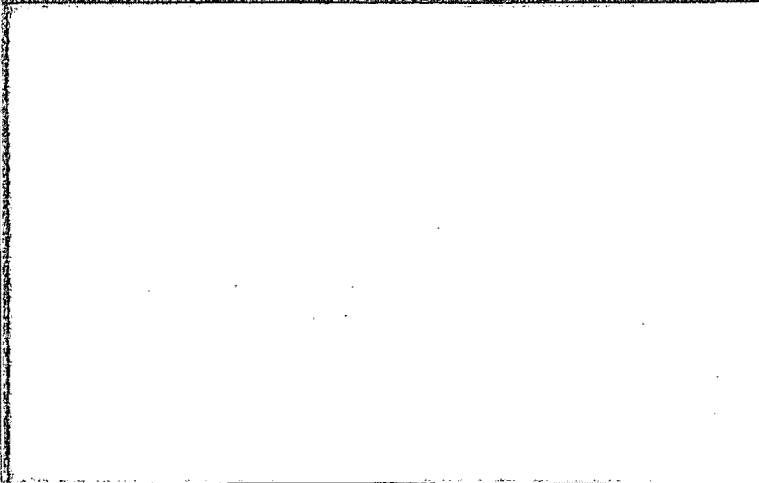


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Examples of Recent Domestic Policy Research Findings

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CRIME AND JUSTICE

PRISONS

Drug offenders are the predominant cause of increases in State and Federal prison populations. Several recent studies confirm that the war on drugs has placed tremendous pressure on American prisons.

In the 26 states studied, incarcerating more drug offenders was responsible for 43% of the total increase in the prison population from 1985-1990. In some of these states, average sentences for burglars and violent offenders were being shortened to make room for more drug prisoners.

(Office of National Drug Control Policy)

Nearly all of the recent increase in the Federal prison population is due to incarceration of drug offenders. Drug distributors now account for 57% of the total prison space being allocated by courts to offenders as compared to approximately 34% in 1985.

(Bureau of Justice Statistics)

A survey of state correctional authorities indicates that increased use of drug testing, coupled with more intense surveillance practices, has substantially increased the number of probation and parole revocations for rule violations in many states. In some states (e.g., Oregon, Texas, and California) more than 60 percent of those admitted to prison in 1991 were probation or parole violators, not newly sentenced offenders.

(National Institute of Justice)

SENTENCING

Pressures on the nation's correctional capacity are creating new demands for credible intermediate punishments. Plausible policy responses to the growing prison population include altering the penalty structure for drug crimes, expanding the space in existing corrections

facilities, developing new, less secure facilities for non-violent drug offenders, and expanding new non-prison sentencing options.

Sanctions short of total confinement — so called intermediate sanctions — may prove to be a vital component of any strategy to expand overall punishment capacity. Proponents of such intermediate sanctions argue for a sentencing structure that has a continuum of sanctions, in which prison is the last stop in a progression of penalties of increasing severity. In this progression, intermediate sanctions apply to cases of moderate severity and occupy the middle ground between suspended sentences and prison.

Financial sanctions could be used more often and monetary collections from offenders could be significantly increased. In separate studies of fines, day-fines, restitution, and offender fees, Abt found that in successful programs:

- the amounts and payment schedules are tailored to offenders' ability to pay;
- agencies have a strong incentive to emphasize collection (e.g., they keep collected funds);
- officials respond quickly to problems that cause missed payments;
- billing and reporting is automated.

(National Institute of Justice)

Community service sentencing has no deterrent or rehabilitative effect, but courts and policy makers have found it to be appropriate for minor offenders who are too poor to pay fines and would otherwise be sent to jail. Requiring offenders to do unpaid work that benefits the community expands judges' sentencing options, provides needed services to community, and reduces overuse of costly incarceration of minor offenders.

(National Institute of Justice)

Intensive Supervision Programs (ISP) has been instituted in many jurisdictions to put "teeth" in probation sentences for persons deemed to be in need of close surveillance. In a review of ISP evaluations, we found that programs that only enhance surveillance increase the likelihood of revocation for minor rule violations, but do not reduce arrest rates for new crimes, compared with conventional probation. The possibility that the crime-con-

trol impact of ISP could be enhanced by providing not only intensified surveillance but also compulsory treatment and other needed services, especially for drug-involved offenders, has not yet been tested.

(National Institute of Justice)

Day Reporting Centers are a promising new supervision strategy for offenders who need very high levels of structure, control, or treatment, or who have special medical problems that require daily medication. Outcome evaluations are just beginning for day reporting centers, but descriptive studies have found that day reporting centers provide tighter control than intensive supervision programs at comparable cost. In addition, some day reporting programs are being used for special populations, including offenders who need either daily medication (e.g., for mental illness or for tuberculosis) or substantial support to function in the community.

(National Institute of Justice)

Boot camp prisons can reduce prison crowding and costs under the right conditions. As punishments, boot camps may provide an acceptable alternative to longer prison sentences, especially for offenders convicted of less than grave crimes. The effectiveness of these punishments in reducing subsequent criminality is not yet demonstrated, however. Boot camp inmates appear to develop pro-social attitudes more readily than regular prison inmates while confined, but after release they return to prison at about the same rate. It is thought that developing aftercare programs that include job training, treatment, and/or other social supports, might increase the effectiveness of these punishments as a crime-control measure, especially for drug-involved offenders, but this has not yet been tested.

(National Institute of Justice)

A study of possible disparities in Federal sentencing found no evidence of judicial discrimination against Blacks and Hispanics. Racial differences in sentencing were primarily due to differences in penalties for drug crimes.

From 1989 through mid-1990, prison sentences imposed on black Federal offenders averaged 71 months, in comparison with average sentences of 50 months for Whites and 48 months for Hispanics. For nearly all categories of offenses, apparent

racial/ethnic differences in sentences were explained by differences in the offenses committed and characteristics of the offender (such as prior criminal history), all of which Congress or the U.S. Sentencing Commission deemed legitimate to consider when determining sentence.

(Bureau of Justice Statistics)

The longer average sentences for black offenders was explained primarily by the fact that 83% of those convicted in Federal courts for crack cocaine trafficking were black, and that the average sentence for trafficking in this drug was twice as long as the average sentence imposed for trafficking in powdered cocaine. The racial difference in Federal sentencing resulted not from unwarranted judicial discrimination but from Congress's decision to establish long mandatory minimum sentences for a crime for which blacks are more commonly prosecuted.

(Bureau of Justice Statistics)

DRUG ABUSE

Traditional measures of drug use and availability are not adequate for monitoring the effectiveness of the nation's anti-drug policies. Abt staff have developed a variety of new methods for identifying patterns of use and monitoring the availability of illicit drugs:

To track rapidly changing drug use patterns, we have implemented a "pulse check" reporting system to provide early information on emerging trends. For example, in the spring of 1992, "pulse check" reports indicated that there was a significant increasing use of marijuana and hallucinogens among younger users across the country. It took almost two more years before this finding was reported by the High School Senior Survey. (Office of National Drug Control Policy)

No new heroin epidemic. Given an alarming rise in heroin production worldwide and the increase in high purity heroin obtained in seizures that began in the late 1980s, ONDCP asked Abt Associates to assess the possibility of a new heroin "epidemic." Using multiple sources of data (from emergency rooms, criminal justice sources, NHSDA, AIDS prevention programs, treatment programs) including new ethnographic data obtained for this study, the report concluded that as of 1991 the new heroin was

being consumed by older established heroin users. At least part of the increased production was being absorbed at a faster rate due to the new method of ingestion (inhalation) favored by users fearful of AIDS.

(Office of National Drug Control Policy)

Monitoring the availability of illicit drugs. The nation has no direct way to monitor the availability of illicit drugs such as cocaine, heroin, and marijuana. One indirect method is to trace the flow of drugs from crops, through production, and during transshipment. Abt staff developed a simple computer model of this flow based on State Department, Drug Enforcement Administration, and other governmental and nongovernmental sources.

(Office of National Drug Control Policy)

Street prices provide another way to monitor the availability of illicit substances. We have used statistical analyses of data from DEA's System to Retrieve Drug Evidence to provide consistent estimates of retail prices for cocaine, heroin, and marijuana for 1980 through 1992. This cocaine price series is correlated with measures of drug use, such as emergency room mentions of drug use and drug testing results for arrestees.

(Office of National Drug Control Policy)

Hard-core drug users are undercounted by the National Household Survey on Drug Abuse and the Resources for the Future Survey (High School Senior Survey), although these are indispensable for monitoring drug use trends in the general population. While the NHSDA shows about 660,000 weekly cocaine users during 1991 (and almost no weekly heroin users), indirect estimation methods developed by Abt staff suggest that there are 2.1 million weekly cocaine users and about 0.6 million weekly heroin users.

(Office of National Drug Control Policy)

Existing national surveys are inadequate to measure both the supply of and demand for drug treatment slots. Abt staff have identified shortcomings in current data and have developed tentative estimates of needed resources to provide treatment "on demand."

Abt Associates' analyses of existing national data suggest that the shortfall of treatment slots needed to provide treatment on

EDUCATION

Primary and Secondary Schooling

With the debate on Goals 2000, the nation is moving toward greater consensus on educational standards, both for what students are expected to learn and for how schools should be organized and staffed to ensure high quality educational opportunities for all students. Although federal educational support accounts for a relatively small share of overall spending on education, it is now seen as a potentially powerful catalyst for the reform of American schools.

The studies noted below include examples of efforts to both increase the achievement of educationally disadvantaged students and to improve the nature of public education. In addition, a number of ongoing studies will add to our understanding of how to reform our schools. Evaluations are currently underway to assess the effectiveness of compensatory education programs and to examine a variety of educational innovations, including intensive reading programs for early primary grade students, computer-assisted instruction, expanded school-based health and social service programs, parent involvement initiatives, and new approaches to classroom pedagogy.

Federal compensatory education programs are falling short of Congressional goals for improving outcomes for educationally disadvantaged children. The largest longitudinal study of Federal compensatory education programs shows that current programs are not always targeted on districts, schools and students with the greatest degree of need, and that current programs are unlikely to close the educational gap between disadvantaged students and their peers. Congress and the Department of Education are currently evaluating a series of sweeping changes in the methods of targeting of Federal compensatory education grants to areas with the highest concentrations of disadvantaged children, in the amount of flexibility afforded educational agencies in the use of funds, and in the methods of assessing the progress of districts, schools and students served by the programs.

(Ongoing study for the U. S. Department of Education)

Compensatory education programs that operate outside the regular classroom (i.e., pullout programs) often fail to affect the students' daily instruction. The government should test the

ability of classroom teacher staff development programs to lead to effective integration of compensatory education and regular classroom instruction.

(U. S. Department of Education)

Funding cycles can affect the implementation of new communication technologies (e.g., satellite, computer networks), which require substantial planning and start-up periods. Without a substantial start-up phase, schools drop out of the program without fully utilizing the technologies. (In the particular case studied, Congress extended the funding cycle from two to five years when the Star Schools Project was reauthorized).

(Ongoing study for the U.S. Department of Education)

Improvements in mathematics and science education at the state level are more likely to be achieved if planning involves collaboration between schools, community agencies, parents, and political officials than if reforms are planned solely within the educational agencies. Federal initiatives to improve public education should require collaborative state and local planning.

(Ongoing study for the National Science Foundation)

Education: Early Childhood Development

There is now widespread agreement on the importance of early childhood education, particularly for economically disadvantaged children. This consensus has had a major effect on federal education policy with substantial increases in funding for preschool education and child care programs.

The studies noted below include examples of "two-generation" programs which target both low income children and their parents. Recent research has indicated that such programs may offer the greatest potential for improving the development of young children and increasing the chances of school success — both because parents are the first teachers of their children and because family is the single greatest influence on children's school performance. Other recent studies have examined the characteristics of child care providers and the relationship between institutional factors and child outcomes, and the quality of Head Start programs.

Family support programs improve participating mothers' child rearing practices and economic stability. Incorporating family support services into existing child development programs, such as Head Start, may improve the children's health and their mothers' economic success.

(U.S. Department of Health and Human Services)

Educating parents improves their children's vocabulary. When parents improve their literacy by participating in a family literacy program (Even Start), their children's vocabularies also improve. Federal literacy and child development programs should consider the inclusion of remedial education for parents as an adjunct to their basic services.

(U. S. Department of Education)

The same family literacy program also increases adult attainment of General Equivalency Degrees (GEDs). These programs may be a useful part of national training and development policy.

(U.S. Department of Education)

Intensive and focused staff training can substitute for general education in early childhood education programs. In most preschool education programs, program quality is noticeably higher when program staff have college degrees. In the Head Start program, this is not true. It appears that the staff training in Head Start, leading to certification in early childhood education, is able to substitute for higher education. These findings appear to have important implications for welfare reform — both for the requirements that need to be placed on day care programs and for the potential ability to meet these with staff drawn from among welfare recipients.

(U.S. Department of Education)

EMPLOYMENT AND COMMUNITY SERVICE

EMPLOYMENT AND TRAINING

In recent years, employment research at Abt Associates has focused on programs designed to upgrade the skills and enhance the employment opportunities of three target groups: Unemployment Insurance (UI) claimants, economically disadvantaged workers, and welfare recipients. In this section, we describe the results of the path-breaking National JTPA Study, which provided the first reliable estimates of the effects of the nation's largest training program for disadvantaged workers, and of two innovative demonstrations designed to help UI claimants become self-employed. Our studies of employment and training programs for welfare recipients are described in a separate section.

Job Training for Disadvantaged Workers is cost-effective for low-income adults, but not for out-of-school youths. The Job Training Partnership Act (JTPA) program increased the earnings of adult men and women by \$1,600-1,800 over a 30-month period but failed to improve the employment prospects of youths. As a result of this study, the FY95 budget reduces funding for the youth title of JTPA.

(U.S. Department of Labor)

Self-Employment Assistance for the Unemployed can be an effective route to re-employment for Unemployment Insurance claimants. In two state demonstrations, providing training and financial assistance to unemployment insurance claimants pursuing self-employment increased average earnings by \$1,600-7,600 and average time employed by 2 to 3 months during a 20-month follow-up period. Unemployment insurance benefits were reduced by \$700-1,400 in the first benefit year. As a result of this study, Congress passed legislation in 1993 to allow states to provide self-employment assistance as a means of raising unemployment insurance claimants' earnings and cut benefit costs.

(U.S. Department of Labor)

Community Service

In a related area, we have recently begun a major evaluation of programs funded by the Corporation for National and Community Service, many of which provide employment for disadvantaged youths.

Over 165,000 volunteers in 1,400 local programs provided 6 million hours of community service in the first year of funding from the Commission for National and Community Service. Abt Associates' evaluation will measure the impact of these programs on participants and the community.

(Ongoing study for the Corporation for National and Community Service)

ENVIRONMENTAL PROTECTION

NEW APPROACHES

Traditional environmental management often examined only the narrow, local effects of a pollution source. Now, environmental solutions must address the national and even international implications of pollution. Furthermore, as our knowledge has increased, the classic, medium by medium approach to environmental management has given way to a multi-media view. Today, the best solutions consider the spectrum of environmental benefits as well as economic and other social impacts. Current analytical tools reflect the evolving needs of environmental policy decision-makers to identify more cost-effective means of reducing risks and improving environmental quality. The following studies represent a multi-disciplinary approach to environmental policy analysis that integrates environmental science, risk assessment, and economic analysis. They include risk assessment of existing and new chemicals, economic impact analyses of regulations on manufacturing industries, and an examination of innovative approaches to improving environmental management in the U.S.

In addition, a number of ongoing projects will assist the U.S. Environmental Protection Agency in developing future regulations and developing the national environmental policy. The total risk of groups of pesticides which can be applied to the same crop are being evaluated simultaneously rather than singly prior to regulation. The human health and ecosystem risks of U.S. manufacturer's pollutant releases (as reported in the Toxics Release Inventory) are combined with geographic information to identify public health hotspots and potential environmental equity problems.

Issuing a coherent set of emission rules for an entire process or industry can reduce compliance burdens by allowing for more intelligent responses. In particular, issuing a coherent set of rules at one time may encourage more emphasis on redesign to prevent pollution instead of simply controlling end-of-pipe emissions. EPA should accelerate its current pilot efforts to develop coherent emission rules that cover all forms of emissions (to air, water, or the earth) for an entire process.

(Environmental Protection Agency)

Superfund liabilities may not affect waste generation. Focus group interviews with a small number of manufacturers suggest that because of uncertainty about their liability under the

Superfund, generators of hazardous waste do not alter their waste generation or their on-site waste management practices in response to potential Superfund liabilities. They do respond to Federal hazardous waste regulations. Further research is needed to determine whether Superfund liability is as limited an incentive as this small sample suggests.

(Environmental Protection Agency)

About one-half of consumers report that they consider the environmental impacts of products when making purchasing decisions. However, these consumers often lack adequate information about the environmental attributes of these products. This and other studies have led to EPA's current efforts to explore the extent to which the Government can act to reduce environmental burdens by supporting consumer-based information initiatives.

(Environmental Protection Agency)

Realistic measures of corporate environmental performance contribute significantly to environmental improvement. Since J.M. Huber instituted an internal environmental performance tracking system, each of its 12 divisions has identified opportunities to improve environmental performance that (a) go beyond compliance requirements, (b) are more cost-effective than simple regulatory compliance, and (c) encompass efficient use of energy and raw materials resources that are outside the scope of traditional regulatory programs. Federal agencies may be able to encourage corporate environmental initiatives by cataloging and making available technical data gathered and maintained by the Federal government.

(J.M. Huber Corporation)

INDUSTRY SPECIFIC STUDIES

Much of our work consists of detailed studies of specific industries or processes. The following examples give the flavor of these.

Conventional dry cleaning is often an important source of air pollution. There is an alternative to conventional dry clean-

ing that does not use a toxic chemical as the cleaning solvent, is less costly, and has acceptable cleaning performance. Existing dry cleaning establishments can convert to the new process at modest cost. The existence of an alternative process means that local governments can now consider prohibiting conventional dry cleaning to meet their responsibilities under The Clean Air Act.

(Environmental Protection Agency)

Targeted abatement of lead in existing dwellings could produce a net benefit of as much as \$10 billion in increased lifetime productivity, reduced neonatal deaths, and reduced treatment costs for lead poisoning. However, the net benefits depend critically on effective targeting—both to identify high risk situations and to encourage timely response. This applies both to homeowner decisions and to the allocation of limited state and local resources for 3-step lead abatement. Most of these benefits will not be realized unless homeowners are adequately informed and motivated to take action. The Government needs to develop information and incentive programs that will be effective in motivating high risk homeowners to abate lead contamination. The response to such information programs needs to be monitored, since voluntary abatement may not be sufficient.

(Environmental Protection Agency)

Hazardous waste management facilities in urban areas can depress the market value of nearby residential housing. In some parts of urban housing markets, the increase in housing values would more than compensate for the costs involved if local government bought out and closed hazardous waste management facilities.

(Environmental Protection Agency)

Training and certification standards for asbestos abatement inspectors, workers, and related personnel ensure that asbestos is accurately identified and that abatement is performed in a manner that protects building occupants. Current requirements for training and certification of asbestos abatement workers apply only to abatements in schools. They should be extended to apply to all public and commercial buildings.

(Environmental Protection Agency)

HEALTH CARE

COST CONTAINMENT

Over the last 20 years, we have studied cost containment instruments such as the Medicare DRG program, state hospital cost containment programs, community-based alternatives to nursing home care, selective contracting, and episodic reimbursement for physicians. We have pioneered the development of sensitive outcome measures for looking at the effects of cost containment on patients, and of techniques for using Medicare and Medicaid claim data to form illness episodes that permit analysis of practice pattern efficiency in both inpatient and outpatient settings.

The paragraphs below describe some of the completed projects and their implications. Other, ongoing projects are looking at the effectiveness of drug utilization review programs in state Medicaid programs, the effectiveness of information systems in improving the productivity of clinicians, and the effects of using selective contracting for purchasing cataract surgical services. We are also helping Medicare design statistical approaches for identifying fraud and abuse using claim records as a possible improvement in carrier bill paying operations.

Prospective payment incentives and budget control programs will contain hospital costs but may contribute to poorer outcomes for some patients. Several demonstrations showed that stringent prospective payment programs restrain the rate of hospital cost inflation. However, mortality rates for certain serious problems were higher. Efforts to contain costs should be accompanied by quality monitoring programs in outcome-sensitive areas of operations.

(U.S. Health Care Financing Administration)

Providing expanded forms of home health care to aged and impaired individuals does not reduce hospital or nursing home costs. A 1983-86, seven-state demonstration provided homemakers and home health aides to 20,000 clients judged to be at risk of institutionalization. Home care improved clients' sense of psychological well-being but had no effect on rates of morbidity, mortality, or institutionalization. Expanding homemaker and home health aide benefits to Medicare and Medicaid will not reduce program outlays, unless better ways are devised

to manage outlays and target assistance to clients who are truly at risk of admission to nursing homes.

(U.S. Health Care Financing Administration)

Frequency and cost of diagnostic imaging in medical practice. Using a large private insurance data base we studied the frequency and cost of diagnostic testing in medical practices where patients were referred to radiologists (radiologist-referring) in comparison to other medical practices where imaging was done in whole or in part by the referring physician in the office (self-referring). A combination of more frequent imaging and higher charges resulted in average imaging charges per episode of care that were 4 to 7 times higher for the self-referring physicians. Regulation that limits referral of patients to facilities and services in which physicians have an ownership interest should also consider the cost containment potential of limiting self-referral practices for diagnostic imaging.

(The American College of Radiology)

New quality enhancing technologies are expected to increase hospital costs by more than \$300 million next year. Analysis of selected emerging technologies suggests that operating costs of hospitals will rise by one third of one percent and capital costs will escalate by almost one percent as a result of adopting cost-increasing, quality-enhancing new technologies.

(Prospective Payment Assessment Commission)

Hospital mergers in markets with few competing hospitals can lead to higher prices. While hospitals argue that mergers lessen duplicate expenditures and permit efficiencies, these efficiencies are sometimes insufficient to offset the simultaneously reduced incentives to offer competitive prices to managed care plans. Proposed hospital mergers should continue to be examined on a case-by-case basis rather than through a blanket relaxation of antitrust policies.

(Federal Trade Commission)

The cost-effectiveness of hospital and physician treatment patterns varies substantially across providers. Hospitals and physicians whose treatment patterns differ substantially

from typical community practice can be identified using available data. Individual review is then needed to assess whether the care is actually inappropriate and to reform practice styles when necessary.

(Commercial insurance company)

The resource-based Medicare Fee Schedule was enacted with several inequities, and current reform proposals may perpetuate some of these problems. When the Medicare Fee Schedule was enacted in 1992, it undervalued several complex surgical operations while potentially overvaluing simple procedures. While many of these inequities have been subsequently addressed, new proposals to reform reimbursement for physician practice expenses may similarly penalize those specialists who perform complicated procedures rather than focusing on office-based care. Further reform of the Medicare Fee Schedule should be undertaken only after careful development of a sound methodology and review of accurate data describing physician practice expenses.

(Various physician specialty societies)

EVALUATION OF NEW BENEFITS

Modifying Delivery Systems and Benefits Structures

Many of the experimental demonstrations and evaluations we conduct are aimed at evaluating proposed new benefits to see whether they are desirable in terms of beneficiary access to appropriate care and a cost-effective continuum of services. Most of this work has been done for Medicare, Medicaid, and CHAMPUS programs. For example, our staff did almost all of the early demonstration research on a hospice benefit for the Medicare program and on the use of selective contracting and competitive bidding in the CHAMPUS and Medicare programs.

Some recently completed examples of this work are described below. Currently, we are also evaluating the cost effectiveness of the replications of the On Lok program (PACE) for the frail Medicare/Medicaid elderly, as well as a new model for coordinating the delivery of non-acute

Medicare services in which community nursing organizations are responsible (under capitation) for case management and service delivery for a bundle of non-acute services to Medicare enrollees.

Hospice is a cost-effective alternative for treating some terminally-ill patients. For cancer patients with very short illnesses, hospice care offered within the last two months of life is less costly than care provided in other settings. The hospice benefit was added to the Medicare program in part as a result of this study.

(Health Care Financing Administration (HCFA), Robert Wood Johnson Foundation, John Hartford Foundation)

A package of disease prevention and health promotion services could be cost-effective for Medicare. Preliminary indications are that subsidizing preventive services increases their use and promotes positive changes in attitudes and health-related behaviors.

(Ongoing study for Health Care Financing Administration)

Including influenza vaccines as a Medicare benefit is likely to improve the health of some elderly Medicare beneficiaries and entail additional Medicare costs. Providing free influenza vaccine dramatically increased vaccination rates among the elderly, and probably reduced the costs to Medicare of hospital admissions for pneumonia. However, the costs of providing the vaccine are likely to exceed the savings from reduced admissions. Congress implemented a Medicare influenza vaccine benefit in 1993, in part because the estimates of higher costs were not conclusive. Further efforts to develop more precise cost estimates would, however, involve lengthy and complex trials.

(Health Care Financing Administration)

Medicaid eligibility expansions may not have increased access to prenatal care among low income women. Preliminary evidence suggests that more Medicaid coverage means more predictable payment for providers, not necessarily more prenatal care and better birth outcomes.

(Ongoing study for Health Care Financing Administration)

HOUSING

We know from American Housing Survey data that 3.4 million extremely low-income renters (renters with incomes under 25 percent of median income) receive no federal housing assistance and have severe housing problems (their housing is structurally inadequate and they pay rents over 50 percent of household income). In addition, if we define need in this way, another 3.9 million renters with incomes under 80 percent of median income lack needed housing assistance.

Against this backdrop, our recent research has focused on the threats that exist to the current stock of assisted housing, whether publicly or privately owned, and on the effectiveness of tenant-based assistance in opening up housing opportunities. Ongoing work, now in progress, addresses the question of whether poor renters can improve their situation by moving to low-poverty neighborhoods, examines the extent to which access to homeownership is blocked by bias in mortgage lending, and evaluates the effectiveness of programs to provide homeownership opportunities through the foreclosed housing stock.

The assisted low income housing stock is threatened by default as well as prepayment. Initial Abt research showed that over 1/3 of older subsidized rental units were likely to convert to market rate housing by 2002 and that incentives to extend low income occupancy were cost effective. These results formed an important part of the congressional debate that led to new legislation incorporating incentives to prevent conversion.

More recently, we have focused on threats to the low-income stock from financial failure and mortgage default. Abt research finds that one quarter of the HUD multifamily stock is distressed and liable to default on its HUD-insured mortgages. A coherent strategy for reducing defaults still needs to be developed.

(National Commission for Low Income Housing Preservation, 1988;
Department of Housing and Urban Development Multifamily Stock
Assessment, 1993)

Deferred maintenance in Public Housing has produced a large backlog of repair needs. The backlog for basic repairs alone exceeded \$9 billion nationally in 1985, based on Abt's benchmark study of modernization needs. Subsequent analysis

shows that funding levels since 1988 have just kept pace with the annual accrual of new needs, without reducing the backlog. In the meantime, the estimated cost of the unaddressed basic repair backlog has grown, due to inflation, to \$13.5 billion in 1992 dollars.

(Department of Housing and Urban Development)

Drugs in Public Housing. Drugs and crime are serious problems in some public housing projects, but improvements can be achieved through creative partnerships between housing authorities (PHAs) and residents. Where housing officials are receptive to resident involvement and where strong resident leaders emerge, substantial reductions in drug activity and violence can be achieved. Physical changes such as gating and fencing of developments, in combination with effective PHA-resident partnerships, hasten such improvements.

(Department of Housing and Urban Development)

Guaranteed rent is not a sufficient incentive to induce landlords to accept low-income tenants. The Section 8 rental assistance programs impose administrative burdens on landlords that lead them to prefer tenants who do not receive rental assistance. It appears that at least some of these burdens can be substantially reduced without compromising the program's intent.

(Ongoing studies for the Department of Housing and Urban Development (HUD) and the National Multi-Housing Council)

NUTRITION

There is growing research evidence linking individual health and nutrition to the incidence of a variety of diseases or physical disabilities. One component of the federal response has been increased attention to the use of school-based programs to help children establish healthy habits and lifestyles during a time when they are the most susceptible to change. The studies highlighted below focus on two such programs. School nutrition programs provide both a source of good nutrition for millions of American school children, and a mechanism for teaching children about how to have a positive effect on students' health and nutrition knowledge, attitudes and behavior.

Recent and ongoing evaluations will provide additional information on other health and nutrition programs including research related to the effect of the Supplemental Feeding Program for Women, Infants and Children (WIC) and efforts to increase rates of child immunizations.

Meals served in the National School Lunch Program are high in fat, saturated fat, and sodium. A study of 60 elementary and secondary schools found that while meals supplied appropriate amounts of calories and essential nutrients they exceeded current public health recommendations for fat intake, saturated fat, and sodium. The current National School Lunch Program menu planning guidelines need to be revised to address adequately the issue of nutritional quality.

(U.S. Department of Agriculture)

Several important barriers have been identified to modifying school meals to improve compliance with current recommendations for fat and sodium intake. Barriers include lack of time and appropriate expertise; limited availability of appropriate foods; lack of follow-through from school-level food service staff; and the need for additional calories to off-set calories lost as a result of fat reduction.

School districts need substantial training and technical assistance to appropriately modify school meals. USDA may need to adjust current requirements for meal planning to promote the provision of adequate calories, increase the number of low-fat, low-sodium

and high-fiber foods available through the Commodity Donation Program, and promote the availability of such foods from private vendors.

(U.S. Department of Agriculture and Kaiser Family Foundation)

Supplying students with healthful meal choices does not ensure that students will consume them. Even after a classroom-based nutrition education program, students who have the ability to make choices at lunch time were more likely to select high-fat vegetables and entrées than lower-fat or otherwise more healthful alternatives. To be effective, government and local efforts to change students' food consumption behaviors need to combine changes in menus with adequate nutrition education, including the cafeteria, the school at large, the home, and the community.

(Kaiser Family Foundation)

Changing students' health-related attitudes and behaviors requires a substantial investment of classroom time. Significant improvements in program-specific and general health knowledge were achieved with relatively limited amounts of classroom time (10 to 15 hours). Significantly more time (40 to 50 hours) was required to change health-related attitudes and behaviors.

(Centers for Disease Control)

Health education in elementary schools can reduce later health risk behavior. When comprehensive health education programs were well-implemented in grades 4-6, the proportion of 7th grade children that reported use of tobacco was lower. This suggests that school health programs in the elementary grades should be comprehensive, involving a broad array of substantive health areas and approaches.

(Centers for Disease Control)

PUBLIC HEALTH

Abt Associates is broadly involved in public health research, with projects ranging from epidemiological studies to clinical trials to demonstration programs of promising public health interventions. Substantively, the activities range from vaccine studies, to medical device and drug trials, and to new syndrome investigations. The paragraphs below summarize a selection of our most recent studies pertaining to public health.

Other, ongoing projects that will yield important findings in coming years include three of special interest. First, we are the management and coordinating center for AIDS/HIV vaccine trials for NIAID, developing and managing the contracts and protocol oversight activities for the clinical trials of all AIDS/HIV vaccines. Second, we are conducting one of the nation's largest household data collection activities on health care issues for CDC/NCHS—the national child immunization and health reform survey support project. This project is intended to provide state-level estimates for monitoring health and serve as a vehicle for quick response collection of health reform-related monitoring measures. Finally, Abt researchers are conducting both of the national studies currently underway pertaining to the long-term effects of silicone breast implants. One study is funded by Dow-Corning, the other is funded by the National Cancer Institute.

Immunization. Immunization rates among groups of high-risk adults can be significantly increased by inexpensive, multi-media information campaigns. In 1986, inexpensive information campaigns, using pamphlets, posters, radio, talk shows, local newspapers, and professional education, raised the rate of influenza vaccination among the elderly in four demonstration communities from 20 to 28 percent. Since that time, with continuing education efforts by federal, state, and local public health agencies, the national annual vaccination rate among the elderly has risen to over 40 percent. This suggests that the effects of such campaigns may cumulate over time.

(Centers for Disease Control)

HIV/AIDS Prevention. Intravenous drug users and their sexual partners are populations not reached by traditional HIV and public health prevention programs. These groups can be located through street outreach efforts. However, once identified, successful behavioral change can only be accomplished by intensive, comprehensive programs which focus on multiple problem areas in the drug users' lives.

Risk of Corneal Ulcers. In collaboration with Harvard-Affiliated Massachusetts Eye and Ear Infirmary, Abt Associates conducted two major epidemiologic studies comparing the risk of corneal ulcers among extended wear soft contact lens users to the risk among daily wear soft contact lens users. More than 4 million people in the U.S. use extended wear soft contact lenses, and more than 9 million use daily wear soft contact lenses. Potentially resulting in a loss of vision, corneal ulcers are generally considered the most serious possible adverse effect of contact lens use.

Both studies found the risk of corneal ulcers to be substantially higher for extended wear lens users, and, further, the risk was found to increase with each additional day of overnight wear. Principally on the basis of these studies, the FDA asked lens manufacturers to reduce the recommended wear time for extended wear lens from 30 to 7 days.

(The Contact Lens Institute)

A chronic fatigue syndrome (CFS) surveillance system was established by Abt Associates in 1989 in four cities to collect descriptive epidemiologic data from persons with at least six months of unexplained, debilitating fatigue or chronic unwellness. Crude—and lower bound—prevalence estimates for CFS range from 3.8 to 9.6 cases per 100,000 population. Estimates for prevalence of unexplained prolonged fatigue—based on all respondents except those with possible medical explanations—are 12.9 to 34.3 per 100,000 population. No biologic markers for CFS have been identified.

The CDC is using data from the surveillance system and is working with members of the study's physician advisory committee to revise the working case definition of CFS. Analysis is now underway on the course of illness, symptom clusters, results of neurocognitive testing, and results of psychiatric testing.

(Centers for Disease Control)

WELFARE

Federal policy concerns about income security programs — especially Aid to Families with Dependent Children (AFDC) and the Food Stamp Program — can be grouped under two general questions. The first is how the programs, whose traditional mission was simply to provide financial assistance in times of need, can be restructured to shorten or even prevent those periods of need. The second question is how to operate the programs efficiently and effectively, minimizing the burden on the taxpayer and the program participants.

The studies noted below include examples addressing each of the two questions. In addition, a number of ongoing projects will produce further information over the next year. Evaluations of state welfare reform demonstrations are examining the effectiveness of JOBS, of consolidating the Food Stamp and AFDC programs, and of reducing the AFDC "tax" on earnings. Recent and ongoing studies of program operations examine ways that application procedures may pose barriers to participation, the potential utility of a child support enforcement requirement in the Food Stamp Program, and whether requirements for "expedited service" to urgent-need applicants actually serve their intended purpose.

Financial Incentives and Support Services. An alternative to AFDC strengthens incentives to work and to cooperate with child support enforcement. By including more intensive case management than AFDC, as well as financial incentives to become employed and to assist with child support enforcement efforts, the New York State Child Assistance Program increased clients' earnings, child support orders, and total income. The program generated net financial benefits to clients at no additional Government costs. The government should consider providing financial incentives and supportive services as one way to promote employment among welfare recipients.

(New York State Department of Social Services)

Job Training. Training provided through the Job Training Partnership Act (JTPA) raised the average earnings of AFDC recipients by \$2,400 over a 30-month period. A combination of on-the-job training and direct job placement was particularly effective, increasing earnings by nearly \$5,000 per participant. These earnings gains did not, however, result in significant reductions in welfare benefits, because many of the women who went to work would have gone off welfare anyway. Providing employment

and training services, especially those closely linked to the labor market, can cost-effectively improve the employment prospects of women on welfare but may not necessarily reduce welfare dependence.

(U.S. Department of Labor)

Employment Services for Stamp Recipients. The Food Stamp Employment and Training Program does not increase the employment or earnings of food stamp recipients. Requiring food stamp recipients to participate in an employment assistance program did not help them get jobs, increase their hours of work, or increase their income. Food Stamp recipients who do not receive AFDS may have enough labor market attachment that low-intensity services are not useful. More intensive services might be useful, but should not necessarily be provided within the Food Stamp Program's administrative structure.

(U.S. Department of Agriculture)

Subsidized Employment. Short-term subsidized employment for welfare recipients reduces welfare rolls. AFDC recipients given subsidized jobs were more likely to be employed and have higher earnings after the subsidies ended than were recipients who received no such assistance. The benefits of subsidized employment exceeded the costs in 5 of 7 states. By providing welfare recipients with short-term subsidized employment, the Government can reduce long-term welfare costs.

(U.S. Department of Health and Human Services)

Electronic Benefit Transfer. Using electronic transfer to provide food stamp benefits reduces administrative costs compared with using coupon-based systems. In addition, benefit loss and diversion were reduced in the two demonstration sites, retailers' costs were reduced, and recipients, retailers, and financial institutions all strongly prefer electronic transfer to coupons. Based on these demonstrations, the Government is proceeding with larger scale electronic transfer systems for delivering food stamp benefits.

(Food and Nutrition Service)

Cashing Out Food Stamps. Providing checks in place of food stamp coupons changes household consumption patterns. A welfare reform demonstration in Alabama that provided food stamp

benefits in cash found that participating households spent about 18 percent less on food and more on transportation and shelter. If the government wants to encourage food stamp recipients to spend more on food, it should not provide checks instead of food stamps.

(Alabama Department of Human Resources)

THE WHITE HOUSE
OFFICE OF DOMESTIC POLICY

CAROL H. RASCO
Assistant to the President for Domestic Policy

To: _____

Draft response for POTUS
and forward to CHR by: _____

Draft response for CHR by: _____

Please reply directly to the writer
(copy to CHR) by: _____

Please advise by: _____

Let's discuss: _____

For your information: _____

Reply using form code: _____

File: _____

Send copy to (original to CHR): _____

Schedule ? : Accept Pending Regret

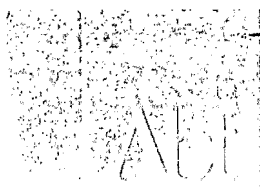
Designee to attend: _____

Remarks: _____

31st is out.
Is there time before
Neuman meeting
the aft. of April 1? →

There's nothing on the
Schedule between the a.m.
mtg and your 1:00 Neuman
mtg. We are holding for
personal time.

Keep a.m. open
Tell him I have
15 min. at 2:45

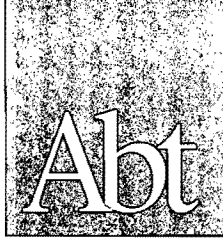


Raymond E. Glazier, Jr.
Manager
Disability and Rehabilitation
Related Research

Abt Associates Inc.

55 Wheeler Street
Cambridge, Massachusetts
02138-1168

Telephone (617) 349-2481
Facsimile (617) 349-2675
TDD (617) 349-2618



MAR 16 REC'D

Associates Inc.

Center for the Advancement of Rehabilitation and Disability Studies

14 March 1994

Ms. Carol Rasco
Assistant to the President for Domestic Policy
White House, 2nd Floor, West Wing
1600 Pennsylvania Avenue, NW
Washington, DC 20500

Dear Ms. Rasco,

Stanley Herr of your office had requested a copy of Abt's report on *The Second Year (FY-1993) of the NIDRR ADA Technical Assistance Initiative* and my opinion of the effectiveness of this effort to promote implementation of the Americans with Disabilities Act of 1990; he suggested I share with you also the report (copy enclosed) and my assessment. As a policy researcher and as a person with a severe disability myself, I am pleased at the interest the Administration is showing in this vital area.

Abt Associates holds a U.S. Department of Education contract entitled NIDRR ADA Technical Assistance Coordinator, of which I am Project Director. This is a three-year project (now in its third year) to spearhead NIDRR's technical assistance initiative for the Americans with Disabilities Act of 1990 (ADA) by facilitating, coordinating, monitoring, and evaluating the activities of fifteen NIDRR grantees: ten regional Disability and Business Technical Assistance Centers, three Materials Development Projects, and two National Training Projects. (Client: National Institute on Disability and Rehabilitation Research, U.S. Department of Education.) The introduction to the annual report describes the structure and operations of the NIDRR ADA Technical Assistance Initiative.

Although the Department of Education and NIDRR have no enforcement authority or responsibilities under the ADA, Congress funded NIDRR to help promote the implementation of the ADA by providing technical assistance to key constituencies affected: businesses that are "covered entities" under the Act, cities and towns and other public service providers, and persons with disabilities of all kinds. The "Overview" chapter of the enclosed annual report demonstrates what an impressive volume of technical assistance, training, materials dissemination, etc. is being provided to the public by the fifteen NIDRR grantees across the country. Anyone can directly access the ten regional Disability and Business Technical Assistance Centers via the national toll-free information and referral line (1-800-949-4ADA), which electronically routes calls to the appropriate local office.

In our management of this telephone set-up and coordination of the NIDRR grantee activities, it is obvious to us that NIDRR and its grantees are doing an amazing job of promoting voluntary compliance with the ADA and advising citizens of their rights. We constantly hear of ADA information lines at other federal agencies ringing off the hook till callers give up in despair. NIDRR, with Abt's help, is carefully monitoring the volume of "busied out" calls on a region-by-region basis in order to know where more lines or more staff are needed to meet demand for services. When other federal agencies ran out of copies of their ADA information materials, NIDRR funded reprints. Where gaps in written information on the ADA were identified, NIDRR sponsored the development of print materials, video cassettes, etc. Abt Associates is proud to be a part of the NIDRR ADA Technical Assistance Initiative.

The coordination of the Initiative is but one activity of Abt's Center for the Advancement of Rehabilitation and Disability Studies, which I direct. I thought you might be interested in brief project sketches of other ongoing Abt work in this area:

Evaluation of Project NetWork. A five-year, \$3 million evaluation of eight demonstration projects testing the use of case management and financial incentives as a means of increasing rehabilitation services and employment among recipients of Social Security Disability Insurance (SSDI) and Supplemental Security Income (SSI) benefits. The study uses random assignment of 8,400 voluntary participants to treatment and control groups, plus a separate sample of 200,000 nonparticipants, to analyze program service delivery, client selection, impacts (on earnings, SSDI and SSI benefits, and other outcomes), and overall benefits and costs. (Client: U.S. Department of Health and Human Services, Social Security Administration.)

Methodology Development for a Benefit-Cost Analysis of the Javits-Wagner-O'Day Program. A nine-month contract to design and develop data collection instruments for a benefit-cost study of the Federal government's program for purchasing goods and services from nonprofit agencies that employ persons who are blind or severely disabled. (Client: The Committee for Purchase from People Who Are Blind or Severely Disabled.)

Evaluation of the HUD Supportive Housing Programs for Persons with Disabilities. An evaluation of three housing programs for low income persons with disabilities: Section 202 Direct Loan Program for the Elderly or Handicapped, Section 162 of the Housing and Community Development Act of 1987, and Section 811 of the National Affordable Housing Act of 1990. For the Sections 202 and 162 programs, the evaluation is designed to assess the programs' effectiveness, since 1978, in providing adequate housing and support services for persons with disabilities and to assess the implications this past experience may have for future policy decisions on the Section 811 program. The evaluation includes mailed and telephone interviews of over 450 project sponsors, 300 building managers, and 1000 residents. (Client: U.S.

Department of Housing and Urban Development).

Feasibility Study for a Personal Assistance Services (PAS) Medicaid Waiver Program.

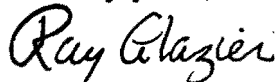
A project to recommend whether or not and how the state might apply to the federal Health Care Financing Administration (HCFA) for a waiver of Medicaid regulations that would allow provision of Attendant Care Program services through a parallel Home and Community-Based Care (2176) Waiver PAS Program, by assessing both HCFA requirements and the preferences of concerned constituencies, and to design the new PAS Program's service delivery system. (Client: Pennsylvania Department of Public Welfare, Office of Social Programs.)

I have prepared a booklet describing our corporate experience in this field. Enclosed please find the opening section of that booklet, which consists of a brief overview of the company, a prospectus on the Center, and listings of our disability and rehabilitation projects over the years: Abt project code name, project title, period of performance, and funded level. For most of these projects there are 1-2 pp. summaries written. Please use the projects list as a menu, and tell me which ones you'd like to read more about. Just drop me a line with a list of Abt project code names, and I'll zip back to you copies of the write-ups on those. I think you can tell from the rather descriptive project titles which ones you'd like to see.

You may already be familiar with Abt Associates Inc. as the nation's premiere social research firm and its role in analysis and policy planning in the general area of health care. We recently received a five-year, \$44 million contract from the Agency for International Development to apply this expertise in reshaping the health care system of post-Soviet Russia. The Center I direct is situated in Abt's Health Policy Research Area, directed by physician Dr. Earl Brown from the firm's Bethesda office.

If I can provide you with further information on Abt's corporate capabilities and experience, please let me know the particular policy interests with which the Office of Domestic Policy could use assistance. I hope to be able to pay you a visit next time I am in DC, which looks like it will be 29 March - 1 April. Please let me know if you have any time on the 31st of March or the 1st of April for a courtesy call. My direct line is (617) 349-2481.

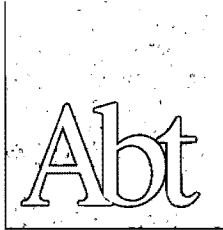
Sincerely yours,



Raymond E. Glazier, Jr.

Director, Abt Center for the Advancement of Rehabilitation and Disability Studies
Project Director, NIDRR National ADA Technical Assistance Coordinator Project
Project Director, Feasibility Study for a Pennsylvania PAS Medicaid Waiver Program

C.c.: Stanley Herr, ODP; David Esquith, NIDRR; Earl Brown, MD, Abt-Bethesda



Associates Inc.

*Center for the Advancement
of
Rehabilitation and Disability Studies*

**Disability- and Rehabilitation-Related
Projects from the
Twenty-Nine Year History
of Social Policy Research
by
Abt Associates Inc.
1965-1994**

**Raymond E. Glazier, Jr.
Center Director
March 1994**

Abt Associates Inc.

Abt Associates Inc., founded in the Commonwealth of Massachusetts in early 1965, is an employee-owned social science research firm with approximately 460 full-time professional employees. Our areas of specialization are in research, evaluation, and analysis of social problems, programs, and policies under contract to federal, state, and local government agencies, including the Department of Defense, private industry, and educational institutions in the U.S. and overseas. The company's main offices are located in Cambridge, Massachusetts, with a Washington, D.C., area office in Bethesda, Maryland, and an office in Chicago, Illinois.

Approximately 25 percent of the professional staff have Ph.D.s or equivalent degrees, while another 50 percent hold master's level degrees. Staff educational and professional backgrounds cover a broad range of disciplines including, economics, sociology, psychology, law, statistics, mathematics, public administration, urban planning, anthropology, medical and biological sciences, architecture, and engineering. Our skills include systems analysis, interviewing, survey design, simulation/gaming, computer processing, and management science. The union of these qualifications provides a unique basis for Abt Associates' long experience and high level of capability in such fields as program planning and demonstrations, large-scale program and policy evaluations, statistics and methodology, computer technology, information systems development and management, training, and curriculum development.

The firm is divided into 13 substantive areas:

- Health Policy Research
- Health Services Research and Evaluation
- Housing, Income Security and Employment
- Education and Child Development
- Law and Public Policy
- Biostatistics and Epidemiology
- Business Strategy Group
- Environmental Research
- Financial Services Area
- Agriculture and Natural Resources
- International Health and Economic Development
- Statistical and Evaluation Surveys
- Survey Research Group

Coordination and communications among these areas, access to outside sources of information concentrated in the nearby academic communities, and effective management systems enable Abt Associates to offer the wide range of capabilities, experience, and skills necessary to fulfill its contractual agreements successfully.

CENTER FOR THE ADVANCEMENT OF REHABILITATION AND DISABILITY STUDIES

Background:

Over the past 28 years Abt Associates has undertaken over 40 contracted research projects in the general area of rehabilitation and disability studies with a total worth of almost \$22 million and an average size of nearly \$533,000. This body of work has dealt with issues in education, employment, health care, housing, income security, insurance, law, transportation, and other substantive areas. The passage and signing of the Americans with Disabilities Act (ADA) of 1990 and its phasing in over the next thirty years is certain to create policy research opportunities in all areas of American life and hence cut across all areas in which Abt conducts social research.

Purpose:

The cross-cutting nature of rehabilitation- and disability-related research, combined with the desirability of having a specific locus for specialized expertise, has suggested strongly the advisability of establishing a Center for the Advancement of Rehabilitation and Disability Studies within Abt's Health Policy Research Area. The Center's current core area of operations is in service to the grant and contract shops within the Office of Special Education and Rehabilitative Services (OSERS) of the U.S. Department of Education: NIDRR (National Institute on Disability and Rehabilitation Research), RSA (Rehabilitation Services Administration), and OSEP (Office of Special Education Programs); as well as the Department of Veterans Affairs, the Department of Housing and Urban Development, the Social Security Administration of the U.S. Department of Health and Human Services, and other federal and state agencies. However, the Center can lend expertise to contract proposals, grant applications, and actual project performance in any substantive research Area with a rehabilitation/disability component, while drawing upon specialized and often little known experience scattered throughout the company, as well as the outside academic community and other organizational resources. The Center also maintains an important relationship with the non-profit Abt Health Care Research Foundation.

The Model:

The paradigm for the Center is not altogether unlike an academic research institute which has a Director, Fellows (Senior Analyst/Project Director level staff drawn from around the firm), Associates (less senior level Abt people), and Adjunct Fellows (academicians and other outside consultants willing to participate in Center activities). The Center also plans in future to offer summer internships to graduate students from appropriate disciplines, giving priority to those who themselves have disabilities. Publication of Abt research findings in this field are actively encouraged and relationships with other research organizations.

Rehabilitation/Disability Projects by Client

Dept./Office of Education (includes all Dept. of Health, Education, and Welfare)

Rehabilitation Services Administration:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
AMIS	Evaluate, Revise, and Develop the RSA Data Retrieval and Management System Using New Data Elements	RSA HEW	09/30/78 06/30/82	D
RESTOR	An Evaluation of the Rehabilitation Services Administration Research and Training Center Program	OHD HEW	10/01/76 11/12/77	B
REVUE	Evaluation of Eligibility Determination in State Vocational Rehabilitation (VR) Agencies	RSA DoEd	09/30/86 01/31/89	C
RSVB	Feasibility Study of Retirement and Health Insurance for Blind Vendors	RSA HEW	06/30/75 11/08/75	B

Bureau of Education for the Handicapped:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
CASE	Preparation of Case Studies to Improve Education of Handicapped Children	HEW	06/27/72 03/27/73	B
EXIT	Assessment of the Adjustment of Deinstitutionalized Mentally Retarded People to Community Life		07/02/74 12/31/76	
IVY	National Study of Higher Education Facilities and Services for Handicapped Students	BEH OfEd	07/01/74 07/30/76	B
NOTICE	Identifying Strategies for Assisting LEAs and SEAs to Meet Procedural Safeguards Afforded Handicapped Children and Their Parents	BEH OfEd	10/01/78 05/29/81	C

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.

Abt Associates Inc. REHABILITATION & DISABILITY RESEARCH, Page 2

Office of Human Development:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
ALPHA	Comprehensive Review and Evaluation of the Instruments Used by Programs for the Developmentally Disabled	OHD HEW	09/27/77 07/09/78	B
3D	A Special Study of the Definition of Developmental Disabilities	OHD HEW	09/30/76 10/31/77	B

National Institute on Disability and Rehabilitation Research and Other:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
ARCH	Assessment of Selected Resources for Severely Handicapped Children and Youth	OfEd	07/05/73 04/30/76	C
FARTRAN	Integrated Assessment and Skills Transfer: Applications to Transition from School to Work	OfEd	09/30/86 03/29/87	A
FLEX	Functional Assessment in Vocational Rehabilitation: Validation, Extension, and Application	NIHR DoEd	04/01/83 03/31/86	B
STP	Special Teens and Parents Study of the Impact of P.L. 94-142	OfEd HEW	10/01/78 11/20/80	B
TACKLE	NIDDR Americans with Disabilities Act (ADA) Technical Assistance Coordinator	NIDDR	09/30/91 09/29/94	D

Department of Health and Human Services

Alcohol, Drug Abuse, and Mental Health Administration:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
MAMA	AIDS Outreach to Pregnant Women and Their Children	NIDA PHS	09/30/88 09/29/91	D

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.

Alcohol, Drug Abuse, and Mental Health Administration: (continued)

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
PARTNERS	AIDS Outreach to Female Prostitutes and Sexual Partners of Intravenous Drug Abusers	NIDA PHS	03/28/88 03/27/91	D

Health Care Financing Administration:

HELPERS	Staff-Assisted Home Dialysis Demonstration Project	HCFA	06/01/91 12/01/95	C
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National Institute of Mental Health:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
AIDSTRAIN	Training of Health Care Providers to Address AIDS	NIMH	02/10/88 02/09/91	C

Social Security Administration:

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
NETWORK	Evaluation of Project Network	SSA	06/30/92 12/30/97	D

Department of Housing and Urban Development

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
SECTN811	Evaluation of the HUD Supportive Housing Programs for Persons with Disabilities (subcontract from AREA, Inc.)	AREA for OPDR	10/01/92 09/30/94	C
SPLUSC	Evaluation of the Shelter Plus Care Program for Severely Disabled Home- less Persons	OPDR	02/23/93 06/15/95	C

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.

Department of Veterans Affairs

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
DISABLED	Updating VA Schedule for Rating Disabilities:	DVA	08/8/90 09/13/90	A
DISABLED-2	Updating the Medical Criteria for VA's Disability Rating Schedule: Muscular, Respiratory, and Orthopedics Systems	DVA	03/27/91 06/07/91	B
DISABLED-3 (no descrp)	Updating the Medical Criteria for the VA's Disability Rating Schedule	DVA	08/23/91 01/17/92	B

Department of Transportation

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
DCTRANS	Accessibility of the Washington D.C. Transit System	DOT	10/01/71 12/31/72	A
HANDI	Study of the Transportation Needs of the Handicapped	DOT	04/18/68 08/30/69	B

Committee for Purchase from People Who Are Blind or Severely Disabled

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
PURCHASE	Methodology Development for a Benefit-Cost Analysis of the Javits-Wagner O'Day (JWOD) Program	Comm.	10/01/93 06/30/94	B

General Accounting Office

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
GAO-2 (no descrp)	Study Methodology and Sample Design to Identify Weaknesses in Social Security Disability Criteria and Determination Process	GAO	04/04/90 06/30/90	A

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.

General Accounting Office (continued)

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
GAO-3 (no descrp)	Study Methodology and Sample Design to Determine Reasons for Racial Differences with Social Security Disability Denial Rates	GAO	04/04/90 06/30/90	A
GAO-5 (no descrp)	Study Methodology and Sample Design to Determine Reasons for Wide Variance Among States in Social Security Disability Allowance Rates	GAO	04/04/90 06/30/90	A

State and Local

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
MIFLEX	Functional Assessment Rating System Pilot Installation and Test	St of MI	08/25/86 06/30/87	A
MS (no descrp)	Epidemiological and Psychosocial Aspects of Multiple Sclerosis	Nat'l MS Society	04/16/90 04/15/91	A
MS2 (no descrp)	Produce the Multiple Sclerosis Fact Book	Nat'l MS Society	07/01/91 06/30/92	B
OHFLEX	Functional Assessment Rating System Distributed Access in Multi-User Environment	St of OH RSC	10/01/85 03/31/86	A
PA-PAS	Feasibility Study for a Personal Assistance Services Home and Community-Based (2176) Medicaid Waiver Program	St of PA	01/07/93 08/30/94	B
PASHN	Assessment of the Rehabilitation Needs of Individuals with Severe Handicaps	St of PA	02/01/88 04/30/89	B
TRURO	The Development of Concepts for Small Business Enterprises to be Operated by the Handicapped in Nova Scotia	Sub Abt CAN	05/08/81 07/31/81	A

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.

State and Local (continued)

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
WISFLEX/ WISFLEX2	Functional Assessment Rating System Office Aggregation and Forms Production/Phase II Installation of FARS	St of WI	09/30/85 09/29/86	A
WYFLEX	Functional Assessment Rating System Statewide Installation	St of WY	12/15/85 06/15/86	A

International

<u>Code Name</u>	<u>Project Title</u>	<u>Client</u>	<u>Dates</u>	<u>\$ Size*</u>
TANZAIDS	Economic Impact of Aids in Tanzania	World Bank	12/10/90 02/01/91	A

41 Projects Total \$21,851,731 Ave. Worth \$532,969

(Range: \$4,668 - \$5,388,922)

NOTE: In the following section are presented 1-2 page project summaries, arranged alphabetically by Abt project code name for ease of reference. No written project summary exists for those annotated "no descrp" (no description) in the preceding listings.

* * * * *

*\$ Values: A = < \$100K, B = \$100K-500K, C = \$501K - \$1 Mil., D = > \$1 Mil.