

## BOOK REVIEWS

by Alan Criner, Ph.D., Robert Patterson, Ph.D., and Jerome D. Schein, Ph.D.

*Transitioning Persons with Moderate and Severe Disabilities from School to Adulthood: What Makes It Work?*, by Jill D. Wheeler. Menomonie, Wisconsin: Materials Development Center, School of Education and Human Services, University of Wisconsin-Stout, 1987, 88 pp.

Alan Criner, Ph.D., Director, Vocational Counseling, National Rehabilitation Hospital, Washington, DC.

The author advocates a new approach to assist young people with moderate and severe disabilities in making the transition from high school to adulthood. Ms. Wheeler presents a model that expands the prevailing definition of transition beyond just the goal of employment to one defined more broadly as successful community adjustment. This transition model is comprised of three "pillars" or bridges: residential environment, social and interpersonal networks, and employment.

The book begins with a review of the legal framework for transition programs and the development of the revised model.

In Chapter 2, the author compares and contrasts four approaches used for developing high school curriculum. In addition, the legal, emotional, programmatic, and administrative challenges to developing an integrated service delivery system in a school setting are presented, with a distinction being made between "integration" and "mainstreaming." The chapter closes with a strong discussion on community-based instruction.

Chapter 3 begins with the issue of when to start transition efforts and proceeds to define the involvement of a variety of agencies and individuals in the process. The establishment of a Core Transition Team (CTT) and its impact is discussed. The author describes the benefit of formulating an Individualized Transition Plan (ITP) that may be incorporated

into an existing Individual Educational Plan (IEP), emphasizing the requirements of post-school environments.

The next chapter addresses the issues of cooperation and competition among school systems and adult service agencies, as well as the underlying concepts that drive transition programs. The Array of Services model as an alternative to the concept of Continuum of Services model is presented for consideration.

The process and outcome barriers prohibiting organizations and individuals involved in transition programs from fulfilling their responsibilities are highlighted in Chapter 5. Teacher training issues, disincentives of income support, curriculum relating to adult life, community acceptance, and health care concerns are also covered.

The final chapter presents a case study of a moderately disabled client and illustrates the dynamics of the Individual Transition Plan. Examples of plans and forms are provided.

*Rehabilitation Outcomes: Analysis and Measurement*, Marcus J. Fuhrer, Ph.D. (Ed.). Baltimore: Paul H. Brookes Publishing Co., 1987, 298 pp.

Robert Patterson, Ph.D., Associate Professor, Department of Physical Medicine and Rehabilitation, University of Minnesota, Minneapolis, MN.

This book is based on the papers presented at the Annual Conference of the National Association of Rehabilitation Research and Training, held in May, 1985, in Washington, DC. The conference theme was "Rehabilitation Outcome—How to Get It; How to Measure It; Implications for Policy."

The book presents a critical analysis of outcome measures which should promote the intelligent application of the principles and practices of outcome analysis. It has one significant deficiency in that it

does not present the quantitative measurement technology that comes from rehabilitation engineering research. Virtually no mention is made of quantitative electromechanical instrumentation that measures human performance. The measurements reported by the authors frequently depend on paper and pencil testing and evaluations that have a subjective component.

The book has four sections. The first section, "Rehabilitation Area Reviews," covers the research efforts to measure rehabilitation outcomes in the fields of medical rehabilitation, mental rehabilitation, psychiatric rehabilitation, vocational rehabilitation, and independent living. The "Methodology in Outcome Analysis," section presents design and statistical considerations, cost benefit methodologies, program service management analysis, and a description of a uniform national data system. Seven chapters are devoted to outcome analysis in multiple sclerosis, arthritis, major burns, infants and young children, the blind, head injury, and spinal cord injury, under the section entitled, "Application to Rehabilitation Target Groups." The "Implications of Rehabilitation Outcome Analysis" section discusses interagency linkages and rehabilitation, return to work issues, acute care perspective payment, and medical rehabilitation in a changing health care market.

Overall, this is an excellent book. It provides references, is well written, and should be useful to everyone in rehabilitation who is concerned with the delivery of cost-efficient and effective programs to the disabled.

*Communication Disorders in Aging*, by H. Gustav Mueller and Virginia C. Geoffrey (Eds.) Washington, DC: Gallaudet University Press, 1987, 514 pp. Illustrated.

*Jerome D. Schein, Ph.D., Professor Emeritus of Sensory Rehabilitation, New York University.*

Sixteen chapters by 21 authors cover theoretical underpinnings, assessment, and management of communication disorders in elderly populations. Three areas of age-related changes provide the foundation for the text: neurologic, otologic, and cognitive. Brain-imaging techniques in the study of elderly patients, extensively covered in the next three

chapters on computed tomography, magnetic resonance imaging, and positron emission tomography, complete the introductory section.

The chapter on oral-motor assessment and management includes consideration of the major disease entities involved (e.g., amyotrophic lateral sclerosis and Huntington's chorea) as well as less well-defined conditions like loss of kinesthetic speech cues. Discussion is aided by a form provided in the text. The chapter on voice disorders focuses on cancer, but does not overlook minor conditions that provide clues to the general health of the elderly patient. Attention is also paid to older professional voice users. The chapter on language reviews changes in the anatomy and physiology of the brain over time, and some language pathology prevalent among aging persons. While describing language changes associated with aging, the text avoids the trap of attributing causal linkage to correlated events. Assessment and management of communication functions in Alzheimer's disease and other dementias suffer from the lack of comprehensive tools; thus clinicians faced with these patients must frequently depend upon their own resources, lacking contributions from research and development in these areas.

A chapter on basic audiology is followed by a presentation of electrophysiologic measures. In addition to an extensive discussion of evoked auditory potentials, the chapter covers electronystagmography, including its usefulness in studying dizziness in elderly patients. Central nervous system changes affecting auditory function are related to rehabilitation of older people. Hearing aid selection receives detailed consideration, with an emphasis on the latest advances in fitting and evaluation. A separate chapter on aural rehabilitation talks about the problems of hearing-impaired elderly persons. Assistive communication devices receive thorough treatment, with consideration of consumer issues and practical suggestions for meeting them.

A problem occurs because the book is aimed at both students and clinicians. It tends, in places, to be too sketchy for most students (assuming technical information that many will not have) and too overburdened with unnecessary material for practicing clinicians (e.g., a glossary of terms like *aphasia* and *aphonia*). However, the breadth of material covered in this single volume favorably balances another weakness sometimes inherent in a multiply-authored work—the diversity of writing styles.

*Language, Cognition and Deafness*, by Michael Rodda and Carl Grove. Hillsdale, NJ: Lawrence Erlbaum, 1987, 436 pp. Illustrated.

The study of hearing impairment can be approached from many standpoints: medical, social, psychological, educational, etc. Like the elephant investigated by the three blind philosophers, its description will depend upon where it is touched. Rodda and Grove circumnavigate hearing impairment, examining it from several disciplinary aspects—audiology, linguistics, anthropology, psychology, physiology, and education. The breadth of their approach is justified by their professional credentials, which include numerous research projects.

The chapter on cognitive aspects of communication reviews the manner in which hearing impairment stresses the human communication system, placing new demands upon it, and compares various strategies for overcoming the barriers to communication imposed by hearing impairment. Alterations in short-term memory play a far more substantial role in lipreading, for example, than had been taken into account in developing lipreading tests and programs. When coupled with the chapter on the physiological basis of communication, a gestalt emerges that should encourage a new generation of rehabilitation research and development. Topics previously not integrated into organized studies of the hearing-impaired patient include brain functioning (especially cerebral lateralization), linguistics, cognition (perception, memory, cerebration) and cultural anthropology—an odd-sounding combination of disciplines that, nonetheless, injects fresh insights into well-trodden areas of investigation. Students, in

particular, will find this well-written, comprehensive text a rich source of exciting and relevant material. [JDS]

*Disability. A Bibliography of Selected Printed Material Produced by Australian Commonwealth Government Bodies (1936–1986)*, compiled by Pierre Gorman and Chris Larkin. Caulfield, Victoria, Australia: Chisholm Institute of Technology, 1987, 136 pp.

What happens to government-supported research? Where can one locate *ad hoc* commission reports? How does the rehabilitator find pertinent material residing in some dusty government archive? This document answers those questions about Australia by providing a well-organized bibliography of its publications on disability. Drawn from over 120 departments, organizations and authorities, the 454 publications that form the corpus of this work are presented in alphabetical order, followed by seven cross-indexes: subject, title, serial title, year, author, major government agency, and government sub-agency. The references make a study in themselves for those interested in the sociology of disability research—a study that Gorman and Larkin have facilitated with their seven indexes. For instance, the sensory disabilities are most frequently written about: 40 entries for hearing and 9 for vision. Mental disabilities are next in frequency, with 13 entries; physical disabilities, with 12. Of the 40 entries for hearing disability, half concern hearing aids. Even the most chauvinistic of rehabilitators should find these antipodal insights fascinating and potentially useful. [JDS]