a wheelchair and can use part of the time without aid, but move from occasional assistance.
- Confined to a wheelchair and can use only with the aid of another person.

* Architectural barriers are any feature of a building or its surroundings, or of a community, such as curbs, steps, narrow doors, carpeting, broken walks, etc., which prevent the otherwise free movement of a person in a wheelchair.

2. Check one:

- Climb stairs unassisted.
- Climb stairs with assistance.

3. Check one:

- Diet is essentially normal.
- Meals include some specially prescribed items.
- Diet is completely prescribed.

Other

- 5 -
4. Use of arms and hands:
   - Normal use of arms and hands
   - Normal use of one arm and hand and partial use of the other.
   - Partial use of both arms and hands.
   - Partial use of one arm and hand and no use of the other.
   - No use of either arm or hand.

5. Use of legs:
   - Normal use of both legs.
   - Normal use of one leg and partial use of the other.
   - Partial use of both legs.
   - Partial use of one leg and no use of the other.
   - No use of either leg.

6. Feeding:
   - Feed without any help from another person.
   - Feed self after food is carried to me.
   - Food must be carried and arranged.
   - Food must be carried, arranged, meat cut, etc.
   - Food must be carried, arranged, meat cut, and must have special feeding equipment.
   - Food must be brought and fed to me.

Other

7. Dressing:
   - Can dress self without any help from another person.
   - Only need help to button clothes and/or putting on or removing shoes.
   - Must have some help in getting into or pulling on some clothes and some help in buttoning clothes and tying shoes.
   - Must be completely dressed by another person.

Other
6. Bathing:

- Can get in and out of bathtub or shower and can bathe without help.
- Bathes self in bed.
- Can bathe self but must be lifted in and out of the tub.
- Must be lifted in and out of the tub and must be bathed.
- Must be bathed in bed by another person.

Other

---

7. Toileting:

- Can go to toilet by self without any aid from another person.
- Must use bedpan and urinal.
- Must be helped on and off the toilet but need no further help.
- Must use bedpan and urinal and must be helped on and off.
- Must be helped on and off the toilet and assisted while toileting.
- Must use bedpan and urinal, be helped on and off, and need assistance while using.

Other

---

10. Personal Grooming:

- Can completely care for my own hair (washing and combing).
- Must have hair both combed and washed by another person.

Other

---

12. Dental:

- Can brush own teeth without the help of another person.
- Must have teeth brushed by another person.

Other

---

13. Shaving:

- Can shave without help of another person.
- Must be shaved by another person.

Other
13. Special hygiene needs (e.g. menstrual period, etc.): 

14. Bed care: 
   ____ Can transfer both in and out of bed without help. 
   ____ Can transfer out of bed but need help getting back into bed. 
   ____ Must be lifted both in and out of bed by a person or mechanical lift. 
   ____ Cannot leave bed, rocking bed, or respirator. 
   Other 

15. Professional nursing services required? 
   ____ Yes  ____ No 
   If yes, what type? 

16. Medication requirements: 
   ____ No medication normally used. 
   ____ Can look after own needs. 
   ____ Require non-medical help for medication. 
   ____ Require medical help for medication. 
   Type of medication help required: 

17. Are you interested in being a member of a PILOT RESIDENCE which would likely open in May 1970 and house six to ten persons? 
   ____ Yes  ____ No.  ____ Uncertain but please follow up on 

18. Before making a decision regarding the residence would you like to talk with a qualified person such as a Social Worker about residential life? 
   ____ Yes  ____ no 

19. What further information do you required in making a decision?
Services for the Disabled
Residence Committee
September 1969

RESIDENTIAL INFORMATION

NAME ____________________________________________
(last) ____________________________________________
(first) ____________________________________________

ADDRESS ____________________________________________

CITY or TOWN ____________________________________________

TELEPHONE __________________________ AGE ______ BIRTHDATE ____________________________

SEX _______ MARITAL STATUS __________________ QUEST. NO. ____________________________

WEIGHT ___________ MEDICAL NAME OF DISABILITY ____________________________________________

INTERVIEWERS ____________________________________________

Present Living Arrangements

1. I presently live: (check one)

___ with my parents  ___ in a nursing home

___ with relatives  ___ in a hospital

___ with friends  Other ____________________________

2. Who provides most of the help which you now require? (check one)

___ independent and do not need anyone to help

___ mother and father  ages: ___ and ___

___ mother only  age ___

___ father only  age ___

___ relative/friend  age ___

___ hired employee

Other ____________________________

If this help fails what are your plans? ____________________________________________

3. On the earlier questionnaire you felt you might be interested in a Community residence. What are the factors influencing your consideration of moving into a residence?

__________________________________________
4. How would these affect you? (answer all)
   a) Architectural barrier in present situation (e.g. doors, steps, etc.)
   b) Desire for independence and a 'home of your own'.
   c) Rising Cost of living
   d) Difficulty in getting help when needed.
   e) More friends my own age and disability.
   f) Increasing disability.
   g) Conflicts with persons I'm living with.
   h) Other

5. Would you be interested in meeting, from time to time, to discuss residence as an advisory group to the Residence Committee, Social Services for the Disabled, K-W Social Planning Council?
   ___ Yes  ___ No

Residential Life

A residence is more than a place to eat and sleep. It is a community where each adult must give and take to the best of his ability for the benefit of all.

6. a) Preference: _________ City  _________ Rural
   b) Would the location make a difference?  ___ Yes  ___ No

7. a) Type of Accommodation _________ Single room  _________ Double room

8. Prefer residence to be: _____ all male  _____ all female or _____ both.

9. Would you help with administration (typing, etc.)?
   ___ Yes  ___ No  ___ Uncertain  Unable.
10. Would you help with janitorial or housekeeping chores?
   ____ Yes  ____ No  ____ Uncertain  ____ Unable

11. Would you
   ____ Make own bed
   ____ Change bed
   ____ Dust and clean own room

12. Meals: What is your preference?
   ____ All three meals prepared
   ____ Two meals prepared
   ____ One meal prepared
   ____ Cafeteria style - "pay as you eat"
   ____ Prefer to prepare my own meals

13. Would you help with meal preparation?
   ____ Yes  ____ No  ____ Uncertain  ____ Unable

14. Are you willing to help another disabled person in residence?
   ____ Yes  ____ No  ____ Uncertain. In what ways?__________________________

Communication Skills

15. Which of the following may cause you problems?
   Hearing:  ____ No problem  ____ slight  ____ severe  ____ cannot
   Sight:    ____ No problem  ____ slight  ____ severe  ____ cannot
   Speech:  ____ No problem  ____ slight  ____ severe  ____ cannot

16. Which of the following can you do?
   Writing:  ____ easily  ____ with difficulty
   Reading:  ____ easily  ____ with difficulty
   Telephoning: ____ easily  ____ with difficulty
   Typing:  ____ easily  ____ with difficulty
Interests & Hobbies

17. How do you like to spend most of your time? (TV, reading, cards, games, sewing, knitting, etc.)

18. What would you like to do in a residence?

19. Would you use the residence: (check one)
   i) ___ Seven days a week (weekends included)
   ii) ___ Five days a week (Sunday night through Friday supper).
   iii) ___ Periodically (e.g. during parents' holidays)
   iv) ___ Weekends

20. If you do move into a residence, would you plan to be:
   i) ___ Out during the day
   ii) ___ In the residence all day.
   iii) ___ Other

ACTIVITIES OF DAILY LIFE WITHIN A PROPOSED RESIDENCE (INDOORS)

21. Check one:
   a) ___ Walk without the aid of another person or device (appliance).
   b) ___ Walk with the aid of cane, crutches, walker, or by holding on to walls or furniture.
   c) ___ Walk without the aid of another person, but also use wheelchair part of the time without aid.
   d) ___ Confined to wheelchair but completely independent except for architectural barriers (including all customary transfers). *
   e) ___ Walk without the aid of another person but also use wheelchair part of the time with the aid of another person, or walk ONLY with the aid of another person.
   f) ___ Confined to a wheelchair and can use part of the time without aid, but must have occasional assistance.
   g) ___ Confined to a wheelchair and can use only with the aid of another person.

* Architectural barriers are any feature of a building or its surroundings, or of a community, such as curbs, steps, narrow doors, carpeting, broken walks, etc., which prevent the otherwise free movement of a person in a wheelchair.
22. Check one:
   a) __ Climb stairs unassisted.
   b) __ Climb stairs with assistance.
   c) __ Can't climb stairs

23. Check one:
   a) __ Diet is essentially normal.
   b) __ Meals include some specially prescribed items.
   c) __ Diet is completely prescribed.
   d) Other ___________________________________________________________________

24. Feeding:
   a) __ Feed without any help from another person.
   b) __ Feed self after food is carried to me.
   c) __ Food must be carried and arranged.
   d) __ Food must be carried, arranged, meat cut, etc.
   e) __ Food must be carried, arranged, meat cut, and must have special feeding equipment.
   f) __ Food must be brought and fed to me.
   g) Other ___________________________________________________________________

25. Dressing:
   a) __ Can dress self without any help from another person.
   b) __ Only need help to button clothes and/or putting on or removing shoes.
   c) __ Must have some help in getting into or pulling on some clothes and some help in buttoning clothes and tying shoes.
   d) __ Must be completely dressed by another person.
   e) Other ___________________________________________________________________

26. Bathing:
   a) __ Can get in and out of bathtub or shower and can bathe without help.
   b) __ Bathe self in bed.
26. **Bathing**: (continued)
   
   c) ____ Can bathe self but must be lifted in and out of the tub.
   
   d) ____ Must be lifted in and out of the tub and must be bathed.
   
   e) ____ Must be bathed in bed by another person.
   
   f) Other ____________________________________________________________________

27. **Toileting**:

   a) ____ Can go to toilet by self without any aid from another person.
   
   b) ____ Must use bedpan and urinal.
   
   c) ____ Must be helped on and off the toilet but need no further help.
   
   d) ____ Must use bedpan and urinal and must be helped on and off.
   
   e) ____ Must be helped on and off the toilet and assisted while toileting.
   
   f) ____ Must use bedpan and urinal, be helped on and off, and need assistance while using.
   
   g) Other ____________________________________________________________________

28. **Personal Grooming**:

   a) ____ Can completely care for my own hair (washing and combing).
   
   b) ____ Must have hair combed by another person.
   
   c) ____ Must have hair washed by another person.
   
   d) Other ____________________________________________________________________

29. **Dental**:

   a) ____ Can brush own teeth without the help of another person.
   
   b) ____ Must have teeth brushed by another person.
   
   c) Other ____________________________________________________________________

30. **Shaving**:

   a) ____ Can shave without help of another person.
   
   b) ____ Must be shaved by another person.
   
   c) Other ____________________________________________________________________
31. Special Hygenic needs (e.g. assistance required during menstrual periods)

32. Bed care:
   a) ___ Can transfer both in and out of bed without help.
   b) ___ Can transfer out of bed but need help getting back into bed.
   c) ___ Must be lifted both in and out of bed by a person.
   d) ___ Must be lifted both in and out of bed by a mechanical lift.
   e) ___ Cannot leave bed, rocking bed, or respirator.
   f) Other

33. Professional nursing services required?
   ___ Yes    ___ No
   If yes, what type and how often?

34. Professional medical services required?
   ___ Yes    ___ No
   If yes, what type and how often?

35. Medication requirements:
   a) ___ No medication normally used.
   b) ___ Can look after own needs.
   c) ___ Require non-medical help for medication.
   d) ___ Require medical help for medication
   Type of medication help required:

35. Are you interested in being a member of a PILOT RESIDENCE which would likely open in May 1970 and house six to ten persons?
   ___ Yes    ___ No.   ___ Uncertain  but please follow up on
36. What further information or help would you like to have before you can make a decision?

________________________________________________________________________

________________________________________________________________________

37. What worries you about considering life in residence?

________________________________________________________________________

________________________________________________________________________
When the final report on the survey of physically disabled persons in Waterloo County was presented to the Social Planning Council in February 1969, it was discovered that 19 persons had a definite interest in a community residence and that another 35 persons were interest but uncertain as to when they may need such a place.

Since February a committee of Services for the Physically Disabled has been investigating the community residence further. As you will remember, the survey of 1968 was very general. In order to meet the needs of the disabled the committee would like to get more information as to what you would like and require in a residence in which you might consider living.

We know you expressed some interest in a residence and we would like to talk to you about this. We are hoping that a Pilot Residence might be opened in June 1970. We have constructed a new questionnaire and a student from the Graduate School of Social Work at Waterloo Lutheran University will be calling you soon to complete it. Should you have any questions or concerns please call me at 576-1981.

Sincerely

W. R. Woods, B.A.
Executive Secretary, Services for the Physically Disabled
Mr. B. Lumsden,
Chairman of Residence Committee for the Physically Disabled,
Social Planning Council of Kitchener-Waterloo,
48 Allen Street East,
Waterloo, Ontario.

Dear Bruce:-

I hope at this time to give you a fuller picture of the situation as regards our survey into the residential needs of the disabled.

The Students of the Graduate School of Social Work managed to see thirty-two physically disabled people drawn from Ron Walsh's study. The replies to the question "Would you be interested in meeting, from time to time, to discuss residence as an advisory group to the Residence Committee, Social Services for the Disabled, K-W Social Planning Council?" brought 21 "Yes" replies, 6 "No" replies, and 5 were unanswered. This I would suggest shows a great deal of interest in participation on the Committee.

To the question "Are you interested in being a member of a pilot residence?" the replies were 8 "Yes", 9 "uncertain", 9 "No", and 6 no answer. I feel at this point we have a clear idea that such a residence would thus be feasible. A number of people indicated that if the people presently caring for them are unable to care for them, they would then be interested in residence. In a sense there was a feeling among this
group that the residence would be an "insurance policy" which they were never able to obtain in the past.

As promised, the following are the people who were definitely interested in a residence:

[Redacted], age 20, female, having cerebral palsy. She presently resides at a nursing home at [Redacted]. She is willing to advise the Residential Committee. She would require non-professional help if in a residence. Confined to a wheelchair.

[Redacted], age 24, male, having cerebral palsy. I give this as one case in which if parents help failed, and his mother is 62, he would need another place to live. He presently lives at [Redacted].

[Redacted], age 16, male having cerebral palsy. He would require quite a bit of attention by a non-professional person. He is unable to talk but can understand things around him. He is presently living at [Redacted], with his parents. Confined to a wheelchair.

[Redacted], age 55, female, widow has polio. She lives alone in her house at [Redacted]. She is confined to a wheelchair. She is lonely and finds the responsibility of looking after a house alone too great. The woman is fairly self-sufficient.
age 41, female, has cerebral palsy. She presently resides at a nursing home. She would be happy to advise the Committee. She would require a great deal of non-professional time for her care. Like mentioned above, she wishes to be in a place where people her own age are situated rather than with all old people "who are dying." Confined to a wheeled vehicle.

age 17, male with cerebral palsy. would like to use a pilot residence especially on weekends and on his parents holidays. He is completely dependent. Confined to a wheelchair.

said he was interested in going into a residence but refused to talk to interviewer. He lives at.

One person said that he required subsidized apartments rather than a residence. He did not want to lose his independence but did want the companionship that a residence could offer.

Both have asked to be called at the end of January. They both seem like possible physically disabled persons in need of a residence. struck me as a very active thinker and a person who would be extremely helpful in the advisory role to the Committee.

It would seem that there is a need for some service to relieve
parents of physically disabled people so that they could be able to go on holidays and get away on some weekends. Some requests were made for this type of service. The parents are emotionally and physically drained through the care of the physically disabled person. Whether a residence could fill this need or whether live-in homemakers would be the answer is not completely settled in my thinking.

If you require any further information with regards to the study which will help the Committee at this time please contact me. As I mentioned to you, it is hoped that a final report with recommendations will be available to you by May 15, 1970.

Sincerely,

Larry E. Brigham

LLE:lb
Larry E. Brigham
APPENDIX E

FACT SHEET DATA

Interview Guide # ____, Age ____, Sex ____, Weight ____, Marital Status ____, Disability __

Interviewer ____, Employed ____ , Education ____ , First Questionnaire ____.

Present Living Arrangements

1. __

2. __

Residential Life

6. __

7. __

8. __

9. __

10. __

11. __

12. __

13. __

14. __

Communication Skills

15. (i) __

(ii) __

(iii) __

16. (i) __

(ii) __

(iii) __

(iv) __

Interests and Hobbies

17. __

19. __

20. __

Activities of Daily Life Within a Proposed Residence

21. __

22. __

23. __

Feeding

24. __

Dressing

25. __

Bathing

26. __

Toileting

27. __

Personal grooming

28. __

Dental

29. __

Shaving

30. __

Special Hygenic Needs

31. __

Bed Care

32. __

Professional Services Required

33. __

Medication

34. __

Residence

35. __

Social Planning Council Committee

5. __
Services for the Disabled
Residence Committee

RESIDENTIAL INFORMATION

NAME ______________________ ______________________ (last) (first)

ADDRESS ______________________ ______________________

CITY or TOWN K= Kitchener or Waterloo  O = Other

TELEPHONE ______________________ AGE 2=21-40  BIRTHDATE  ____________

SEX M or F MARITAL STATUS M.,S.,D.,W., Sep. QUEST. NO. An #1-33

WEIGHT 1=under 100 lb. 2=100-125 lb. 3=126-150 lb. 4=over 150 lb.

INTERVIEWERS T=Ted Mayor  L=Leslie Jordhal
                B=Larry Brigham  R=Richard Libber
                J=Judy Rees-Thomson  D=Dale Ackerman

Present Living Arrangements

1. I presently live: (check one)
   a __ with my parents  d __ in a nursing home
   b __ with relatives  e __ in a hospital
   c __ with friends  f __ Other __________

2. Who provides most of the help which you now require? (check One)
   a __ independent and do not need anyone to help
   b __ mother and father  ages: ___ and ___
     c __ mother only  age ___
     d __ father only  age ___
     e __ relative/friend  age ___
     f __ hired employee

     Other ___

     If this help fails what are your plans? h= no plans at present
     i= have plans
     j= uncertain

3. On the earlier questionnaire you felt you might be interested in a Community
   residence. What are the factors influencing your consideration of moving
   into a residence?

   Not Coded
4. How would these affect you? (answer all)
   a) Architectural barrier in present situation (e.g. doors, steps, etc.) _____
      Y = Yes
      N = No
   b) Desire for independence and a "home of your own". _____
      Y = Yes
      N = No
   c) Rising Cost of living _____
      Y = Yes
      N = No
   d) Difficulty in getting help when needed. _____
      Y = Yes
      N = No
   e) More friends my own age and disability. _____
      Y = Yes
      N = No
   f) Increasing disability. _____
      Y = Yes
      N = No
   g) Conflicts with persons I'm living with. _____
      Y = Yes
      N = No
   h) Other Not Coded

5. Would you be interested in meeting, from time to time, to discuss residence as an advisory group to the Residence Committee, Social Services for the Disabled, K-W Social Planning Council?
   Y = Yes
   N = No

Residential Life

A residence is more than a place to eat and sleep. It is a community where each adult must give and take to the best of his ability for the benefit of all.

6. a) Preference: C City R Rural E = Either
   b) Would the location make a difference? Y Yes N No

7. a) Type of Accommodation S Single room D Double room E = Either

8. Prefer residence to be: M all male F all female or B both E = Either

9. Would you help with administration (typing, etc.)? Y Yes N No
10. Would you help with janitorial or housekeeping chores?

Y Yes   N No   Uc Uncertain   Ua Unable

11. Would you

a Make own bed
b Change bed
c Dust and clean own room

Any or all may be chosen—a blank indicates "No" answers to all

12. Meals: What is your preference?

a All three meals prepared
b Two meals prepared
c One meal prepared
d Cafeteria style—"pay as you eat"
e Prefer to prepare my own meals

13. Would you help with meal preparation?

Y Yes   N No   Uc Uncertain   Ua Unable

14. Are you willing to help another disabled person in residence?

Y Yes   N No   Uc Uncertain. In what ways? E=emotionally P=physically B=both

Communication Skills

15. Which of the following may cause you problems?

Hearing:  a No problem  b slight  c severe  d cannot

Sight:  a No problem  b slight  c severe  d cannot

Speech:  a No problem  b slight  c severe  d cannot

16. Which of the following can you do?

Writing:  a easily  b with difficulty  c = does not

Reading:  a easily  b with difficulty  c = does not

Telephoning: a easily  b with difficulty  c = does not

Typing:  a easily  b with difficulty  c = does not
Interests & Hobbies

17. How do you like to spend most of your time? (TV, reading, cards, games, sewing, knitting, etc.)
   a   b   c   d   e   f   g

18. What would you like to do in a residence? Not Coded

19. Would you use the residence: (check one)
   i) Seven days a week (weekends included)
   ii) Five days a week (Sunday night through Friday supper).
   iii) Periodically (e.g. during parents' holidays)
   iv) Weekends (v) - other

20. If you do move into a residence, would you plan to be:
   i) Out during the day
   ii) In the residence all day.
   iii) Other

ACTIVITIES OF DAILY LIFE WITHIN A PROPOSED RESIDENCE (INDOORS)

21. Check one:
   a) Walk without the aid of another person or device (appliance).
   b) Walk with the aid of cane, crutches, walker, or by holding on to walls or furniture.
   c) Walk without the aid of another person, but also use wheelchair part of the time without aid.
   d) Confined to wheelchair but completely independent except for architectural barriers (including all customary transfers). *
   e) Walk without the aid of another person but also use wheelchair part of the time with the aid of another person, or walk ONLY with the aid of another person.
   f) Confined to a wheelchair and can use part of the time without aid, but must have occasional assistance.
   g) Confined to a wheelchair and can use only with the aid of another person.

* Architectural barriers are any feature of a building or its surroundings, or of a community, such as curbs, steps, narrow doors, carpeting, broken walks, etc., which prevent the otherwise free movement of a person in a
22. Check one:
   a) ___ Climb stairs unassisted.
   b) ___ Climb stairs with assistance.
   c) ___ Can't climb stairs

23. Check one:
   a) ___ Diet is essentially normal.
   b) ___ Meals include some specially prescribed items.
   c) ___ Diet is completely prescribed.
   d) Other ___

24. Feeding:
   a) ___ Feed without any help from another person.
   b) ___ Feed self after food is carried to me.
   c) ___ Food must be carried and arranged.
   d) ___ Food must be carried, arranged, meat cut, etc.
   e) ___ Food must be carried, arranged, meat cut, and must have special feeding equipment.
   f) ___ Food must be brought and fed to me.
   g) Other ___

25. Dressing:
   a) ___ Can dress self without any help from another person.
   b) ___ Only need help to button clothes and/or putting on or removing shoes.
   c) ___ Must have some help in getting into or pulling on some clothes and some help in buttoning clothes and tying shoes.
   d) ___ Must be completely dressed by another person.
   e) Other ___

26. Bathing:
   a) ___ Can get in and out of bathtub or shower and can bathe without help.
   b) ___ Bathe self in bed.
26. **Bathing:** (continued)
   c) _____ Can bathe self but must be lifted in and out of the tub.
   d) _____ Must be lifted in and out of the tub and must be bathed.
   e) _____ Must be bathed in bed by another person.
   f) Other ____________

27. **Toileting:**
   a) _____ Can go to toilet by self without any aid from another person.
   b) _____ Must use bedpan and urinal.
   c) _____ Must be helped on and off the toilet but need no further help.
   d) _____ Must use bedpan and urinal and must be helped on and off.
   e) _____ Must be helped on and off the toilet and assisted while toileting.
   f) _____ Must use bedpan and urinal, be helped on and off, and need assistance while using.
   g) Other __________________

28. **Personal Grooming:**
   a) _____ Can completely care for my own hair (washing and combing).
   b) _____ Must have hair combed by another person.
   c) _____ Must have hair washed by another person.
   d) Other __________________

29. **Dental:**
   a) _____ Can brush own teeth without the help of another person.
   b) _____ Must have teeth brushed by another person.
   c) Other __________________

30. **Shaving:**
   a) _____ Can shave without help of another person.
   b) _____ Must be shaved by another person.
   c) Other __________________
31. Special Hygenic needs (e.g. assistance required during menstrual periods)

\[ \begin{align*}
Y = & \text{yes} \\
N = & \text{no} \\
\end{align*} \]

32. Bed care:
   a) ___ Can transfer both in and out of bed without help.
   b) ___ Can transfer out of bed but need help getting back into bed.
   c) ___ Must be lifted both in and out of bed by a person.
   d) ___ Must be lifted both in and out of bed by a mechanical lift.
   e) ___ Cannot leave bed, rocking bed, or respirator.
   f) Other __£

33. Professional nursing services required?

\[ \begin{align*}
Y = & \text{Yes} \\
N = & \text{No} \\
\end{align*} \]

If yes, what type and how often?

34. Professional medical services required?

\[ \begin{align*}
Y = & \text{Yes} \\
N = & \text{No} \\
\end{align*} \]

If yes, what type and how often?

35. Medication requirements:

\[ \begin{align*}
a = & \text{No medication normally used.} \\
b = & \text{Can look after own needs.} \\
c = & \text{Require non-medical help for medication.} \\
d = & \text{Require medical help for medication} \\
\end{align*} \]

Type of medication help required:

36. Are you interested in being a member of a PILOT RESIDENCE which would likely open in May 1970 and house six to ten persons?

\[ \begin{align*}
Y = & \text{Yes} \\
N = & \text{No.} \\
Uc = & \text{Uncertain but please follow up on} \\
\end{align*} \]
36. What further information or help would you like to have before you can make a decision? 

Not Coded

37. What worries you about considering life in residence?

Not Coded
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