Assessment of Idahoans With Disabilities
State Independent Living Council Survey

Social Science Research Center
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Executive Summary

The data for the survey of Idahoans with disabilities for the State Independent Living Council (SILC) was collected between December 12th, 2004 and January 4th, 2005 by Clearwater Research of Boise, Idaho. The Social Science Research Center at Boise State University was contracted by SILC to coordinate the survey for the council. Funding was provided by SILC and the Idaho Division of Vocational Rehabilitation.

For the survey 9,027 calls were placed within the state of Idaho using random digit dialing. The survey yielded 1,533 households with no members having a disability and 1,216 households with one or more individuals indicating a disability. Of the 44% of households with a member with a disability, 37% had an adult with a disability. Following the “screener” portion of the survey, 581 adult respondents with a disability, as defined by the Americans with Disabilities Act (ADA), completed the entire survey.

Respondents to the survey sometimes indicated that they had more than one disability during the screener portion of the survey. The most frequently occurring disabilities were mental illness (19.2%), followed by difficulty walking (15.1%), and learning disorders (14.3%).

When respondents with disabilities were asked what the most important problem they face is, almost 29% indicated physical health problems associated with their disability. When respondents were asked what the most important problem people with disabilities face, in general, almost 29 did not know or were unsure. However, more than 15% indicated that they perceived access to services and places as the most significant problem people with disabilities face in general.

Respondents with disabilities were also asked to indicate their ability to live independently. About 83% of respondents indicated they live very independently or somewhat independently.

The survey also asked respondents with disabilities to indicate their employment status. More than 26% indicated that they were retired, 20% were employed full-time, and 10% were employed part-time. More than 17% were unable to work. When retirees were removed from the sample, about 27% of respondents were employed full-time, more than 13% were employed part-time, and more than 23% were unable to work.

Perhaps one of the most important aspects of this survey was capturing how many people with disabilities in the state have medical coverage or benefits. More than 40% of respondents had some form of private insurance, more than 27% had Medicare, 7% had Medicaid, and almost 13% had no medical insurance or benefits. When the same respondents were asked if they had adequate health coverage or benefits, more than 61% strongly agreed or agreed. However, when respondents were asked if they had postponed seeking health care one or more times in the last year, more than 43% indicated they had postponed seeking health care at least once in the last year.

One of the most surprising findings of the survey was that more than 76% of respondents indicated that they had voted in an election in the last year, indicating that people with disabilities in Idaho are highly civically engaged.

Of the 172 respondents that used an assistive technology, 43 (25%) used a device to assist with mobility and 40 (more than 23%) used hearing aids or other devices to assist with hearing or deafness.
State Independent Living Council Philosophy\textsuperscript{1}

The State Independent Living Council (SILC) advocates for equal opportunity, equal access, self-determination, independence and choice for people with disabilities. The focus of the SILC is to maximize opportunity and to incorporate people with disabilities into all walks of life by empowering them. The Idaho SILC provides leadership development opportunities to empower grassroots advocates, who in turn, will develop systemic changes in public policy to positively impact people with disabilities.

The Independent Living Movement\textsuperscript{2} stems from a philosophy which states that people with all types of disabilities should have the same civil rights and control over choices in their own lives as people without disabilities. The SILC, therefore, works to change societal attitudes about people with disabilities away from a patronizing, pitying, medical model towards empowerment, independence, home- and community-based services, and integration as fully contributing, valued members of society.

\textsuperscript{1} Adapted from State Independent Living Council Website: \url{http://www2.state.id.us/silc/}
\textsuperscript{2} \url{http://www.acils.com/acil/ilhistory.html}
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Survey Results

For the survey, 9,027 Idaho phone numbers were called. Of the total numbers called, a survey sample of 2,749 respondents completed the “screener” portion of the survey, which was used to determine if the respondent or anyone in their household had a disability according to ADA guidelines. The survey sample yielded 1,533 respondents (almost 56%) who indicated no member of their household had a disability and 1,216 respondents (over 44%) who indicated that one or more members of their household had a disability. Figure 1 shows a further breakdown of the sub-sample of respondents with one or more disabled members in their household.

Figure 1. Percentages of respondents that indicated no members in the household had one or more disabilities. The sub-sample includes respondents indicating at least one household member had a disability and is further broken down into adults and non adults. N = 2,749.

The fact that 44.2% of the respondents had one or more household members with a disability is concerning. The 2000 Census reported that 19.3% of Americans, age 5 or older qualified as having a disability (Waldrop & Stern, 2003). However, the ADA definitions used to screen respondents in this survey for a disability (or a member of their household) are not as conservative in nature compared to the Census Bureau definitions. In the 2000 census, the following was used to determine if respondents had a disability (Evans et al., 2004):

The data on disability status were derived from answers to long-form questionnaire Items 16 and 17. Item 16 was a two-part question that asked about the existence of the following long-lasting conditions: (a) blindness, deafness, or a severe vision or hearing impairment (sensory disability) and (b) a condition that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying (physical disability). Item 16 was asked of a sample of the population 5 years old and over.
Survey Results

Individual Disability Types

Item 17 was a four-part question that asked if the individual had a physical, mental, or emotional condition lasting 6 months or more that made it difficult to perform certain activities. The four activity categories were: (a) learning, remembering, or concentrating (mental disability); (b) dressing, bathing, or getting around inside the home (self-care disability); (c) going outside the home alone to shop or visit a doctor’s office (going outside the home disability); and (d) working at a job or business (employment disability). Categories 17a and 17b were asked of a sample of the population 5 years old and over; 17c and 17d were asked of a sample of the population 16 years old and over.

Many of the categories in the Census are similar to the questions used for this survey. However, the questions used for this survey conform to the criteria used by the ADA. These definitions include chronic heart disease, pulmonary disease (COPD), or emphysema; traumatic brain injury; alcohol or drug abuse; and HIV or AIDS. The specific use of COPD in this survey significantly increased the percentage of the sample of respondents qualifying as having a disability.

Individual Disability Types

To determine if a respondent or a member of the respondent’s household had a disability, the following “screener” questions were asked:

1. Is there anyone on your household that has difficulty walking? This might include using a wheelchair; being paralyzed, paraplegic, or quadriplegic; having severe arthritis, cerebral palsy, spina bifida, muscular dystrophy, or polio; not having use of one’s legs; using a walker, crutches, or a cane.

2. Is there anyone in your household that has a missing limb or has difficulty using their limbs?

3. Does anyone in your household have difficulty seeing, that is, they are blind, or have low vision? This might include having no vision at all; using a guide dog or a sighted guide; using aids such as magnifiers, large print, or Braille.

4. Is there any one in your household who is deaf or has difficulty hearing? This might include primarily using sign language, writing notes, or using other nonverbal methods of communicating or using hearing aids or other amplifying devices.

5. Is there anyone in your household who has trouble speaking because of a disability? This might be a result of a brain injury, cerebral palsy, a stroke, Parkinson’s disease, or multiple sclerosis or other cognitive disorder.

6. Is there anyone in your household who has chronic heart disease, chronic obstructive pulmonary disease, or emphysema?

7. Is there anyone in your household who has epilepsy or a seizure disorder?

8. Is there anyone in your household who has a traumatic brain injury?

9. Is there anyone in your household who has been diagnosed as having mental retardation?

10. Is there anyone in your household who has been diagnosed with a learning disability, attention deficit disorder, or hyperactivity; has difficulty learning; or any other similar condition?
11. Is there anyone in your household who has been diagnosed as having a mental illness, or another emotional condition? This might include such things as manic-depressive disorder, schizophrenia, depression, or anxiety.

12. Is there anyone in your household who has gone through an alcohol or drug treatment program, or as a result of alcohol or drug abuse, receives Social Security Income or Social Security Disability Income, vocational rehabilitation or other social service?

Qualified responses to the twelve disability types varied from 0.1% of respondents affirming HIV or AIDS to 17.0% indicating they had a mental illness (Table 1). The second, third, and forth most common disabilities as indicated by the respondents were difficulty walking (13.4%), learning disabilities (12.7%), chronic heart disease or chronic obstructive pulmonary disease (9.6%), and missing a limb (7.2%) respectively.

Table 1. Percentages and frequencies of individual responses for each disability during the screener portion of the survey for the determination of disability qualification. N=2,749

<table>
<thead>
<tr>
<th>Disability</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know/Not Sure</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mental Illness</td>
<td>17.0%</td>
<td>82.8%</td>
<td>0.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Difficulty Walking</td>
<td>13.4%</td>
<td>86.4%</td>
<td>0.1%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Learning Disability</td>
<td>12.7%</td>
<td>87.1%</td>
<td>0.2%</td>
<td>-</td>
</tr>
<tr>
<td>Deaf or Difficulty Hearing</td>
<td>9.7%</td>
<td>90.1%</td>
<td>0.1%</td>
<td>-</td>
</tr>
<tr>
<td>Chronic Heart Disease or Chronic Obstructive Pulmonary Disease</td>
<td>9.6%</td>
<td>90.1%</td>
<td>0.3%</td>
<td>0.1%</td>
</tr>
<tr>
<td>Missing a Limb</td>
<td>7.2%</td>
<td>92.7%</td>
<td>0.1%</td>
<td>-</td>
</tr>
<tr>
<td>Blind or Difficulty Seeing</td>
<td>7.0%</td>
<td>93.0%</td>
<td>0.0%</td>
<td>-</td>
</tr>
<tr>
<td>Alcohol or Drug Abuse</td>
<td>5.8%</td>
<td>94.1%</td>
<td>0.1%</td>
<td>0.0%</td>
</tr>
<tr>
<td>Speech Impediment</td>
<td>3.5%</td>
<td>96.4%</td>
<td>0.1%</td>
<td>-</td>
</tr>
<tr>
<td>Epilepsy or Seizure Disorder</td>
<td>2.7%</td>
<td>97.3%</td>
<td>0%</td>
<td>-</td>
</tr>
<tr>
<td>Traumatic Brain Injury</td>
<td>2.3%</td>
<td>97.4%</td>
<td>0.3%</td>
<td>-</td>
</tr>
<tr>
<td>Mental Retardation</td>
<td>1.4%</td>
<td>97.4%</td>
<td>0.1%</td>
<td>-</td>
</tr>
<tr>
<td>HIV or AIDS</td>
<td>0.1%</td>
<td>99.8%</td>
<td>-</td>
<td>0.1%</td>
</tr>
</tbody>
</table>

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Occurrences of Disability Types in Comparison to the 1995 Survey

Figure 2 shows the percentages of responses indicating a specific disability. It should be noted that survey respondents could answer yes to one or more disabilities. As a result, the sample size in Figure 2 is 2,440 and is representative of the number of disabilities, not the number of individuals. Respondents with a disability frequently claimed more than one disability type. One difference between the 1995 study by Scudder & Willmorth and this survey is that respondents with diabetes qualified as having a disability in the 1995 study but were not asked for this survey.

The percentages of responses to specific disability types varied compared to the 1995 study (Scudder & Willmorth, 1995). Mental illness and depression/anxiety were separate categories in the 1995 study. These categories constituted 14.3% and 3.4% respectively in that study, for a combined 17.7%. These two categories were combined in this survey for 19.2%. Mobility problems constituted 9.9% of the responses in the 1995 study. The current study used the category difficulty walking, which comprised 15.1% of the responses. Learning disorders jumped from 9.7% in 1995 to 14.3% in the current study. The category heart disease in the 1995 study was expanded to include chronic heart disease, pulmonary disease, or emphysema. These percentages were 6.6% and 10.8% respectively, which may be reflected by the more inclusive definition in the current study.

There were some notable declines since the 1995 study as well. Low vision and blindness were separate categories in the 1995 survey, comprising 14.3% and 1.4% of the responses respectively, for a combined 15.7%. In the current study blindness and difficulty seeing comprised 7.9% of the responses. Hard of hearing and deafness constituted 10.1% and 1.1% respectively in the 1995 study for a combined 11.2%, while difficulty hearing and deafness constituted 6.9% of the responses in the current study.

Other categories were comparable to the 1995 study. In the previous study 3.7% of the responses indicated a traumatic brain injury, and 2.6% indicated the same in the current study. The responses indicating epilepsy or a seizure disorder were 2.7% in 1995 and 3.0% in the current study. In 1995, 1.3% of the responses indicated mental retardation, with 1.6% in the current study. Alcohol or drug abuse constituted 5.4% of the responses in 1995, with a 6.5% response rate in the current study. Responses to HIV or AIDS constituted 0.2% of the responses in 1995, compared with 0.1% currently.
Figure 2: Percentages of each disability type. Respondents frequently indicated that they had more than one disability. As a result, the sample size is not equivalent to the number of respondents. N = 2,440.
Frequencies of Respondents with More than one Disability

Adult respondents indicated that they had as many as eight disabilities according to the ADA criteria used during the “screener” portion of the survey (Figure 3). Just under half (48.4%) of respondents had only one disability. The relatively frequent occurrence of more than one disability can be most likely attributed to disabilities that are age-related or that maybe somehow correlated with another disability. For example, if a respondent indicated that they have difficulty walking, it may be because they are missing a limb.

Figure 3. Percentage of respondents indicating one or more disabilities. N=1,185
General Issues Facing Adults with Disabilities

Following the completion of the “screener” portion of the survey where the various disability types were captured, if a respondent indicated they had no disability (or there were no members in the household with a disability), the survey was terminated. If the respondent had a disability they were asked to continue with the second portion of the survey. If the respondent had no disability, but an adult was present in the household with a disability, that member was asked to complete the second part of the survey. Slightly more than 600 respondents completed the second portion of the survey, which addressed disability issues. These included problems of everyday life, ability to live independently, employment, availability and use of information from organizations for those with disabilities, educational opportunities, community involvement opportunities, and medical coverage.

Important Personal Issues

For the survey, respondents were asked to identify (in their own words) the most important problem they personally face as a person with a disability (Figure 4). They were also asked what they perceive to be the most important problem people with disabilities face in general (Figure 4). Answers to these two questions are open-ended, and therefore the categories of responses vary.

The most important problem that respondents faced personally was by far physical health conditions associated with their disability (28.7%). However, 28.7% of respondents were uncertain what the most important problem was for other people with a disability.

Important Issues for People with Disabilities in General

While 10.3% of respondents indicated that general mental health and mental health including anxiety, depression, and stress was the most important problem they faced personally (Figure 4), not one respondent indicated that this might be the most important problem that other people with disabilities face in general. Interestingly, respondents indicated that general access, including access to services and places, is perhaps the most important problem facing people with disabilities in general (15.3%).

Financial status and mobility tied for second at 10.9% as a problem that respondent with disabilities face personally. However, financial status was perceived as the third most important problem for people with disabilities in general (9.9%). Health care was perceived by 11.7% of respondents as being the second most important problem people with disabilities face in general.
Figure 4: The most important problems respondents personally face (N=607), and the most important problems respondents perceived that people with disabilities face in general (N=606).
Independent Living

About two-thirds of respondents indicated that they were able to live very independently (Figure 5). This level of independence is comparable to the 63.9% of respondents that claimed to live very independently in Idaho in 1995 (Scudder & Willmorth). Similarly, 7.3% of respondents claimed to be very dependent in 1995 (Scudder & Willmorth), and 5.6% claimed to be very dependent in this survey.

Almost 83% of respondents claimed that they live very independently or somewhat independently. Exactly 16% of respondents claimed they live very dependently or somewhat dependently.

Figure 5. Level of independent and dependent living as indicated by respondents. N=603
Personal Assistance

In order for some people with disabilities to meet their needs they must utilize certain services to do so. When asked if these services were adequately available to meet their needs, 43.1% of respondents strongly agreed or agreed that these services were adequately available (Figure 6). However, 36.9% of the respondents indicated that they disagreed or strongly disagreed that adequate services were available to them help take care of their needs. The most surprising response to this question is that 18.0% of the respondents did not know if the services available to them could adequately help take care of their needs as a person with a disability.

Figure 6. Percentages of respondents who have available personal assistance services adequate for them to take care of their needs. N=599
Services and Support

When asked if they could choose what services and support they receive, 72.1% of respondents indicated they strongly agree or agree (Figure 7), compared with 22.0% of the respondents who disagree or strongly disagree.

Figure 7. Percentages of respondents who agree or disagree that they have the ability to choose the services and support they want to receive. N=595
Educational and Vocational-Technical Training

Survey respondents were also asked if they believed that adequate educational or vocational-technical training opportunities were available to them (Figure 8). Two-thirds of respondents indicated that they either agree or strongly agree that there are adequate educational or vocational-technical training opportunities available to them. Only 24.1% disagree or strongly disagree.

Figure 8. Percentages of respondents who believe they have adequate opportunities for education or vocational-technical training. N=597
Community Involvement

When asked if they had adequate opportunities to be involved in the community, 86.9% of respondents agreed or strongly agreed that they do (Figure 9), compared with only 10.4% who disagreed or strongly disagreed.

![Figure 9](image_url)  
Figure 9. Respondents level of agreement that they have adequate opportunities to be involved in the community. N=594
Assistive Technology

Some people with disabilities use a device or some form of technology for assistance. When respondents were asked if the used some form of technology or a device to assist themselves, 28.5% of the respondents indicated that they use technology or a device for assistance and 69.7% indicated they do not (Figure 10).

Figure 10. Percentages of respondents that utilize or do not utilize a technology or device to assist themselves. N=603


Survey Results
Independent Living

Assistive Technology Types

If the individual respondents affirmed that they used a technology or device for assistance (Figure 10), they were then asked to describe what they use, in their own words (Table 2). Of the 603 respondents, 172 indicated they use a technology or device for assistance. The most common form of assistance included walkers, wheelchairs, scooters, lifts, etc. (25.0%). The second most common category of assistive technology included hearing aids or other devices designed to assist with limited hearing or deafness (23.3%).

Table 2. Types and frequencies of assistive technologies utilized by respondents.

<table>
<thead>
<tr>
<th>Technology</th>
<th>Number of Respondents Using the Technology</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equipment such as walkers, wheelchairs, scooters, lifts designed for wheelchairs, or any other devices that help with mobility</td>
<td>43</td>
<td>25.0%</td>
</tr>
<tr>
<td>Hearing aids or other devices designed to assist with limited hearing or deafness</td>
<td>40</td>
<td>23.3%</td>
</tr>
<tr>
<td>Braille note takers, screen readers, special computer software, or any other devices designed to assist with limited vision or blindness</td>
<td>16</td>
<td>9.3%</td>
</tr>
<tr>
<td>Not an Assistive Technology</td>
<td>13</td>
<td>7.6%</td>
</tr>
<tr>
<td>Devices, designed to assist with spoken communication</td>
<td>12</td>
<td>7.0%</td>
</tr>
<tr>
<td>Computer (only use if none of the above fit)</td>
<td>10</td>
<td>5.8%</td>
</tr>
<tr>
<td>Oxygen / breathing apparatus / nebulizers</td>
<td>9</td>
<td>5.2%</td>
</tr>
<tr>
<td>Voice-recognition technology, a special keyboard or mouse, or any other devices that help with limited dexterity or use of your hands or arms</td>
<td>7</td>
<td>4.1%</td>
</tr>
<tr>
<td>Pacemaker / Never stimulator / etc.</td>
<td>7</td>
<td>4.1%</td>
</tr>
<tr>
<td>Large key, speaker, or enhanced volume telephone, talking caller ID, speech recognition telephone or other specialized telephone</td>
<td>4</td>
<td>2.3%</td>
</tr>
<tr>
<td>Prostheses or orthotics of any kind or modifications to furniture, appliances or rooms.</td>
<td>3</td>
<td>1.7%</td>
</tr>
<tr>
<td>Automatic door openers or remotely controlled light switches</td>
<td>2</td>
<td>1.2%</td>
</tr>
<tr>
<td>Ramps instead of steps or stairs, or curb cuts on sidewalks</td>
<td>1</td>
<td>0.6%</td>
</tr>
<tr>
<td>Closed-captioning on TV</td>
<td>1</td>
<td>0.6%</td>
</tr>
<tr>
<td>Don't Know / Unsure</td>
<td>1</td>
<td>0.6%</td>
</tr>
<tr>
<td>Refused</td>
<td>3</td>
<td>1.7%</td>
</tr>
</tbody>
</table>

N=172

Based on Table 2 it is obvious that there is a myriad of devices and technologies available to persons with disabilities. There are other technologies and devices available in addition to those listed above. In the same way that technology is rapidly being expanded and developed for the general population, technology available to assist persons with disabilities will also greatly
expand and develop in the future. The ability for some persons with disabilities to have access to these devices and technologies in the future remains uncertain, however.

**Access to Assistive Technology**

When respondents were asked if they have ready access to adaptive devices and technology to assist them in being independent, 61.2% agreed or strongly agreed (Figure 11), while 24.9% disagreed or strongly disagreed.

![Pie chart showing the distribution of responses to the question about access to assistive technology.](image)

**Figure 11.** Percentages of respondents who agree or disagree that they have ready access to adaptive devices and technology to assist them in being independent. $N=596$
Employment Concerns of Respondents

More than 26% of respondents indicated that they were retired, 20.0% indicated full-time employment, and 17.4% indicated that they were unable to work (Figure 12). Since a large portion of the respondents were retired, they were removed from the entire sample of responses and plotted alongside the original sample in Figure 12. This was done for comparison purposes. After removing retirees from the sample, 27.1% of respondents indicated they were employed full-time, 23.5% of respondents were unable to work, and 13.6% of respondents were employed part-time.

![Employment Status Pie Chart]

**Figure 12.** Employment status of respondents. Since the proportion of retired respondents was the highest, retirees were removed to portray people with disabilities in the workforce for the purpose of comparison. \( N=605 \) for all respondents, \( N=447 \) for responses from non-retirees.
**Survey Results**  
*Employment Concerns*

**Under-Employment**

After placing respondents into the categories shown in Figure 12, those that fell into full-time employment, part-time employment, or self-employment were asked if they believed they were under-employed because of their disability. Of the 605 respondents, 219 of the respondents were either employed; 121 respondents were employed full-time, 61 were employed part-time, and 37 were self-employed.

When the 219 employed respondents were asked if they believed they were under-employed because of their disability, 16.9% of the employed respondents believed they were, 81.3% believed they were not, and 0.9% were unsure (Figure 13). It was assumed that many full-time employees probably do not consider themselves under-employed. To determine if this was the case, Table 3 presents a cross-tabulation of under-employment as responses from each individual employment category.

![Figure 13. Responses from full-time, part-time, and self-employed individuals when asked if they believe they are under-employed because of their disability. N=219](image-url)

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Only 6.7% of full-time respondents believed they were under-employed because of their disability (Table 3). In the case that full-time respondents did believe they were under-employed because of their disability, they probably were not referring to the number of hours they worked per week. Full-time respondents that indicated they believed they were under-employed because of their disability most likely believed that there current employment did not maximize their individual potential. This survey did not address that aspect, however.

When part-time and self-employed respondents were asked if they believed they were under-employed because of their disability, 27.9% and 30.6% believed they were under-employed respectively. This observation does not deviate from an expected difference between these two categories and full-time employment.

<table>
<thead>
<tr>
<th></th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know/Not Sure</th>
<th>Refused</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Part-time</strong></td>
<td>17</td>
<td>42</td>
<td>1</td>
<td>1</td>
<td>61</td>
</tr>
<tr>
<td></td>
<td>27.9%</td>
<td>68.9%</td>
<td>1.6%</td>
<td>1.6%</td>
<td></td>
</tr>
<tr>
<td><strong>Full-time</strong></td>
<td>8</td>
<td>111</td>
<td>1</td>
<td>0</td>
<td>120</td>
</tr>
<tr>
<td></td>
<td>6.7%</td>
<td>92.5%</td>
<td>0.8%</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td><strong>Self-employed</strong></td>
<td>11</td>
<td>24</td>
<td>0</td>
<td>1</td>
<td>36</td>
</tr>
<tr>
<td></td>
<td>30.6%</td>
<td>66.7%</td>
<td>-</td>
<td>2.7%</td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>36</td>
<td>177</td>
<td>2</td>
<td>2</td>
<td>217</td>
</tr>
</tbody>
</table>
Survey Results
Organizational Information and Services Available to People with Disabilities

Organizational Information and Services Available to People with Disabilities

It is important for organizations that provide advocacy services to people with disabilities to measure awareness within their potential client-base. In addition, these organizations need to know the levels of satisfaction of persons with disabilities who utilize information and services from these organizations. Table 4 shows the percentages of respondents in Idaho who had been contacted by or received information from the following organizations:

- State Independent Living Council (SILC)
- Disability Action Center (DAC)
- Idaho Division of Vocational Rehabilitation (IDVR)
- Living Independence Network Corporation (LINC)
- Living Independently for Everyone (LIFE)
- Idaho Commission for the Blind or Visually Impaired (ICBVI)
- Americans with Disabilities Taskforce (ADA)
- Idaho Assistive Technology Project (IATP)

Table 4. Percentages of respondents who have been contacted by or received information from various organizations for people with disabilities. N=603

<table>
<thead>
<tr>
<th>Organization</th>
<th>Yes</th>
<th>No</th>
<th>Don’t Know</th>
<th>Refused</th>
</tr>
</thead>
<tbody>
<tr>
<td>SILC</td>
<td>2.8%</td>
<td>95.5%</td>
<td>1.7%</td>
<td>-</td>
</tr>
<tr>
<td>DAC</td>
<td>2.8%</td>
<td>95.2%</td>
<td>2.0%</td>
<td>-</td>
</tr>
<tr>
<td>IDVR</td>
<td>16.6%</td>
<td>80.9%</td>
<td>2.3%</td>
<td>0.2%</td>
</tr>
<tr>
<td>LINC</td>
<td>2.0%</td>
<td>96.7%</td>
<td>1.3%</td>
<td>-</td>
</tr>
<tr>
<td>LIFE</td>
<td>1.7%</td>
<td>97.2%</td>
<td>1.1%</td>
<td>-</td>
</tr>
<tr>
<td>ICBVI</td>
<td>5.3%</td>
<td>94.4%</td>
<td>0.3%</td>
<td>-</td>
</tr>
<tr>
<td>ADA</td>
<td>4.5%</td>
<td>93.2%</td>
<td>2.3%</td>
<td>-</td>
</tr>
<tr>
<td>IATP</td>
<td>1.5%</td>
<td>97.7%</td>
<td>0.8%</td>
<td>-</td>
</tr>
</tbody>
</table>

Respondents indicated that they had most frequently been contacted by or received information and services from IDVR (16.6%, Table 4). ICBVI and ADA placed second and third at 5.3% and 4.5% respectively. Only 1.5% of respondents had been contacted by or received information from IATP.
Satisfaction with Organizational Information and Services

Table 5 shows the level of satisfaction of respondents concerning the information or services they received from each of the organizations. The sample sizes are too small to make an objective comparison or draw conclusions. While 100 respondents had been contacted by or received information from IDVR, the next most frequently utilized organization for information or services was ICBVI, where only 32 respondents had been contacted by or received information from ICBVI.

While 90.0% of respondents who had contacted or received information from LIFE were at least satisfied with those services, they included only 10 respondents. Of the 17 respondents who had been contacted by or received information from SILC, 88.2% of those respondents were very satisfied, satisfied, or somewhat satisfied with those services. Of the 32 respondents who had been contacted by or received information from ICBVI, 84.4% of those respondents were very satisfied, satisfied, or somewhat satisfied with those services. The highest level of dissatisfaction was found among respondents who had been contacted by or received information from IDVR. Of these respondents, 24.0% indicated they were either unsatisfied or not at all satisfied with the services they received from IDVR.

<table>
<thead>
<tr>
<th>Organization</th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Somewhat Satisfied</th>
<th>Unsatisfied</th>
<th>Not at All Satisfied</th>
<th>Don’t Know</th>
<th>Refused</th>
<th>N</th>
</tr>
</thead>
<tbody>
<tr>
<td>SILC</td>
<td>41.2%</td>
<td>23.5%</td>
<td>23.5%</td>
<td>-</td>
<td>-</td>
<td>11.8%</td>
<td>-</td>
<td>17</td>
</tr>
<tr>
<td>DAC</td>
<td>11.8%</td>
<td>41.2%</td>
<td>23.5%</td>
<td>5.9%</td>
<td>11.8%</td>
<td>5.9%</td>
<td>-</td>
<td>17</td>
</tr>
<tr>
<td>IDVR</td>
<td>28.0%</td>
<td>25.0%</td>
<td>19.0%</td>
<td>12.0%</td>
<td>3.0%</td>
<td>1.0%</td>
<td>100</td>
<td></td>
</tr>
<tr>
<td>LINC</td>
<td>41.7%</td>
<td>41.7%</td>
<td>-</td>
<td>-</td>
<td>8.3%</td>
<td>8.3%</td>
<td>-</td>
<td>12</td>
</tr>
<tr>
<td>LIFE</td>
<td>60.0%</td>
<td>30.0%</td>
<td>-</td>
<td>-</td>
<td>10.0%</td>
<td>-</td>
<td>10</td>
<td></td>
</tr>
<tr>
<td>ICBVI</td>
<td>50.0%</td>
<td>25.0%</td>
<td>9.4%</td>
<td>3.1%</td>
<td>3.1%</td>
<td>9.4%</td>
<td>32</td>
<td></td>
</tr>
<tr>
<td>ADA</td>
<td>14.8%</td>
<td>33.3%</td>
<td>25.9%</td>
<td>-</td>
<td>11.1%</td>
<td>14.8%</td>
<td>-</td>
<td>27</td>
</tr>
<tr>
<td>IATP</td>
<td>33.3%</td>
<td>22.2%</td>
<td>22.2%</td>
<td>-</td>
<td>-</td>
<td>11.1%</td>
<td>11.1%</td>
<td>9</td>
</tr>
</tbody>
</table>

Table 5. Levels of satisfaction among respondents who received services from various organizations for people with disabilities.
Discrimination Against People with Disabilities

A range of questions were asked to determine how common discrimination against people with disabilities is in Idaho. These questions regarded instances of discrimination in the enforcement of laws designed to protect people with disabilities, obtainment housing, employment, education, child custody, accessing a public place, or the occurrence of discrimination in any other general circumstance.

There are laws designed to protect people with disabilities or provide equal opportunities for people with disabilities. When respondents were asked if they believe that these laws are being properly enforced, 44.1% of respondents believed they were (Figure 14), while 37.3% did not believe that they were being enforced. More than 17% did not know or were unsure if these laws were being enforced.

Figure 14. Percentages of respondents who believed the laws designed to protect people with disabilities were being enforced or were not being enforced. N=592
Discrimination While Obtaining Housing

When obtaining housing, 93.3% of respondents indicated that they were not discriminated against (Figure 15), while 5.8% of respondents indicated that they were discriminated against when obtaining housing. This question does not address the availability of housing to accommodate people with disabilities, however.

Figure 15. Percentages of respondents who believe they were discriminated against or not discriminated against when obtaining housing. N=590
Discrimination While Obtaining or Keeping Employment

When obtaining or keeping employment, 80.5% of respondents indicated that they were not discriminated against (Figure 16), while 17.8% of respondents indicated that they were discriminated against when obtaining or keeping employment.

Figure 16. Percentages of respondents who believe they were discriminated against or not discriminated against while obtaining or keeping employment. N=590
Educational Discrimination

In terms of education, 83.4% of respondents indicated that they were not discriminated against (Figure 17), while 12.7% of respondents indicated that they were discriminated against in education. This includes, but is not limited to, being accepted into an educational program, access to education, or getting financial aid.

**Figure 17.** Percentages of respondents who believe they were discriminated against or not discriminated against with education. N=590
Discrimination in Child Custody

When getting or keeping custody of children, 93.4% of respondents indicated that they were not discriminated against (Figure 18), while 4.6% of respondents indicated that they were discriminated against when getting or keeping custody of children.

Figure 18. Percentages of respondents who believe they were discriminated against or not discriminated against when getting or keeping custody of children. N=590
Discrimination While Accessing a Public Place

When accessing a public place, 82.8% of respondents indicated that they were not discriminated against (Figure 19), while 15.3% of respondents indicated that they were discriminated against when accessing a public place. Examples used in the survey include lack of parking, limited ramps or elevators, inaccessible doors or other barriers, no large print signage, or lack of an interpreter.

Figure 19. Percentages of respondents who believe they were discriminated against or not discriminated against when accessing a public place. N=590
Denial of Opportunities

When asked if they had ever been denied any other opportunity because of their disability, 85.6% of respondents indicated that they had not been discriminated against (Figure 20), while 11.9% of respondents indicated that they had been denied another opportunity because of their disability. The details of these instances were not collected, however.

![Pie chart showing percentages of respondents who believe they were or were not denied any other opportunity because of their disability. N=590](image)

**Figure 20.** Percentages of respondents who believe they were or were not denied any other opportunity because of their disability. N=590
Survey respondents were asked whether or not they had voted in the last election. Of the 590 respondents, 450 or 76.3% indicated that they had voted in the last election (Figure 21). Those that had voted were then asked if they thought the voting process accommodated their disability. Of the 450 respondents that indicated they had voted in the last election, 392 or 87.1% believed the voting process accommodated their disability, while 41 or 9.1% believed the voting process did not accommodate their disability.

Figure 21. Pie chart showing the percentage of respondents that affirmed whether they had voted or not in the last election (N=590). Bar chart showing the percentages of those that voted that believed the voting process did or did not accommodate their disability (N=450).
Medical Insurance and Benefits for People with Disabilities

Medical insurance and benefits are very important for most people to meet their needs. For some persons with disabilities, medical insurance and benefits are particularly important. In some instances these benefits are so important that persons with disabilities must decline full-time jobs, promotions, or higher salaries in order to remain qualified for benefits from Medicaid and Medicare. Their salaries or their potential salaries from accepting these career advancements are often still insufficient to obtain private insurance in lieu of Medicaid and Medicare. Likewise, the number of people with disabilities that have private insurance, and have declined a promotion may speak to the problems and difficulties associated with changing private insurers should a person accept a change of employment.

Figure 22 shows the percentage of respondents that indicated which types of medical insurance coverage, or benefits they have, if any. Of the respondents that did have medical coverage or benefits of some kind, 40.2% had private insurance. Medicare was the second most common form of coverage, with 27.5% of respondents qualifying for Medicare. Medicaid was the third most common form of coverage (7.1% of respondents), and veterans benefits were the forth most common form of medical coverage (5.1%). As many as 12.9% of respondents did not have medical insurance coverage, or benefits of any kind.

![Bar Chart]

**Figure 22.** Medical insurance coverage and benefits of survey respondents. N=590
Adequacy of Medical Insurance or Benefits

The respondents were also asked if their medical benefits were adequate to meet their needs (Figure 23). These respondents also include those who indicated they have no medical coverage at all. Of those who believe they have adequate medical benefits, more than 61% agree or strongly agree. In comparison to the 1995 survey, more than 66% of respondents agreed or strongly agreed that their medical benefits were adequate to meet their needs (Scudder & Willmorth, 1995).

Almost 37% of respondents disagree or strongly disagree that their medical benefits adequately meet their needs. In the 1995 survey, almost 28% of respondents disagreed or strongly disagreed that their medical benefits adequately met their needs (Scudder & Willmorth, 1995). This comparison shows that fewer respondents in the sample populations believed that their medical benefits were adequate to meet their needs in 2005 than in 1995.

![Figure 23](chart.png)

**Figure 23.** Percentages of respondents who agreed or disagreed that their medical benefits were adequate to meet their needs. N=590

Declining Employment to Protect Benefits

Figure 24 Shows the percentages of respondents who have or have not declined employment or a promotion with a pay raise in order to protect their health insurance or other benefits. By maintaining income levels below a certain income bracket, many persons with disabilities are able to qualify for medical benefits that they would not qualify for if they had income above a particular bracket. When they fall above that income bracket and they no longer
Survey Results

Medical Insurance and Benefits for People with Disabilities

qualify, they still may not earn sufficient wages to obtain private health insurance or benefits. Such occurrences can hinder potential career advancement for people with disabilities.

When asked if they had to decline employment or a promotion with a pay raise to maintain health insurance or other benefits, 8.3% of the respondents indicated that they had declined such an opportunity (Figure 24). Conversely, 90.1% had never declined employment or a promotion with a pay raise to protect health insurance or other benefits.

In order to gauge the opinion of the general public on this issue, Gonzalez and Watts asked about the level of public support in Idaho to fund medical benefits for people with disabilities in the 12th Annual Idaho Public Policy Survey. The question asked if the state should fund benefits for people with disabilities so they can accept employment opportunities without threatening their benefits (Gonzales & Watts, 2001):

Many people with disabilities in Idaho are qualified to work, but cannot accept jobs because they would lose their medical benefits. Should the state help fund their medical benefits so they can enter the workforce?

Of the 561 respondents from the general public in Idaho that answered this question for the policy survey, 561 (87.9%) believed the state should fund their medical benefits so they can enter the work force. Only 77 respondents (12.1%) said no, and 68 respondents (9.6%) did not know or refused to answer.

Figure 24. Percentages of respondents who have or have not declined employment or a promotion with a pay raise in order to protect their health insurance or benefits. N=590
Twenty-five percent of respondents with tribal/Indian health insurance declined employment or a promotion with an increase in pay to protect their benefits compared to 12.0% of respondents with Medicaid, 5.0% of respondents with Medicare, and 11.1% of respondents with private insurance. Conversely, 75% of respondents with tribal/Indian health insurance, 88.0% of respondents with Medicaid, 93.2% of respondents with Medicare, and 87.7% of respondents with private insurance have not declined employment or a promotion.

None of the respondents with Medicare and private insurance, State of Idaho Worker’s Compensation, a combination of Medicare and Medicaid, and other insurance types declined employment or a promotion with a pay raise in order to protect their health insurance or benefits.

Table 6. Frequencies and percentages of respondents with the following insurance types who declined employment of a promotion with an increase in pay in order to protect health insurance or benefits. Percentages are calculated within each insurance type category.

<table>
<thead>
<tr>
<th>Insurance Type</th>
<th>Private</th>
<th>Medicare</th>
<th>Medicaid</th>
<th>Veterans</th>
<th>Medicare and Private</th>
<th>Medicare and Medicaid</th>
<th>State of ID</th>
<th>Tribal</th>
<th>Other</th>
<th>None</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Declined Employment</td>
<td>Yes</td>
<td>26</td>
<td>8</td>
<td>5</td>
<td>1</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1</td>
<td>25%</td>
<td>-</td>
</tr>
<tr>
<td></td>
<td>No</td>
<td>206</td>
<td>150</td>
<td>37</td>
<td>28</td>
<td>13</td>
<td>10</td>
<td>7</td>
<td>3</td>
<td>2</td>
<td>65</td>
</tr>
<tr>
<td></td>
<td>Don’t know/ Not Sure</td>
<td>3</td>
<td>1</td>
<td>0.6%</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>1</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>235</td>
<td>161</td>
<td>42</td>
<td>29</td>
<td>13</td>
<td>10</td>
<td>7</td>
<td>4</td>
<td>2</td>
<td>75</td>
</tr>
</tbody>
</table>
Financial Limitations to Health Care

While 90.1% of the respondents had not declined employment or a promotion with a pay raise to protect their health insurance or other benefits, many respondents still had to postpone seeking health care because of their financial situation. When asked if they had to postpone seeking health care in the last year because of their financial situation, 43.2% of respondents answered yes (Figure 25). A slight majority (56.3%) of the respondents had not postponed seeking health care.

Figure 25. Percentages of respondents who have or have not postponed seeking health care in the past year because of their financial situation. N=590
**Survey Results**  
*Medical Insurance and Benefits for People with Disabilities*

**Frequency of Health Care Postponement**

Respondents that indicated they had postponed seeking health care in the last year because of their financial situation were then asked how many times in the last year they had postponed seeking health care (Figure 26). Of the 255 respondents, 20.4% indicated they had postponed seeking health care 2 times in the last year because of their financial situation. Multiple occurrences of postponement tapered off quickly with a resurgence at 10 to 12 times in the last year. The resurgence of the postponement of health care at 12 times in the last year because of the respondent’s financial situation can probably be attributed to the fact that there are 12 months in a calendar year. It is possible that these respondents rationalized their response as postponing health care once a month because of their financial situation.

![Figure 26](image-url)  
**Figure 26.** Percentages of the total respondents that postponed seeking health care one or more times in the last year because of their financial situation. N=255
References


Appendix A
Recoding Scheme for Open-Ended Questions: Figure 4 and Table 2

For coding all “open-ended” questions, if a respondent gave multiple answers that could not be attributed to a single category, the response was coded into the category corresponding to the first answer the respondent gave.

Recode Key for Responses to Data Presented in Figure 4: Most Important Personal Issue

<table>
<thead>
<tr>
<th>Category</th>
<th>Detail</th>
<th>Additional Consolidation</th>
</tr>
</thead>
<tbody>
<tr>
<td>2</td>
<td>Age</td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Care/services</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Employment</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Don't know/unsure/na</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Independence</td>
<td>Other</td>
</tr>
<tr>
<td>9</td>
<td>Refused</td>
<td>Other</td>
</tr>
<tr>
<td>12</td>
<td>Housing</td>
<td>Other</td>
</tr>
<tr>
<td>13</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Other</td>
<td>Other</td>
</tr>
<tr>
<td>61</td>
<td>Financial health</td>
<td>medications</td>
</tr>
<tr>
<td>62</td>
<td>Financial health</td>
<td>SSI</td>
</tr>
<tr>
<td>63</td>
<td>Financial health</td>
<td>income</td>
</tr>
<tr>
<td>101</td>
<td>Mental health</td>
<td>anxiety</td>
</tr>
<tr>
<td>102</td>
<td>Mental health</td>
<td>depression</td>
</tr>
<tr>
<td>103</td>
<td>Mental health</td>
<td>memory</td>
</tr>
<tr>
<td>104</td>
<td>Mental health</td>
<td>stress</td>
</tr>
<tr>
<td>105</td>
<td>Mental health</td>
<td>other</td>
</tr>
<tr>
<td>111</td>
<td>Mobility</td>
<td>driving/transportation</td>
</tr>
<tr>
<td>112</td>
<td>Mobility</td>
<td>general</td>
</tr>
<tr>
<td>151</td>
<td>Physical health</td>
<td>acceptance</td>
</tr>
<tr>
<td>152</td>
<td>Physical health</td>
<td>hearing</td>
</tr>
<tr>
<td>153</td>
<td>Physical health</td>
<td>multiple</td>
</tr>
<tr>
<td>154</td>
<td>Physical health</td>
<td>sight</td>
</tr>
<tr>
<td>155</td>
<td>Physical health</td>
<td>specific to disability</td>
</tr>
<tr>
<td>157</td>
<td>Physical health</td>
<td>speech</td>
</tr>
<tr>
<td>161</td>
<td>Insurance</td>
<td>don't have</td>
</tr>
<tr>
<td>162</td>
<td>Insurance</td>
<td>cost</td>
</tr>
<tr>
<td>163</td>
<td>Insurance</td>
<td>coverage</td>
</tr>
<tr>
<td>171</td>
<td>Access</td>
<td>information</td>
</tr>
<tr>
<td>172</td>
<td>Access</td>
<td>technology</td>
</tr>
</tbody>
</table>

Although some categories in this recode key are very distinct, many categories were consolidated to “other” because of the infrequency of the response.

Almost all of the other consolidations of categories are self-explanatory, with the possible exception of adding “Physical Health – Acceptance” (151) to “Depression, Anxiety, & Stress.” Since respondents specifically indicated that acceptance of the their “physical health” was their most important problem and thus placed emphasis on the acceptance over the actual physical
condition, respondents in this category were added to the category “Depression, Anxiety, & Stress.”

Recode Key for Responses to Data Presented in Figure 4: Respondents with disabilities perception of the most important problems faced by other people with disabilities

<table>
<thead>
<tr>
<th>Category</th>
<th>Detail</th>
<th>Additional Consolidation</th>
</tr>
</thead>
<tbody>
<tr>
<td>6</td>
<td>Acceptance</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>Don't know</td>
<td></td>
</tr>
<tr>
<td>8</td>
<td>Education</td>
<td></td>
</tr>
<tr>
<td>12</td>
<td>Employment</td>
<td></td>
</tr>
<tr>
<td>13</td>
<td>Independence</td>
<td></td>
</tr>
<tr>
<td>14</td>
<td>Insurance</td>
<td></td>
</tr>
<tr>
<td>15</td>
<td>Mobility</td>
<td></td>
</tr>
<tr>
<td>16</td>
<td>None</td>
<td></td>
</tr>
<tr>
<td>18</td>
<td>Other</td>
<td></td>
</tr>
<tr>
<td>21</td>
<td>Accessibility</td>
<td>Healthcare</td>
</tr>
<tr>
<td>22</td>
<td>Access</td>
<td>General Access</td>
</tr>
<tr>
<td>31</td>
<td>Access</td>
<td>transportation</td>
</tr>
<tr>
<td>32</td>
<td>Access</td>
<td>general</td>
</tr>
<tr>
<td>33</td>
<td>Access</td>
<td>places</td>
</tr>
<tr>
<td>41</td>
<td>Disability specific</td>
<td>understanding</td>
</tr>
<tr>
<td>42</td>
<td>Disability specific</td>
<td>physical health</td>
</tr>
<tr>
<td>51</td>
<td>Discrimination</td>
<td>employment</td>
</tr>
<tr>
<td>52</td>
<td>Discrimination</td>
<td>general</td>
</tr>
<tr>
<td>102</td>
<td>Financial</td>
<td>healthcare</td>
</tr>
<tr>
<td>103</td>
<td>Financial</td>
<td>services</td>
</tr>
<tr>
<td>104</td>
<td>Financial</td>
<td>income</td>
</tr>
<tr>
<td>111</td>
<td>Healthcare</td>
<td>financial</td>
</tr>
<tr>
<td>112</td>
<td>Healthcare</td>
<td>Healthcare</td>
</tr>
<tr>
<td>101</td>
<td>Financial</td>
<td>Financial</td>
</tr>
</tbody>
</table>

Some respondents perceived healthcare and financial status to be linked. In some instances it was unclear if the respondent’s perception that another person with a disability would experience a difficult financial situation was because of the cost of healthcare or if a difficult financial status prevented access to healthcare. If a respondent indicated that the financial status of other people with disabilities was a barrier to accessible healthcare (102), the response was added to “Healthcare.”

All other consolidations for this data are self explanatory.
Recode Key for Responses to Data Presented in Table 2

The assistive technology categories were predetermined in some cases, but additional categories were included for frequently occurring responses unanticipated before the survey.

If a respondent indicated that they used an assistive technology or device that is frequently used by people without disabilities, such as a computer, the response was not included in the data presented in Table 2.
Appendix B

Institutional Review Board: Exemption Certification Form

1. Name and Address of Principal Investigator (PI) (where mail can most easily reach PI): (If the research is being submitted to or supported by an external funding agency or an internal grant program, the PI listed on the grant application must be the same as listed below. If the PI is a student, also list the faculty advisor.) An original signed copy of the application, plus supporting documentation must be sent to Office of Research Administration, L-153, Mail Stop-135, plus an electronic copy (in MS Word) to APPDENIN@boisestate.edu.

2. Principal Investigator(s): Dr. Jim Weatherby E-mail: jweather@boisestate.edu 
Phone: x4018 Carelle Nennich X1835 E-mail: carellenennich@boisestate.edu 
Fax:  
Faculty Advisor:  
If the PI is a student this section needs to be completed for your Faculty Advisor. (Leave blank if you don’t know)

Bldg.& Room:  
Dept:  
Mail Stop:  
Dept. Code:  
Phone:  
Fax:  

3. Title of Project: Assessment of Idaho Adults with Disabilities

4. Has the research study been or will it be submitted to an external or internal funding agency for support? YES ☐ NO ☐ If yes, indicate which agency and attach a copy of the grant/contract application.

Agency: SILC State Indep Living Coun Funding Source: State Agency

5. Will data be collected from individuals through intervention or interaction with the individuals? ☐ YES ☐ NO 
Via phone (possible computer or assistive devices OR rarely personal interview)

6. Will identifiable private information be collected from other sources (e.g. medical records)? ☐ YES ☐ NO

7. Citation of Exempt Category listed in Exhibit A:  

Note: The exemption categories listed in Exhibit A, do not apply when the research activities include the following:

a) prisoners, fetuses, pregnant women or human in vitro fertilization;
b) the review of medical records if the information is recorded in such a way that participants can be identified, directly or through identifiers linked to the participants;
c) survey or interview techniques which include minors as participants (under age 18);
d) research involving the observation of the public behavior of minors;
e) techniques which expose the participant to discomfort or harassment beyond levels encountered in daily life;
f) the deception of the participants.

IRB use only

Action of the Boise State University Institutional Review Board
☐ Approved as exempt from IRB review
☐ Not approved as exempt for the following reason(s):  

Chair and/or IRB Authorized Representative  
Date

The investigator must notify the IRB if any changes or modifications are made in the study’s design, procedures, etc. which do not fall within one of the categories exempted from the regulations.  
Expiration Date: (ORA will Complete)

PLEASE NOTE THAT DATA COLLECTION CANNOT BEGIN UNTIL APPROVAL IS GRANTED BY THE IRB.

BSU Request for Exemption from IRB Review  
Effective Date: 3/1/04 (Examinations dated prior to 3/1/04 will not be reviewed)
Appendix C

Technical Report: March 2005
2004 Idaho Independent Living Survey

Sponsored by the Idaho State Independent Living Council and the
Idaho Division of Vocational Rehabilitation

Project Completed For:
The Social Science Research Center
Boise State University
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Introduction
The Social Science Research Center (SSRC) at Boise State University contracted with the Idaho State Independent Living Council (with additional funding from the Idaho Division of Vocational Rehabilitation) to conduct a survey of Idaho residents to assess needs and services for the disabled population. Clearwater Research worked in partnership with the SSRC to complete the project. This report provides technical information regarding those services.

Survey Instrument
Clearwater Research collaborated with the SSRC to revise and refine the survey methodology and a questionnaire that had been used for the Idaho Independent Living survey used in a similar large-scale survey in 1995. This included consultation on question wording and response category design. The questionnaire covered a variety of areas, including the basic determination of a household member having one or more disabilities, as defined by the Americans with Disabilities Act. For households with disabled adult members, the survey asked what issues they face with their disabilities, services they have utilized, and satisfaction with those services. The questionnaire used for the survey is presented in Appendix D. The survey was ‘multi-modal’ in construction. Versions were created for administration by phone, the internet and in person. Additionally, the Idaho TTY relay was an option for participation for the hearing impaired. A Spanish-language version was devised to accommodate the non-English speaking, Spanish-language-preferred population.

Sample Design
The sample frame consisted of all telephone numbers in “one-plus” banks that ring in the State of Idaho. A telephone number bank is defined here as the set of 100 telephone numbers represented by a single 3-digit area code, a single 3-digit exchange, and the same first 2 digits of the 4-digit line number. A “one-plus” bank is a bank that includes at least one telephone number appearing in an industry-standard database of listed residential numbers.

The sample frame was not stratified. All Idaho households with telephone numbers in one-plus banks were eligible to be selected for the survey. Any adult (18 years or older) was eligible to complete the screening survey on behalf of the household.

Before the sampled phone numbers were distributed to interviewers, the phone number list was purged of identifiable nonworking and business numbers using the “IDplus” service provided by the RDD sample vendor (Marketing Systems Group/GENESYS). This procedure used a combination of directory searches and line signal checks to remove nonresidential phone numbers (e.g., business and fax numbers). Identifying these numbers in advance minimizes the cost of data collection while preserving the quality of the probability sample.

Sample Management
Clearwater Research conducted survey interviews between December 12, 2004 and January 4, 2005. The average interview length was 5 minutes for the screening interview. Interview length
with selected respondents did not exceed an average of 20 minutes. Interviewer performance was closely monitored throughout the field period to assure data quality.

Sampled telephone numbers were called according to a schedule designed to minimize bias problems associated with difficult-to-reach respondents. Each sample record was resolved by attempting it a minimum of ten times during the calling period or until a final disposition code (such as “completed interview” or “disconnected/nonworking number”) was assigned. The calling hours for the project were primarily weekday evenings and weekends. However, calls were also made during the daytime on weekdays in an attempt to capture potential respondents who could be reached at home during weekday business hours.

**Final Dispositions**

At the close of the field period, each sampled telephone number was assigned a final disposition that summarizes the separate outcomes of each call attempt for that number. The final dispositions for the 2004 Idaho Independent Living Survey sample are presented in Table 2. A total of 9,027 phone numbers were attempted during the field period.

**TABLE 1: Final Dispositions**

<table>
<thead>
<tr>
<th>Disposition</th>
<th>Description</th>
<th>Records</th>
</tr>
</thead>
<tbody>
<tr>
<td>22</td>
<td>Final Refusal Selected Respondent</td>
<td>228</td>
</tr>
<tr>
<td>23</td>
<td>Disconnect/Non-working #</td>
<td>404</td>
</tr>
<tr>
<td>25</td>
<td>Not a Private Residence</td>
<td>1271</td>
</tr>
<tr>
<td>26</td>
<td>No Eligible Resp. at #</td>
<td>18</td>
</tr>
<tr>
<td>27</td>
<td>Unavailable during interviewing period.</td>
<td>87</td>
</tr>
<tr>
<td>28</td>
<td>Final Language Barrier</td>
<td>15</td>
</tr>
<tr>
<td>29</td>
<td>Final Term in Questionnaire</td>
<td>15</td>
</tr>
<tr>
<td>31</td>
<td>Final Communication Barrier</td>
<td>26</td>
</tr>
<tr>
<td>32</td>
<td>Final Technical Barrier</td>
<td>61</td>
</tr>
<tr>
<td>33</td>
<td>Out of Interviewing Area</td>
<td>4</td>
</tr>
<tr>
<td>34</td>
<td>Final Refusal-not selected</td>
<td>2686</td>
</tr>
<tr>
<td>36</td>
<td>Complete</td>
<td>581</td>
</tr>
<tr>
<td>37</td>
<td>Complete - non - disabled household</td>
<td>1738</td>
</tr>
<tr>
<td>38</td>
<td>Web Respondent</td>
<td>51</td>
</tr>
<tr>
<td>39</td>
<td>TTY Respondent</td>
<td>2</td>
</tr>
<tr>
<td>40</td>
<td>In-Person Respondent</td>
<td>4</td>
</tr>
<tr>
<td>41</td>
<td>Selected Respondent Unable to Complete Survey</td>
<td>35</td>
</tr>
<tr>
<td>42</td>
<td>Final Terminate Within Screener</td>
<td>10</td>
</tr>
<tr>
<td>44</td>
<td>Final NonContact</td>
<td>1791</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td></td>
<td>9027</td>
</tr>
</tbody>
</table>
Response Rate

The response rate measures the relative success with which households sampled for the survey actually participated. For RDD samples, this is typically calculated as the percentage of households assumed to be reachable via the sampled phone numbers that completed interviews during the field period. The higher the response rate, the lower the potential will be for non-response bias in the data.

Clearwater Research typically calculates two widely used response rates developed and popularized by the Council of American Survey Research Organizations, which we refer to as the CASRO response rate and the CASRO Upper Bound response rate. The CASRO rate is a more conservative estimate, while the Upper Bound rate is a commonly used “best case” rate. The CASRO response rate for this project was 42.58%, and the Upper Bound rate was 87.24%.

Data Preparation and Analysis

Survey data were entered and automatically consolidated into a CATI database as the interviews were being conducted. Prior to analysis, data were thoroughly checked and edited as necessary to correct errors and out-of-range values. Survey responses were then formatted into a data file for analysis using SPSS.

Since the sample design was a simple random sample of the state of Idaho, no weighting was necessary to correct for differential probabilities of selection.
Appendix D: 2004 Idaho Independent Living Questionnaire

INTRO1

HELLO ... my name is _____. I'm calling Idaho households for a research study being conducted by Boise State University for the Idaho State Independent Living Council and the Idaho Division of Vocational Rehabilitation. We're conducting an important survey on health and social service issues facing people in the State of Idaho. The results from this study will be used to help plan services that will improve the quality of life for Idaho residents.

For this survey, I need to speak with someone in your household who is at least 18 years old. Would that be you?

41 YES -- SKIP TO INTRO2
42 NO -- CONTINUE WITH GETNEWAD

PROGRAMMER: PROVIDE OPTION TO SWITCH TO SPANISH LANGUAGE VERSION AS NEEDED

GETNEWAD – GET IF INTRO1 IS NOT "YES"

May I please speak with someone who is at least 18?

¿Puedo hablar con alguien que tenga por lo menos 18 años de edad?

1 YES, ADULT IS AVAILABLE – GO BACK TO INTRO1
2 CALL BACK, ADULT IS NOT AVAILABLE NOW – TERM AS CALLBACK
3 NO, NO ADULT LIVES IN HOUSEHOLD – TERM AS NO ELIGIBLE RESP.
9 REFUSED – TERMINATE AS REFUSAL

INTRO2

Your phone number was selected at random, to ensure that the views of all Idaho residents are accurately represented. I won’t ask for your name,
address, or other personal information that can identify you. You don’t have to answer any question you don’t want to, and you can end the interview at any time.

All of your responses are completely confidential. If you have any questions about this survey, I can answer them for you or provide a telephone number for you to call to get more information. The survey will only take about 5 minutes, and it is very important for state policy makers that your views be included in this survey.

May I continue?

Su número de teléfono fue seleccionado al azar y no le voy a pedir que me diga su nombre, dirección ni ninguna otra información personal que le pueda identificar. Usted no tiene la obligación de responder a cualquier pregunta si no lo desea, y puede dar por terminada la entrevista en cualquier momento que quiera.

Todas sus respuestas son completamente confidenciales. Si tiene alguna pregunta acerca de esta encuesta, yo se la puedo contestar o le puedo dar un número de teléfono para que llame y solicite más información. La encuesta sólo durará cerca de 5 minutos y es muy importante que sus opiniones aparezcan en esta encuesta.

¿Puedo continuar?

1  YES - CONTINUE WITH COUNTYQ
2  NO - TERMINATE AS REFUSAL
3  CALLBACK - TERMINATE AS CALLBACK

IF REQUESTED, CONTACT INFO: Carole Nemnich
Study Project Manager
Boise State University
(208) 426-1835

IF REQUESTED, CONTACT INFO: Carole Nemnich
Gerente del Estudio
Universidad Estatal de Boise
(208) 426-1835

----------------------------------------------------------------------------
COUNTYQ
----------------------------------------------------------------------------

In what Idaho county is your residence located?

¿En cuál condado de Idaho está localizada su residencia?

ENTER COUNTY CODE - SKIP TO INTRO3

001. ADA  031. CASSIA  061. LEWIS
003. ADAMS  033. CLARK  063. LINCOLN
005. BANNOCK  035. CLEARWATER  065. MADISON
007. BEAR LAKE  037. CUSTER  067. MINIDOKA
009. BENEWAH  039. ELMORE  069. NEZ PERCE
011. BINGHAM  041. FRANKLIN  071. ONEIDA
013. BLAINE  043. FREMONT  073. Owyhee
015. BOISE  045. GEM  075. PAYETTE
017. BONNER  047. GOODING  077. POWER
To assure the accuracy of this survey, I need to at least confirm that you live in the State of Idaho. Is this household in Idaho?

1  YES
2  NO – SKIP TO SORRYRS1
7  DON’T KNOW/NOT SURE – SKIP TO SORRYRS1
9  REFUSED – SKIP TO SORRYRS1

Screening Questions

These first questions are about health, physical, or other conditions that may affect you or a member of your household.

Is there anyone in your household that has difficulty walking? This might include using a wheelchair; being paralyzed, paraplegic, or quadriplegic; having severe arthritis, cerebral palsy, spina bifida, muscular dystrophy, or polio; not having use of one’s legs; using a walker, crutches, or a cane.

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED
QS10

Is there anyone in your household that is missing a limb, or has difficulty using their limbs?

¿Hay alguien en su familia a quien le falte una extremidad o presente dificultades para usar las extremidades?

1  YES  
2  NO  
7  DON'T KNOW/NOT SURE  
9  REFUSED

QS15

Does anyone in your household have difficulty seeing, that is, they are blind, or have low vision? This might include having no vision at all; using a guide dog or a sighted guide; using aids such as magnifiers, large print, or braille.

¿Alguien en su hogar presenta dificultades con la vista, es decir, que sea ciego o que tenga poca visión? Esto podría incluir no tener nada de visión, usar un perro guía o una persona como guía, usar ayudas como lupas, impresión grande o braille.

1  YES  
2  NO  
7  DON'T KNOW/NOT SURE  
9  REFUSED

QS20

Is there anyone in your household who is deaf or has difficulty hearing? This might include primarily using sign language, writing notes, or using other nonverbal methods of communicating; or using hearing aids or other amplifying devices.

¿Hay alguien en su hogar que sea sordo o que presente dificultades para escuchar? Esto podría incluir el uso del lenguaje de señas principalmente, notas por escrito o el uso de otros métodos de comunicación no verbal, o el uso de audífonos u otros aparatos de amplificación de sonido.

1  YES  
2  NO  
7  DON'T KNOW/NOT SURE
9  REFUSED

QS25

Is there anyone in your household who has trouble speaking because of a disability? This might be a result of a brain injury, cerebral palsy, a stroke, Parkinson’s disease, or multiple sclerosis or other cognitive disorder.

¿Hay alguien en su hogar que presente dificultad para hablar por incapacidad? Esto podría ser el resultado de una lesión cerebral, parálisis cerebral, ataque o convulsión, enfermedad de Parkinson, esclerosis múltiple u otro trastorno cognitivo.

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

QS30

Is there anyone in your household who has chronic heart disease, chronic obstructive pulmonary disease, or emphysema?

¿Alguien en su hogar presenta enfermedad cardiaca crónica, enfermedad pulmonar obstructiva o enfisema?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

QS35

Is there anyone in your household who has epilepsy or a seizure disorder?

¿Alguien en su hogar presenta epilepsia o problemas de ataques o convulsiones?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED
QS40

Is there anyone in your household who has a traumatic brain injury?

¿Alguien en su hogar presenta daño cerebral traumático?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

QS45

Is there anyone in your household who has been diagnosed as having mental retardation?

¿A alguien en su hogar se le ha diagnosticado retraso mental?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

QS50

Is there anyone in your household who has been diagnosed with a learning disability, attention deficit disorder, or hyperactivity; has difficulty learning; or any other similar condition?

¿A alguien en su hogar se le ha diagnosticado una incapacidad para el aprendizaje, problema de déficit o falta de atención, hiperactividad, o tiene problemas de aprendizaje u otra condición similar?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED
QS55
---------------------------------------------------
Is there anyone in your household who has been diagnosed as having a mental illness, or another emotional condition? This might include such things as manic-depressive disorder, schizophrenia, depression, or anxiety.

¿A alguien en su familia se le ha diagnosticado una enfermedad mental u otro problema emocional? Esto podría incluir trastorno depresivo-maniático, esquizofrenia, depresión o ansiedad.

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

---------------------------------------------------
QS60
---------------------------------------------------
Is there anyone in your household who has gone through an alcohol or drug treatment program, or as a result of alcohol or drug use, receives SSI (Social Security Income or Social Security Disability Income), vocational rehabilitation or other social service?

¿Alguien de su familia ha estado en un programa de tratamiento contra drogas o alcohol, o como resultado de uso de drogas o alcohol, recibe SSI (ingresos del Seguro social o ingresos por incapacidad del seguro social), rehabilitación vocacional u otro servicio social?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

---------------------------------------------------
QS65
---------------------------------------------------
Is there anyone in your household who has been diagnosed as having AIDS or HIV?

¿A alguien en su hogar se le ha diagnosticado que tiene SIDA o VIH?

1  YES
2  NO
7  DON'T KNOW/NOT SURE
9  REFUSED

---------------------------------------------------
QS70 – GET ONLY IF NOT “YES” TO ANY OF THE ABOVE SCREENER QUESTIONS

Based on your answers to the questions I just asked, no member of your household has any disability. Is that correct?

1  YES - TERMINATE AS NON DISABLED HOUSEHOLD (37)
2  NO, MEMBER WITH SOME OTHER DISABILITY (SPECIFY) - SKIP TO QS75
7  DON’T KNOW/NOT SURE - TERMINATE AS NON DISABLED HOUSEHOLD (37)
9  REFUSED - TERMINATE AS NON DISABLED HOUSEHOLD (37)

QS75 - VERIFY NUMBER OF ADULTS (18+) IN HOUSEHOLD WITH DISABILITIES

How many adults 18 years or older in your household have one of the conditions we discussed?

¿Cuántas personas adultas de 18 años o mayores de su hogar tienen uno de los problemas de los que se mencionaron?

____ ENTER NUMBER OF ADULTS WITH DISABILITIES

20  20 OR MORE ADULTS
77  DON’T KNOW/NOT SURE
99  REFUSED

IF 1 - SKIP TO QS85
IF 0, 77, OR 99 - TERMINATE AS NON DISABLED HOUSEHOLD (37)

QS80 – GET ONLY IF NUMBER OF ADULTS WITH DISABILITIES IS > 1

Your household qualifies for an additional part of this survey, which should take about 15 more minutes depending on your answers. The questions cover activities, employment, and health care issues. You indicated that more than one adult in your household has at least one of the conditions I read. May I speak with the adult with a disability who has had the most recent birthday?

Su hogar califica para una parte adicional de esta encuesta, quizás tomaría cerca de 15 minutos. Las preguntas incluyen temas acerca de actividades, empleo y cuidado o atención médica. Usted indicó que más de una persona en su hogar presenta al menos una de las condiciones que leí. ¿Puedo hablar con el adulto incapacitado que ha cumplido años más recientemente?

1  YES, CONTINUE WITH CURRENT PERSON - SKIP TO INTRO5
2  YES, PERSON COMING TO PHONE - SKIP TO INTRO4
3  NO, SCHEDULE CALLBACK - TERMINATE AS CALLBACK
4  NO, CANNOT SPEAK ON PHONE – GO TO ALTERNATIVE SURVEY OPTIONS
Your household qualifies for an additional part of this survey, which should take about 15 more minutes depending on your answers. The questions cover activities, employment, and health care issues. For this part of the survey, I need to continue with the adult with a disability. May I speak with him/her?

Su hogar califica para una parte adicional de esta encuesta, que tomaría cerca de 15 minutos. Las preguntas incluyen temas acerca de actividades, empleo y cuidado o atención médica. Para esta parte de la encuesta necesito continuar con el adulto que tiene la incapacidad. ¿Puedo hablar con él/ella?

1  YES, CONTINUE WITH CURRENT PERSON - SKIP TO INTRO5
2  YES, PERSON COMING TO PHONE - SKIP TO INTRO4
3  NO, SCHEDULE CALLBACK - TERMINATE AS CALLBACK
4  NO, CANNOT SPEAK ON PHONE, NEEDS ALTERNATIVE SURVEY OPTION - SKIP TO ALTSURV

9  REFUSED - CONTINUE WITH ALTSURV
A third option would be for someone to visit the person in his or her home to conduct the survey in person. Would this option work?

Una tercera opción sería que alguien visitara a la persona en su hogar para realizar la encuesta personalmente. ¿Sería posible esta opción?

1 YES, CAN COMPLETE IN PERSON - SKIP TO CONTACT
2 NO - SKIP TO SORRYA2
9 REFUSED - TERMINATE AS REFUSED - RESPONDENT SELECTED (22)

WEBSURV - GET ONLY IF ALTSURV = 1

To complete the rest of this survey using the Internet, please give this web address and password to the adult with a disability who had the most recent birthday. The web address is: WWW.CWRSW.COM/SILC. The password to enter the survey is: <PASSWORD>.


Do you need me to repeat any of the information?

Para completar el resto de esta encuesta a través del Internet, por favor entréguele esta dirección y contraseña al adulto que tiene la incapacidad. La dirección es: WWW.CWRSW.COM/SILC. La contraseña para ingresar a la encuesta es: <PASSWORD>.


¿Necesita que le repite cualquier de la información?

WEBSURV2 - GET ONLY IF ALTSURV = 1

We can send you a reminder e-mail in a week or so with the survey link, if you’ll give me your e-mail address.

Le podemos mandar un correo electrónico de recuerdo como en una semana con el sitio de la encuesta si me da su correo electrónico.

1 YES -- ENTER E-MAIL ADDRESS
2 NO -- SKIP TO WEBSURV3

EMAIL1 & EMAIL2

What is your email address?
¿Que es su correo electrónico?


WEBSURV3 – GET ONLY IF ALTSURV = 1

Thank you for your help with this very important research.

Gracias por brindarnos su ayuda con esta importante encuesta.

[TERMINATE AS 38 – WEB RESPONDENT]

TTYSURV – GET ONLY IF ALTSURV = 2

In order to complete the rest of this survey using the state TTY relay, we must schedule a time.

Para completar el resto de esta encuesta a través del TTY (teléfono con teclado y pantalla para personas total o parcialmente sordas, o con alguna incapacidad del habla), debemos programar una hora.

___ ENTER TIME

TTYSURV2

What number would be best to use for the TTY call?

¿Qué numero sería el mejor para usar la llamada a través del TTY ?

(___)(___)-____ ENTER PHONE NUMBER

Thank you for your help with this very important research.

Gracias por brindarnos su ayuda con esta importante encuesta.

[TERMINATE AS 39 – TTY RESPONDENT]

INTRO4

HELLO ... my name is _____. I'm calling Idaho households for a research study being conducted by Boise State University for the Idaho State Independent Living Council and the Idaho Division of Vocational Rehabilitation. We're conducting an important survey on health and social service issues facing people in the State of Idaho. The results from this
study will be used to help plan services that will improve the quality of life for Idaho residents.

Your phone number was selected at random, to ensure that the views of all Idaho residents are accurately represented. I won’t ask for your name, address, or other personal information that can identify you. You don’t have to answer any question you don’t want to, and you can end the interview at any time.

All of your responses are completely confidential. If you have any questions about this survey, I can answer them for your or provide a telephone number for you to call to get more information. The survey will take about 15 minutes depending on your answers, and it is very important for state policy makers that your views be included in this survey.

May I continue?

HOLA ... Mi nombre es _____. Estoy llamando a los hogares de Idaho para hacer una encuesta dirigida por la Universidad Boise State para el Consejo de vida independiente del Estado (State Independent Living Council) y la División de rehabilitación vocacional de Idaho (Idaho Division of Vocational Rehabilitation). Llevamos a cabo una encuesta relacionada con asuntos sobre el servicio social y de salud respecto a las personas del Estado de Idaho. Los resultados de este estudio se usarán para mejorar la calidad de vida de los residentes de Idaho.

Su número de teléfono fue seleccionado al azar y no le voy a pedir que me diga su nombre, dirección ni ninguna otra información personal que le pueda identificar. Usted no tiene la obligación de responder a cualquier pregunta si no lo desea, y puede dar por terminada la entrevista en cualquier momento que quiera.

Todas sus respuestas son completamente confidenciales. Si tiene alguna pregunta acerca de esta encuesta, yo se la puedo contestar o le puedo dar un número telefónico para que llame y solicite más información. La encuesta quizás tomaría cerca de 15 minutos y es muy importante que sus opiniones aparezcan en esta encuesta.

¿Puedo continuar?

1  YES - CONTINUE WITH INTRO5
2  CALLBACK - TERMINATE AS CALLBACK
9  REFUSAL - TERMINATE AS REFUSAL

This survey will be used to get a better picture of the people with disabilities in Idaho. Many of the questions are about the current and potential needs for those who desire to live independently. Specifically, this information will help state agencies and advocacy groups focus on the issues that will enable people to live life to its fullest potential.

Esta encuesta se utilizará para tener una mejor idea de las personas que tienen incapacidades en Idaho. Muchas de las preguntas son acerca de las necesidades actuales y potenciales de aquellas personas que desean vivir de manera independiente.
The first question is:
For you personally, what is the most important problem you currently face?

La primera pregunta es:
¿Para usted personalmente, cuál es el problema más importante que usted enfrenta actualmente?

[CAPTURE AS OPEN-ENDED - RECODE LATER USING LIST IN APPENDIX A]

In general, what is the most important problem people with disabilities in Idaho face?

En general, ¿cuál es el problema más importante que las personas con incapacidades enfrentan en Idaho?

[CAPTURE AS OPEN-ENDED - RECODE LATER USING LIST IN APPENDIX A]

----------------------------------------

Employment Status

----------------------------------------

Next, I would like to ask about your employment status.

Are you currently...

01 Employed for wages, receiving income, part-time
02 Employed for wages, receiving income, full-time
03 Self-employed
04 Out of work for more than 1 year
05 Out of work for less than 1 year
06 A homemaker
07 A student
08 Retired
09 Unable to work

99 REFUSED

Ahora, me gustaría preguntarle acerca de su estado laboral.

Actualmente usted:

01 Es empleado de medio tiempo con sueldo e ingresos
02 Es empleado de tiempo completo con sueldo e ingresos
Q010A - GET IF EMPLOYED (Q010 = 01, 02, 03)

Do you believe you are under-employed because of your disability?

¿Usted cree que su empleo es de menos horas debido a su incapacidad?

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

SKIP TO Q015

Q010B - GET IF NOT EMPLOYED AND NOT RETIRED (Q010 = 04, 05)

Are you ...

1  Out of work and looking for a job
2  Out of work and not looking for a job
3  Something else (SPECIFY) ____________
9  REFUSED

Está usted ...

1  Sin trabajo y buscando empleo
2  Sin trabajo y no está buscando empleo
3  Otro (ESPECIFIQUE)

Level of Independence

The next questions are about independent living and services that enable independent living. When I say “independent living”, I mean participating in day-to-day life, living where you choose, and making decisions that lead to self-determination.
How independently do you live?
Would you say ...

1  Very independently,
2  Somewhat independently,
3  Somewhat dependently,
4  Very dependently

7  DON’T KNOW/NOT SURE
9  REFUSED

Las siguientes preguntas son acerca de la vida independiente y los servicios que le permiten vivir independiente. Cuando digo “vivir independiente” me refiero a participar en la vida diaria, vivir donde usted elija y tomar decisiones que conducen a la auto determinación.

¿Qué tan independientemente vive usted?
Usted diría ...

1  Muy independiente,
2  Algo independiente,
3  Algo dependiente,
4  Muy dependiente

Q020

Have you ever contacted or received information from ...
The State Independent Living Council or SILC?

¿Alguna vez ha contactado o recibido información del...

Consejo de vida independiente del Estado (State Independent Living Council) o SILC?

NOTE: SILC IS PRONOUNCED ‘SILK’

1  YES
2  NO

7  DON’T KNOW/NOT SURE
9  REFUSED

Q020B – ONLY IF Q020 = “YES”

How satisfied were you with those services? Would you say ...
1 Very satisfied  
2 Satisfied  
3 Somewhat satisfied  
4 Unsatisfied  
5 Not at all satisfied  
7 DON’T KNOW/NOT SURE  
9 REFUSED  

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...

1 Muy satisfecho  
2 Satisfecho  
3 Algo satisfecho  
4 Insatisfecho  
5 Completamente insatisfecho

Q025

Have you ever contacted or received information from ...  
The Disability Action Center or DAC?  
Alguna vez ha contactado o recibido información de ...  
El Centro de acción para la incapacidad (“Disability Action Center”) o DAC?  
NOTE: DAC IS PRONOUNCED ‘DAK’

1 YES  
2 NO  
7 DON’T KNOW/NOT SURE  
9 REFUSED

Q025B – ONLY IF Q025 = “YES”

How satisfied were you with those services? Would you say ...

1 Very satisfied  
2 Satisfied  
3 Somewhat satisfied  
4 Unsatisfied  
5 Not at all satisfied  
7 DON’T KNOW/NOT SURE  
9 REFUSED
Have you ever contacted or received information from ...  
Idaho Division of Vocational Rehabilitation or I-D-V-R?  

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<tr>
<td>1</td>
<td>YES</td>
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<tr>
<td>2</td>
<td>NO</td>
</tr>
<tr>
<td>7</td>
<td>DON'T KNOW/NOT SURE</td>
</tr>
<tr>
<td>9</td>
<td>REFUSED</td>
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How satisfied were you with those services? Would you say ...  

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<tr>
<td>1</td>
<td>Very satisfied</td>
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<tr>
<td>2</td>
<td>Satisfied</td>
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<tr>
<td>3</td>
<td>Somewhat satisfied</td>
</tr>
<tr>
<td>4</td>
<td>Unsatisfied</td>
</tr>
<tr>
<td>5</td>
<td>Not at all satisfied</td>
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<tr>
<td>7</td>
<td>DON'T KNOW/NOT SURE</td>
</tr>
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<td>9</td>
<td>REFUSED</td>
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</tbody>
</table>

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...  

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<tbody>
<tr>
<td>1</td>
<td>Muy satisfecho</td>
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<tr>
<td>2</td>
<td>Satisfecho</td>
</tr>
<tr>
<td>3</td>
<td>Algo satisfecho</td>
</tr>
<tr>
<td>4</td>
<td>Insatisfecho</td>
</tr>
<tr>
<td>5</td>
<td>Completamente insatisfecho</td>
</tr>
</tbody>
</table>

Q035
Have you ever contacted or received information from ... 

The Living Independence Network Corporation or LINC?

Algúna vez ha contactado o recibido información de ...

La Asociación red de independencia para vivir (Living Independence Network Corporation) o LINC?

NOTE: LINC IS PRONOUNCED ‘LINK’

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

Q035B – ONLY IF Q035 = “YES”

How satisfied were you with those services? Would you say ...

1  Very satisfied
2  Satisfied
3  Somewhat satisfied
4  Unsatisfied
5  Not at all satisfied
7  DON’T KNOW/NOT SURE
9  REFUSED

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...

1  Muy satisfecho
2  Satisfecho
3  Algo satisfecho
4  Insatisfecho
5  Completamente insatisfecho

Q040

Have you ever contacted or received information from ...

Living Independently For Everyone or LIFE?

Algúna vez ha contactado o recibido información de ...

Vida independiente para todos (Living Independently For Everyone) o LIFE?
Q040B – ONLY IF Q040 = “YES”

How satisfied were you with those services? Would you say ... 

1  Very satisfied
2  Satisfied
3  Somewhat satisfied
4  Unsatisfied
5  Not at all satisfied

7  DON’T KNOW/NOT SURE
9  REFUSED

¿Qué tan satisfecho quedó con esos servicios? Usted diría ... 

1  Muy satisfecho
2  Satisfecho
3  Algo satisfecho
4  Insatisfecho
5  Completamente insatisfecho

Q045

Have you ever contacted or received information from ... 

The Idaho Commission for the Blind or Visually Impaired or I-C-B-V-I?

¿Alguna vez ha contactado o recibido información de ...

La Comisión de Idaho para los ciegos o las personas con incapacidades visuales (Idaho Commission for the Blind or Visually Impaired) o I-C-B-V-I?

1  YES
2  NO

7  DON’T KNOW/NOT SURE
9  REFUSED

Q045B – ONLY IF Q045 = “YES”

How satisfied were you with those services? Would you say ...
1 Very satisfied
2 Satisfied
3 Somewhat satisfied
4 Unsatisfied
5 Not at all satisfied

7 DON’T KNOW/NOT SURE
9 REFUSED

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...

1 Muy satisfecho
2 Satisfecho
3 Algo satisfecho
4 Insatisfecho
5 Completamente insatisfecho

Q050

Have you ever contacted or received information from ... The Americans with Disabilities or A-D-A Taskforce?

Alguna vez ha contactado o recibido información de ...

El equipo de trabajo de Estadounidenses con incapacidades (The Americans with Disabilities) o A-D-A?

1 YES
2 NO

7 DON’T KNOW/NOT SURE
9 REFUSED

Q050B – ONLY IF Q050 = “YES”

How satisfied were you with those services? Would you say ...

1 Very satisfied
2 Satisfied
3 Somewhat satisfied
4 Unsatisfied
5 Not at all satisfied

7 DON’T KNOW/NOT SURE
9 REFUSED

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...
Have you ever contacted or received information from The Idaho Assistive Technology Project?

¿Alguna vez ha contactado o recibido información de Proyecto de tecnología auxiliar o asistiva de Idaho (The Idaho Assistive Technology Project)?

How satisfied were you with those services? Would you say ...

¿Qué tan satisfecho quedó con esos servicios? Usted diría ...

Do you ever use a technology or device to assist you?
¿Utiliza usted alguna vez una tecnología o aparato para ayudarse?

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

What technologies or devices do you use?

¿Qué tecnologías o dispositivos utiliza?

[CAPTURE AS OPEN-ENDED – RECODE LATER USING LIST IN APPENDIX B]

Next I will read several statements. For each one, please tell me how strongly you agree or disagree with the statement.

I have personal assistance services available at a level that allows me to take care of my needs. This might include such services as a home health aide, interpreter, chore worker, or driver.

Do you ...

1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
7  DON’T KNOW/NOT SURE
9  REFUSED

Ahora leeré algunas afirmaciones. Para cada una, por favor, digame qué tanto está de acuerdo o no con dicha afirmación.

Tengo servicios de asistencia personal disponibles a tal nivel que me permite encargarme de mis necesidades. Esto podría incluir servicios como asistente de salud en el hogar, intérprete, persona de trabajo doméstico o chofer.

Usted ...

1  está en total acuerdo
2  está de acuerdo
3  está en desacuerdo
4  está en total desacuerdo
Q070
I have adequate opportunities for education or vocational-technical training.

Tengo oportunidades adecuadas de formación técnica vocacional o educativa.

Do you ...
1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
7  DON’T KNOW/NOT SURE
9  REFUSED

Q080
I have ready access to adaptive devices and technology to assist me in being independent.

Tengo acceso disponible a aparatos adaptivos y tecnología para ayudarme a vivir independiente.

Do you ...
1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
7  DON’T KNOW/NOT SURE
9  REFUSED

Q085
I have the ability to choose the services and support I want to receive.

Tengo la capacidad para elegir los servicios y el apoyo que deseo recibir.

Do you ...
1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
Q090

I have adequate opportunities to be involved in community activities.
Community activities might include participating in politics, working on boards, being involved in a church, participating in social activities, eating out with friends or family, or attending community events.

Do you ...

1  Strongly agree
2  Agree
3  Disagree
4  Strongly disagree
7  DON’T KNOW/NOT SURE
9  REFUSED

Political Activism and Civil Rights

Q095

The next questions are about legal and political issues.

Do you believe that the laws designed to protect people with disabilities are being enforced?

¿Cree usted que se están aplicando o haciendo cumplir las leyes diseñadas para proteger a las personas con incapacidades?

1  YES
2  NO

7  DON’T KNOW/NOT SURE
9  REFUSED
Now I will mention several situations in which some people may have experienced discrimination due to a disability. For each one, please tell me whether it has happened to you.

Have you experienced discrimination ...

Getting housing?

Ahora mencionaré varias situaciones en las que algunas personas pueden haber experimentado discriminación por una incapacidad. Para cada una, por favor, digame si esto le ha ocurrido a usted.

¿Ha experimentado discriminación ...

para conseguir vivienda?

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

Have you experienced discrimination ...

Getting or keeping employment?

¿Ha experimentado discriminación ...

para conseguir o mantener un empleo?

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

Have you experienced discrimination ...

With education? This might include discrimination being accepted into an educational program, gaining access to education, or getting financial aid.
¿Ha experimentado discriminación ...
con la educación? Esto podría incluir discriminación para ser aceptado en un programa educativo, para tener acceso a la educación o para obtener ayuda financiera.

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

Q115

Have you experienced discrimination ...
Getting or keeping custody of your child or children?

¿Ha experimentado discriminación ...

para obtener o mantener la custodia de su hijo o hijos?

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

Q120

Have you experienced discrimination ...

Accessing a public place? For example, there was no parking, limited ramps or elevators, inaccessible doors or other barriers, no large print signage, or lack of an interpreter.

¿Ha experimentado discriminación para tener acceso a un lugar público? Por ejemplo, que no haya estacionamiento, rampas o ascensores limitados, puertas inaccesibles u otras barreras, que no haya rótulos de letra grande, o falta de un intérprete.

1  YES
2  NO
7  DON’T KNOW/NOT SURE
9  REFUSED

-----------------------------------------------------------------------------

Saved: June 2, 2005
Project: 03-State Independent Living Council Survey  Final 5-31-05
Q125

Have you ever been denied any other opportunity due to your disability?

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<tbody>
<tr>
<td>1</td>
<td>YES (SPECIFY)</td>
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<tr>
<td>2</td>
<td>NO</td>
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<tr>
<td>7</td>
<td>DON’T KNOW/NOT SURE</td>
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<tr>
<td>9</td>
<td>REFUSED</td>
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</table>

Q130

Have you ever declined employment or a promotion with a raise in pay to protect your health insurance or other benefits?

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<tbody>
<tr>
<td>1</td>
<td>YES</td>
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<tr>
<td>2</td>
<td>NO</td>
</tr>
<tr>
<td>7</td>
<td>DON’T KNOW/NOT SURE</td>
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<td>9</td>
<td>REFUSED</td>
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</table>

Q135

Have you voted in an election in the past two years?

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<tbody>
<tr>
<td>1</td>
<td>YES</td>
</tr>
<tr>
<td>2</td>
<td>NO</td>
</tr>
<tr>
<td>7</td>
<td>DON’T KNOW/NOT SURE</td>
</tr>
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<td>9</td>
<td>REFUSED</td>
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</table>

Q140 - ONLY IF Q135 = “YES”

Did the voting process accommodate your disability?

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<td>1</td>
<td>YES</td>
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</table>
Health/Medical Insurance Coverage

Q145

The next questions are about health and medical insurance. First, I will read a list of insurance sources. Please tell me which one you currently have that type of insurance or if you have no insurance.

01 Private insurer
02 Medicaid
03 Medicare
04 Tribal/Indian health insurance
05 State of Idaho Workers’ Compensation
06 Veterans benefits
07 Some other type of insurance (SPECIFY) ___________________
08 NO INSURANCE

77 DON’T KNOW/NOT SURE
99 REFUSED

Q150

Please tell me how strongly you agree or disagree with this statement.

My health or medical benefit is adequate to meet my needs.

Por favor, digame cuál de los siguientes tipos de seguro médico tiene en el momento o si no tiene ningún seguro.

01 Aseguradora privada
02 Medicaid
03 Medicare
04 Aseguradora Tribal/Indian health
05 State of Idaho Workers’ Compensation
06 Veterans benefits
07 Otro tipo de seguro (ESPECIFIQUE) ___________________
08 NINGUNA ASEGURADORA

Mi subsidio o beneficio médico o de salud es adecuado para cubrir mis necesidades.
Do you ...

1 Strongly agree
2 Agree
3 Disagree
4 Strongly disagree
7 DON’T KNOW/NOT SURE
9 REFUSED

Q155

Have you postponed seeking health care in the past year because of your financial situation?

¿Aplazó usted la búsqueda de atención en salud el año pasado debido a su situación financiera?

1 YES
2 NO
7 DON’T KNOW/NOT SURE
9 REFUSED

Q160 - ONLY IF Q155 = “YES”

How many times in the past year would you say you have postponed seeking health care because of your financial situation?

¿Cuántas veces durante el año pasado diría usted que aplazó la búsqueda de atención en salud debido a su situación financiera?

___ ENTER NUMBER OF INSTANCES

776  776 OR MORE
777  DON’T KNOW / NOT SURE
999  REFUSED

Demographics

Q200

Finally, I have some background questions that will be used for statistical purposes only.
How many people, including children and yourself, live in your household?

Finalmente, tengo algunas preguntas secundarias que se utilizarán solamente para propósitos estadísticos.

¿Cuántas personas, incluyendo niños y usted, viven en su hogar?

_____ ENTER NUMBER OF ALL HOUSEHOLD MEMBERS

20  20 OR MORE
77  DON’T KNOW/NOT SURE
99  REFUSED

Q205

How many members of your household, including yourself, are 18 years of age and older?

¿Cuántas personas en su hogar, incluyéndose usted, tienen 18 años de edad o más?

_____ ENTER NUMBER OF HOUSEHOLD MEMBERS 18 AND OLDER

77  DON’T KNOW/NOT SURE
99  REFUSED

Q210

Do you have more than one telephone number in your household? Do not include cell phones or numbers that are only used by a computer or fax machine.

¿Tiene más de un número telefónico en su casa? No incluya teléfonos celulares o números que sólo se usen para computadoras o fax.

1  YES
2  NO
7  DON'T KNOW / NOT SURE
9  REFUSED

Q215 – only if Q210 = “Yes”

How many of these phone numbers are residential numbers?

¿Cuántos de estos números telefónicos son números residenciales?

1  ONE
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<th>Code</th>
<th>Description</th>
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<td>2</td>
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<td>3</td>
<td>THREE</td>
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<td>FOUR</td>
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<td>5</td>
<td>FIVE</td>
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<tr>
<td>6</td>
<td>SIX OR MORE</td>
<td></td>
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<tr>
<td>7</td>
<td>DON'T KNOW / NOT SURE</td>
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<td>9</td>
<td>REFUSED</td>
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Q220

CODE SEX OF RESPONDENT. IF NECESSARY, ASK:

This may sound silly, but for survey purposes I need to ask, are you male or female?

Esta pregunta le puede sonar trivial o ridícula, pero para propósitos de la encuesta, necesito preguntarle, ¿es usted hombre o mujer?

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<tr>
<td>1</td>
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<td>FEMALE</td>
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<td>9</td>
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Q225

Please tell me which of the following racial or ethnic group or groups best describe you?

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<tr>
<th></th>
<th>Code</th>
<th>Description</th>
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<tbody>
<tr>
<td>1</td>
<td>White, non-Hispanic</td>
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</tr>
<tr>
<td>2</td>
<td>Hispanic or Latino</td>
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</tr>
<tr>
<td>3</td>
<td>Black or African American, non-Hispanic</td>
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</tr>
<tr>
<td>4</td>
<td>Asian, non-Hispanic</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>American Indian or Alaskan Native, non-Hispanic</td>
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</tr>
<tr>
<td>6</td>
<td>Or other group (SPECIFY)_____________</td>
<td></td>
</tr>
<tr>
<td>7</td>
<td>DON'T KNOW/NOT SURE</td>
<td></td>
</tr>
<tr>
<td>9</td>
<td>REFUSED</td>
<td></td>
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</table>

INTERVIEWER: IF MORE THAN ONE GROUP, USE “OTHER” AND SPECIFY GROUPS.

Por favor, digame ¿cuál de los siguientes grupos étnicos o raciales lo describe mejor?

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<td>1</td>
<td>Blanco, no-Hispano</td>
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<tr>
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<td>Hispano o Latino</td>
<td></td>
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<tr>
<td>3</td>
<td>Negro o Africano Americano, no-Hispano</td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Asiático, no-Hispano</td>
<td></td>
</tr>
<tr>
<td>5</td>
<td>Indio Americano o Nativo de Alaska, no-Hispano</td>
<td></td>
</tr>
<tr>
<td>6</td>
<td>Otro grupo (ESPECIFIQUE)_____________</td>
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</table>
Q230
What is your marital status? Are you ...

1  Married
2  Divorced
3  Widowed
4  Separated
5  Never married
6  A member of an unmarried couple
9  REFUSED

¿Cual es su estado civil? Es usted ...

1  Casado
2  Divorciado
3  Viudo
4  Separado
5  Nunca se ha casado
6  Miembro de una pareja no casada

Q235
What is your age?

¿Cuántos años tiene usted?

_____ ENTER AGE
9  REFUSED

Q235B
I understand this is a sensitive question. Would you be willing to tell me which of the following best describes your age range?

1  Under 30
2  30 to 44
3  45 to 64
4  65 or older
9  REFUSED

Entiendo que ésta es una pregunta confidencial. ¿Estaría dispuesto(a) a decirme en cuál de los siguientes niveles de edad se encuentra usted?
1 Menor de 30 años
2 Entre 30 y 44 años
3 Entre 45 y 64 años
4 65 o mayor

Q240

What is the highest level of school or college that you have completed?

01 Less than high school
02 High school graduate or GED
03 2-year or associate degree
04 Some college but less than 4 years
05 Trade or vocational certificate
06 4-year college graduate (Bachelors or 4-year degree)
07 Some graduate school
08 Masters degree
09 Doctorate or professional degree (PhD, MD, JD)
10 Something else (SPECIFY)

77 DON’T KNOW/NOT SURE
99 REFUSED

¿Cuál es el mayor nivel de escuela o Universidad que usted ha completado o alcanzado?

01 Menor que escuela secundaria
02 Graduado de escuela secundaria o GED (Desarrollo de educación general)
03 2-años o título de asociado
04 Algún estudio universitario pero menos de 4 años
05 Certificado vocacional o de comercio
06 Licenciado 4-años (Licenciados o grado de 4-años)
07 Algún estudio de la escuela de postgrado
08 Master
09 Doctorado licenciado profesional (PhD, MD, JD)
10 Otro (ESPECIFIQUE)

Q245

I'm going to quickly read a list of income ranges in order from lowest to highest. Please stop me when I get to the one that describes your annual household income from all sources.

01 Less than $10,000
02 $10,000 up to $20,000
03 $20,000 up to $30,000
04 $30,000 up to $40,000
05 $40,000 up to $50,000
06 $50,000 up to $60,000
07 $60,000 up to $70,000
08 $70,000 up to $80,000
09 $80,000 up to $90,000
10 $90,000 up to $100,000
11 More than $100,000

77 DON’T KNOW/NOT SURE
99 REFUSED

Rápidamente leeré una lista de niveles de ingresos en orden, desde el más bajo hasta el más alto. Por favor, deténgame cuando yo diga el que describe el ingreso anual proveniente de todas las fuentes de su hogar.

01 Menor de $10,000
02 Entre $10,000 y $20,000
03 Entre $20,000 y $30,000
04 Entre $30,000 y $40,000
05 Entre $40,000 y $50,000
06 Entre $50,000 y $60,000
07 Entre $60,000 y $70,000
08 Entre $70,000 y $80,000
09 Entre $80,000 y $90,000
10 Entre $90,000 y $100,000
11 Más de $100,000

Q250

Please tell me your ZIP Code.

Por favor, dígame su código postal (ZIP Code).

_____ ENTER ZIP CODE

7 DON’T KNOW/NOT SURE
9 REFUSED

THANKYOU

Thank you so much for participating in this survey. If you would like more information or want to know the results of the survey, I can take your contact information and pass it on.

Muchísimas gracias por participar en esta encuesta. Si desea mayor información o quiere saber los resultados de la encuesta, puedo tomar sus datos para darle la información.

1 ENTER CONTACT INFORMATION
2 END SURVEY – SKIP TO THANKS AS COMPLETE
CONTACT - only if THANKYOU=1 or ALTSURV2=1

Your contact information will not be connected with the results of your survey in any way.* This information will be sent on to the Idaho State Independent Living Council or the Idaho Division of Vocational Rehabilitation for them to contact you further.

Does this sound OK?

¿Está de acuerdo?

1  YES
2  NO
9  REFUSED

*IF ALTSURV2=1 1ST SENTENCE SHOULD READ: “I'll need to collect your contact information for someone to follow-up with you.” “Necesito coleccionar sus datos para que alguien le pueda llamar después.”

FNAME & LNAME

Please spell your name for me.*

Por favor, deletrea su nombre.

*IF ALTSURV2=1 WILL READ: “Please spell the name of the person to be interviewed.” “Por favor deletrea el nombre de la persona que va a ser entrevistada.”

PHONENO

What is the best phone number to reach you at?*

¿Cuál es el número de teléfono para contactarlo?

(____) ____-____  ENTER TELEPHONE NUMBER

*IF ALTSURV2=1 WILL READ: “What is the best phone number to use to arrange the in-person interview?” “¿Qué numero de teléfono es el mejor para hacer los arreglos para la entrevista en persona?”
BESTTIME – only get if ALTSURV2=1

Is there a best time to contact you or any special accommodations needed for the in-person survey?

¿Hay una hora mejor para hablar con usted o cualesquiera alojamientos que se hacen falta para hacer la encuesta en persona?

OPEN

ADDRESS

What is your address?*

*IF ALTSURV2=1 WILL READ: What is the address?

¿Cuál es su dirección?

*IF ALTSURV2=1 WILL READ: ¿Cuál es el dirección?

Address: _________________
City: _________________
State: _________________
Zip: _________________

THANKS

Thank you again for your participation! Have a great day/evening.

¡Le agradezco de nuevo su participación! Que tenga un buen día / una buena tarde.

TERMINATE AS "COMPLETE" OR AS "30 IN-PERSON RESPONDENT"

SORRYRSl – Goodbye Text for Ineligible Household

I'm sorry. Because you do not live within the State of Idaho, your household does not qualify for this survey. Thank you very much for your time.

Lo siento pero debido a que usted no vive en el Estado de Idaho, su casa no califica para realizar esta encuesta. Muchas gracias por su tiempo.

TERMINATE AS OUT OF INTERVIEW AREA
Thank you very much for all your help. I'm sorry that none of our survey options will work. Are there any other special accommodations that would enable the selected person to complete this survey?

Muchas gracias por su ayuda. Lo siento que ninguna de las opciones para la encuesta le sirven. ¿Hay algunos otros alojamientos especiales que le permitieran a la persona seleccionada completar la encuesta?

OPEN

Thank you again! Have a great day/ evening.

Gracias de nuevo por su participación. Que tenga buen día/tarde.
APPENDIX E: Open-Ended Questions

Original categories to use in post-data-collection coding of Q001 & Q005

1. Transportation
2. Personal Finances
3. Public Services
4. Public Access
5. Personal Health
6. Access to Health care
7. Health care insurance availability
8. Finding or getting Information
9. Education (access to/lack of)
10. Independence
11. Understanding people or circumstances around me
12. Housing
13. Quality personal care
14. Affordable personal care
15. Discrimination
16. Access to Technology
17. Finding a job or keeping a job
18. The general economy
19. Environmental problems
20. Population growth (too much/too little)
21. Low wages
22. Taxes
23. Social issues generally (aging, poverty, crime, etc.)

See revised list.

Original list to use in post-data-collection coding of Q060B

1. Large key, speaker, or enhanced volume telephone, talking caller ID, speech recognition telephone or other specialized telephone
2. Devices, designed to assist with spoken communication
3. Hearing aids or other devices designed to assist with limited hearing or deafness
4. Closed-captioning on TV
5. Large text on computer screens
6. Braille notetakers, screen readers, special computer software, or any other devices designed to assist with limited vision or blindness
7. Automatic door openers or remotely controlled light switches
8. Ramps instead of steps or stairs, or curbcuts on sidewalks
9. Equipment such as walkers, wheelchairs, scooters, lifts designed for wheelchairs, or any other devices that help with mobility
10. Voice-recognition technology, a special keyboard or mouse, or any other devices that help with limited dexterity or use of your hands or arms.

11. Prostheses or orthotics of any kind or modifications to furniture, appliances or rooms.
Revised Recode Key (based on open-ended responses)

<table>
<thead>
<tr>
<th>Q001 - Recode Key</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 Age</td>
</tr>
<tr>
<td>3 Care/services</td>
</tr>
<tr>
<td>4 Education</td>
</tr>
<tr>
<td>5 Employment</td>
</tr>
<tr>
<td>7 Don't know/unsue/na</td>
</tr>
<tr>
<td>8 Independence</td>
</tr>
<tr>
<td>9 Refused</td>
</tr>
<tr>
<td>12 Housing</td>
</tr>
<tr>
<td>13 None</td>
</tr>
<tr>
<td>14 Other</td>
</tr>
<tr>
<td>61 Financial health</td>
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<td>62 Financial health</td>
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<td>63 Financial health</td>
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<td>101 Mental health</td>
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<td>102 Mental health</td>
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<td>103 Mental health</td>
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<td>104 Mental health</td>
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<tr>
<td>105 Mental health</td>
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<tr>
<td>111 Mobility</td>
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<tr>
<td>112 Mobility</td>
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<tr>
<td>151 Physical health</td>
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<td>152 Physical health</td>
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<td>153 Physical health</td>
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<td>171 Access</td>
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<tr>
<td>172 Access</td>
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</tbody>
</table>

<table>
<thead>
<tr>
<th>Q005 - Recode Key</th>
</tr>
</thead>
<tbody>
<tr>
<td>6 Acceptance</td>
</tr>
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<td>7 Don't know</td>
</tr>
<tr>
<td>8 Education</td>
</tr>
<tr>
<td>9 NA</td>
</tr>
<tr>
<td>12 Employment</td>
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<tr>
<td>13 Independence</td>
</tr>
<tr>
<td>14 Insurance</td>
</tr>
<tr>
<td>15 Mobility</td>
</tr>
<tr>
<td>16 None</td>
</tr>
</tbody>
</table>
18 Other
21 Accessibility healthcare
22 Access services
31 Access transportation
32 Access general
33 Access places
41 Disability specific understanding
42 Disability specific
51 Discrimination employment
52 Discrimination general
102 Financial healthcare
103 Financial services
104 Financial income
111 Healthcare financial
112 Healthcare
101 Financial

Q10B
1 Out of work and looking for a job
2 Out of work and not looking for a job
3 Something else (SPECIFY)
4 Attending School
9 REFUSED

Q060B
Large key, speaker, or enhanced volume telephone,
1 talking caller ID, speech recognition telephone or other
specialized telephone

2 Devices, designed to assist with spoken communication

3 Hearing aids or other devices designed to assist with
limited hearing or deafness
4 Closed-captioning on TV
5 Large text on computer screens

Braille notetakers, screen readers, special computer
6 software, or any other devices designed to assist with
limited vision or blindness

7 Automatic door openers or remotely controlled light
switches

8 Ramps instead of steps or stairs, or curbcuts on sidewalks

Equipment such as walkers, wheelchairs, scooters, lifts
9 designed for wheelchairs, or any other devices that help
with mobility

10 Voice-recognition technology, a special keyboard or
mouse, or any other devices that help with limited
dexterity or use of your hands or arms
Prostheses or orthotics of any kind or modifications to
furniture, appliances or rooms.
Oxygen / breathing apparatus / nebulizers
Pacemaker / Nerve stimulator / etc.
Computer (only use if none of the above fit)
Not an Assistive Technology
Don't Know / Unsure
Refused

Q125
1 Employment
2 Transportation
3 Access
4 Financial
5 Education
6 Housing
7 Other
9 Don't Know / Invalid Answer

Q145
1 Private insurer
2 Medicaid
3 Medicare
4 Tribal/Indian health insurance
5 State of Idaho Workers’ Compensation
6 Veterans benefits
7 Other type / Multiple (not covered by 9 & 10)
8 NO INSURANCE
9 Medicare & Private combination
10 Medicare & Medicaid combination
77 DON’T KNOW/NOT SURE
99 REFUSED

Q225
1 White, non-Hispanic
2 Hispanic or Latino
3 Black or African American, non-Hispanic
4 Asian, non-Hispanic
5 American Indian or Alaskan Native, non-Hispanic
6 OTHER (SPECIFY) *
7 DON’T KNOW / NOT SURE
9 REFUSED

Q240
1 Less than high school
2 High school graduate or GED
   2-year or associate
3 degree
4 Some college but less than 4 years
5 Trade or vocational certificate
6 4-year college graduate (Bachelor’s or 4 year degree)
7 Some graduate school
8 Master’s degree
9 Doctorate or professional degree (PhD, MD, JD)
10 Or something else (SPECIFY)
77 DON’T KNOW / NOT SURE
99 REFUSED