A Study of Methods of Model Formulation and Assessment to Construct Models of Effective Program Implementation Based on a Nationwide Survey of Support Providers Based on Implementation of Critical Ingredients of an Employment Transition Support Program for Persons with Disabilities and Analysis of Factors Governing that Implementation

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[Abstract]

The purpose of this study is to examine model formulation and assessment approaches in order to construct an effective model of program implementation using results of a nationwide survey of support providers. This study examined the development of methods of formulating and assessing effective models of program implementation based on the example of the employment transition support program for persons with disabilities pursuant to the Services and Support for Persons with Disabilities Act.

Measurement of its performance primarily via the employment transition rate also demonstrated the effectiveness of program implementation in accordance with this model. And results indicated that the Nationwide Survey of Support Providers is an effective approach to construction of an effective model of program implementation. Though there are some points that should be examined, this approach using results of a nationwide survey of support providers is proven to be effective.

I. Introduction

Overall, Japanese programs to provide social welfare services tend to involve support systems independently established by individual support providers. Thus, forms and methods of support that are considered effective are common among many of the parties concerned, and establishment of methodologies to formulate more effective program models is delayed. In such circumstances, avenues to formulate better methods of providing support based on findings from sites of program implementation are blocked, and providers are not required to ensure the quality of services. Often, the forms of support

provided by a provider cannot be adequately ascertained from outside the provider. Moreover, program users have difficulty selecting critical services.

Varied entities operate in the field of social welfare, making construction of an effective model of program implementation difficult. An effective model of program implementation must be formulated in accordance with varying levels of implementation. However, many ingredients are known to be common to critical forms of support and the way they are organized, i.e. the heart of a program¹). Use of findings from sites of program implementation and collaboration between program implementers and researchers are essential to the construction of an effective model of program implementation².

Exchange of information by program implementers and researchers is needed to develop a more effective model of program implementation. An effective model of program implementation created in collaboration with program implementers should be adjusted and revised in accordance with conditions at various sites of program implementation.

This study sought to examine model formulation and assessment approaches in order to construct an effective model of program implementation using results of a nationwide survey of support providers. Specifically, this study examines the example of the employment transition support program for persons with disabilities introduced pursuant to the Services and Support for Persons with Disabilities Act. This study seeks to clarify the implementation of critical program ingredients based on results of a survey of support providers nationwide, it seeks to analyze factors governing the implementation of those program ingredients, and it seeks to examine methods of formulating and assessing effective program models as would be feasible in light of the provision of welfare services in Japan.

II. Methods

1. Selection of survey participants

This study examines the development of methods of formulating and assessing effective models of program implementation based on the example of the employment transition support program for persons with disabilities pursuant to the Services and Support for Persons with Disabilities Act. A self-administered nationwide survey (denoted here as the Nationwide Survey of Support Providers) of providers of employment transition support (denoted here as Support Providers) for persons with disabilities was conducted by mail. This employment transition support program was selected for several reasons, including the substantial need for the program on the part of program users, the fact that the program is relatively new since it was created under the Services and Support for Persons with Disabilities Act, the fact that the program has a usage deadline, and the fact that measurements of its performance have not been made adequately available.

2. Survey content and structure of the survey form

This study consisted of 2 surveys. The first was a basic survey that primarily sought to determine basic information about Support Providers. The second was a survey on implementation of critical program ingredients (denoted here as the Survey on Implementation of Critical Ingredients or Implementation

Survey) that consisted of indices to measure critical program ingredients in an effective model of program implementation constructed on the basis of theories of program assessment and studies to qualitatively assess programs.

The basic survey sought to ascertain the basic status of the support provider, e.g. year the program started, user capacity, the number of persons with disabilities who were entering the workforce, the number of employees, and the provider's orientation, indices related to program effectiveness, and the provider's efforts at implementing the program.

The Survey on Implementation of Critical Ingredients sought to ascertain the implementation of Critical Program Ingredients that comprised an effective model of program implementation³⁾. An effective model of this program will be constructed through adjustments to the program's structure based on theories of program assessment, observing sites of program implementation and conducting studies, like those involving interviews, to qualitatively assess the program, and exchanges of opinions among program implementers and researchers; thus, a model will be formulated with the consensus of program implementers and researchers; thus, a model will be formulated with the consensus of program implementers and researchers⁴⁾. There are 169 critical ingredients that fall under 23 items. This study measured the adherence of a model created by our research group by determining the implementation of ingredients falling under each item. These items were classified into 5 domains depending on their content (Table 1). The Implementation Survey rated each item on a 4-point scale. Ingredients that represented specific methods of support were checked off if applicable. Based on survey results, scale scores were from 4 points, indicating extensive implementation, to 1 point, indicating minimal implementation. This Likert scale provided a fidelity scale to measure model adherence. When the scale score for a domain is indicated, this indicates the sum of the scale scores for each item adherence. Thus, all of the scale scores for each domain and each item range from 1 to 4 points.

Characteristics of each domain were as follows. Domain A indicated The Organization Providing Services and consisted primarily of aspects like the form of organization implementing the program, its system of contacts, and fostering of staff members. Domain B indicated the Provision of Services to Program Participants and consisted of acceptance criteria and publicity efforts. Domain C indicated Support Processes from the Start of Program Use to the Formulation of an Employment Transition Support Plan and consisted of activities ranging from forming relationships at the start of program use to drafting of a support plan. Domain D indicated Support Processes Facilitating Employment Transition and consisted primarily of a wide range of support efforts like acquiring the skills to find employment, assessment of the individual's current status, and job placement. Domain E indicated Processes Required in Support of Continuous Employment and consisted of construction of support systems and required actions with a focus on conditions after entry into the workforce. Rather than merely indicating support based on actual laws and ordinances, these domains encompassed a broader range of support services and how long they were provided. This was done in order to formulate a model of a program that would help users to enjoy a stable career and ultimately enjoy a better quality of life. In addition, the model was the result of collaboration between program implementers and researchers and items included were deemed valid.

Table 1 Critical	Ingredients of	f the employment	transition su	pport program
				FF - F - 8

Domain name · Item name	No. ingredients
A The Organization Providing Services	
A1 Support provided by employment support staff	9
A2 Roles and responsibilities of employment support staff	6
A3 Team approach to employment support	5
A4 Coordination with living support services and healthcare facilities	6
A5 Function of coordinators (service administrators/managers)	16
A6 Fostering and supervising staff members	7
B Provision of Services to Program Participants	
B1 Acceptance of individuals who wish to receive employment transition support with no	7
exclusion criteria	10
B2 Active publicity efforts to identify and retain users	
C Support Processes from the Start of Program Use to the Formulation of an Employment Transition	
Support Plan	5
C1 Sharing of employment goals, motivation, and partnering	6
C2 Providing assessment predicated on the users' wishes in a realistic employment environment	4
C3 Drafting an employment transition support plan in order to promptly satisfy the desire to	
work	
D Support Processes Facilitating Employment Transition	
D1 Acquiring the skills needed to find employment	9
D2 Assessment in environments similar to actual workplaces	-
D2-1 Assessment when the individual primarily wishes to work within the facility	6
D2-2 Assessment when the individual primarily wishes to work outside the facility	7
D3 Maintaining and improving the individual's motivation to enter the workforce	8
D4 Use of apprenticeships and trial employment at potential employers	7
D5 Actively and routinely cultivating cooperative support providers in accordance with	7
individual needs	7
D6 Active job placement with the goal of open employment	7
D7 Hunting for a variety of jobs in accordance with the individual's inclinations	6
D8 Efforts to promptly facilitate entry into the workplace in accordance with the individual's	
wishes	
E Processes Required in Support of Continuous Employment	
E1 Providing assistance with settling in and continued support after entry into the workforce	5
E2 Support for individuals who wish to leave or transfer jobs	6
E3 Continued support for businesses	4
E4 Team approach to provide comprehensive employment and living support	9

Source: Koukanoagaru-Syurouikoushien-Program-no-Arikata-kenkyukai (2009)

3. Conduct of a Nationwide Survey of Support Providers

(1) Survey period

This survey was conducted from March-July 2009.

(2) Survey participants

Potential survey participants were all Support Providers nationwide. Prefectural and city governments were asked about the actual number of those providers in December 2008. In accordance with their responses, survey forms were mailed to 1,213 Support Providers.

(3) Number of responses and response rate

Responses were received from 738 Support Providers, indicating a response rate of 60.8%. Of the responses, valid responses were received from 727 Support Providers, indicating a response rate of 59.9%.

4. Ethical considerations

A written description clearly explaining the purposes of this research, a summary of the study, and how responses would be handled was enclosed with the survey form. In addition, participants were allowed to respond anonymously to the survey form, and survey forms were coded to protect anonymity. Both survey forms were combined when collected and then coded and analyzed. With regard to comments, slight changes were made to proper names and the like so that the names of Support Providers could not be identified, but considerations were made to leave passages intact.

III. Survey results

1. Basic survey

The primary results from the survey forms were previously published by Kosaza, Oshima, Kouda et al. (2010). The following describes only significant survey results.

The most prevalent major disability of users was a mental disability; such users were accepted by 81.8% of all Support Providers. In addition, 44.8% of Support Providers accepted users with a mental illness and 31.5% of Support Providers accepted users with a physical disability.

The most prevalent user capacity was fewer than 6 users, according to responses from 181 Support Providers. Forty-seven point eight percent of Support Providers had a user capacity of 10 or fewer users, revealing that most Support Providers were relatively small-scale. That said, other programs were often offered by the same entity, and only 15 Support Providers responded that they offered no programs besides this program. Over half of the other programs offered by the same entity were a Type B (non-contracted work) continuous employment support program (70.3%) or a group home/total care facility (54.1%). Programs that the Study Group considered critical were an employment and living support center program for persons with disabilities, offered by 13.3% of providers, and a job coaching program, offered by 19.1% of providers.

In addition, Support Providers most often (65.2%) had users using the program for a duration of longer than a year and a half. This is close to the cap on the length of time programs can be used and indicates that this method of support must be reconsidered.

From April to December 2008, 1,391 persons with disabilities entered the workforce. The employment transition rate during this period was 12.1%; calculated annually, this rate would be 16.1%. This result is

higher than the 14.7% in the latest study published by the Ministry of Health, Labor, and Welfare.

User capacity	No. of Support Providers (%)
Fewer than 6 users	181(26.0)
7-10	152(21.8)
11-15	118(16.9)
16-20	103(14.8)
21-25	36(5.2)
26-30	42(6.0)
31 or more users	65(9.3)

 Table 2 Number of Support Providers by user capacity

Source: Kosaza, Oshima, Kouda et al. (2010)

Table 3 Average duration of program usage by users

No. of Support Provider (%)
6(0.9)
8(1.3)
16(2.5)
89(14.0)
102(16.1)
414(65.2)

Source: Kosaza, Oshima, Kouda et al. (2010)

Type of disability	No. of Support Providers (%)
Physical disability	229 (31.5)
Mental disability	595 (81.8)
Mental illness	326 (44.8)
Developmental disability	113 (15.5)
Refractory illness	18 (2.5)
No specific disability	9 (1.2)

Note) Multiple responses were allowed, so the number of support providers responding exceeds the total number of 727 Support Providers

Source: Kosaza, Oshima, Kouda et al. (2010)

Program name	No. of Support Providers
Employment and living support center for persons with disabilities	97
Job coaching	139
Businesses that encourage the hiring of persons with severe disabilities	9
Job acclimatization training system	14
Contracted [vocational] training program	47
Counseling and support program*	243
Type A (contracted work) continuous employment support program*	82
Type B (non-contracted work) continuous employment support program*	511
Independence training program*	207
Group home/Total care facility*	393
Regional activities support program*	166
In-home care*	148
Psychiatric hospitals and clinics	16
Other	171

Table 5 Programs offered by the same entity

Note) An asterisk (*) indicates services pursuant to the Services and Support for Persons with Disabilities Act. Multiple responses were allowed.

Source: Kosaza, Oshima, Kouda et al. (2010)

2. Survey on Implementation of Critical Program Ingredients

The level of implementation of Critical Program Ingredients falling under 23 items from A1 to E4 was ascertained. That said, D2 featured a question with responses regarding assessment within the facility and assessment outside the facility, so results were tallied for 24 items.

By domain, the average scale scores on the fidelity scale are as shown in Table 6. Roughly half of the scores for Domains A to C adhered to the model while those for Domains D and E tended to be somewhat lower.

	Freq.	Scale avg. (Item avg.)	SD
Domain A	671	2.45	.652
Domain B	684	2.57	.726
Domain C	681	2.58	.729
Domain D	602	2.14	.646
Domain E	666	2.18	.825
All	569	2.33	.589

Table 6 Average scale scores on the fidelity scale by domain

The average scale scores on the fidelity scale were then determined by item. Specific figures are as shown in Table 7; variations in average scale scores were noted even in the same domain. Below, scale scores for the top items and bottom items in each domain were compared.

Domain A included items among the top 5 items and the bottom 5 items, with a difference between the two of 0.81 points. In Domain B, both items had relatively high scores with a difference of 0.32 points.

Items in Domain C also had relatively high scores with a difference of 0.39 points. In Domain D, items D21 and D7 had relatively high scores but overall most items had low scores with a difference of 0.56 points. Items in Domain E had relatively low scores overall with a difference of 0.49 points.

In addition, about 40% of Support Providers had no persons with disabilities who were entering the workforce during the survey period, so scores for some items in Domain D, which included employment transition performance, and scores for items in Domain E, which primarily involved support after entry into the workforce, were low overall. However, systems for support after entry into the workforce should be provided once users have registered to receive support, so efforts by Support Providers with no persons with disabilities who were entering the workforce at the time of the study were also assessed.

Item	Freq.	Avg.	SD	Item	Freq.	Avg.	SD
A1	697	2.89	.825	D21	629	2.46	.926
A2	692	2.68	.867	D22	632	2.13	.950
A3	693	2.29	.970	D3	637	2.14	.842
A4	694	2.08	.893	D4	636	1.92	.889
A5	683	2.76	.845	D5	635	2.15	.864
A6	684	2.29	.903	D6	637	2.04	.849
B1	686	2.73	.897	D7	636	2.48	.974
B2	685	2.41	.868	D8	637	1.80	.797
C1	686	2.76	.809	E1	682	2.28	1.086
C2	686	2.60	.838	E2	674	2.29	1.064
C3	682	2.37	.919	E3	678	2.23	.996
D1	686	2.20	.892	E4	681	1.96	.851

Table 7 Average scale scores on the fidelity scale by item

3. Fidelity scale scores by domain in terms of Support Providers' basic attributes

Indicators of the scale of the Support Provider, the effects of user capacity, the effects of the average duration of program usage, and the effects of parallel programs were determined. That said, the effects of different disabilities have been omitted here since many of the Support Providers accepted persons with multiple disabilities. In addition, there were no differences in the fidelity scale scores by domain for the number of persons with disabilities who were entering the workforce and the employment transition rate. The number of persons with disabilities who were entering the workforce and the employment transition rate served as indices of performance and are indicated in the Discussion.

(1) The effects of user capacity

Assignment of personnel to the program is dictated by laws and ordinances, so user capacity can also affect the number of staff members assigned. The number of users per staff member may be the same, but Support Providers with a small user capacity are likely to have a small number of total staff members. A reduction in the total number of staff members carries the drawback of precluding specialization in various support efforts and publicity efforts. In actuality, many Support Providers do not provide adequate services under current criteria for staff assignment.

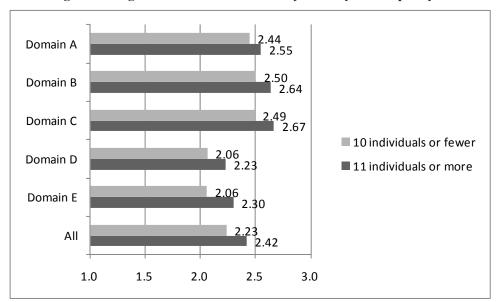


Fig. 1 Average scale scores on the fidelity scale by user capacity

As confirmed by actual data, average scale scores for Support Providers with a user capacity of 10 individuals or fewer were lower than those of Support Providers with a user capacity of 11 individuals or more in all domains (Fig. 1). The difference in Domain E, which involves services after entry into the workforce, in particular was marked.

(2) The effects of the average duration of program usage

A short duration of program usage indicates that users have soon developed the desire to work. Thus, Support Providers with a short duration of program usage would be more effective at program implementation.

Comparing actual scale scores indicated that Support Providers with a short average duration of program usage had high scale scores in all domains (Fig. 2).

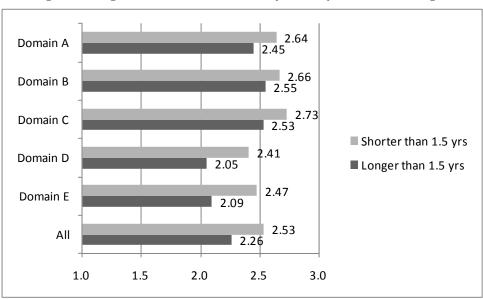


Fig. 2 Average scale scores on the fidelity scale by duration of usage

(3) The effects of parallel programs

Most of the Support Providers studied offered some form of parallel program. The 4 most prevalent of these programs were: a Type B (non-contracted work) continuous employment support program, a counseling and support program that can serve as a point of contact for users, an employment and living support center for persons with disabilities that can serve as a local base for services, and a job coaching program, which is considered to be a critical form of support after entry into the workforce. The scale scores in individual domains were compared for these 4 programs.

When a Type B (non-contracted work) continuous employment support program is offered as a parallel program, the scale score was lower than when it was not offered in parallel. In regard to the other 3 programs, Support Providers with parallel programs had higher scale scores.

The average scale scores were compared for Support Providers with parallel programs. A Type B (noncontracted work) continuous employment support program resulted in the lowest scale scores in all of the domains. A counseling and support program resulted in a relatively high scale score in Domain B, which includes publicity efforts and tended to result in somewhat higher scores in other domains as well. In addition, an employment and living support center program for persons with disabilities resulted in the highest score in Domain A, which indicates The Organization Providing Services, and resulted in rather high scale scores in other domains as well. A job coaching program resulted in high scale scores overall. It resulted in higher scale scores in Domains C, D, and E, which are directly affected by support, than did other parallel programs (Fig. 3).

These results indicate that programs offered in parallel by the same entity also affect the employment transition support program for persons with disabilities.

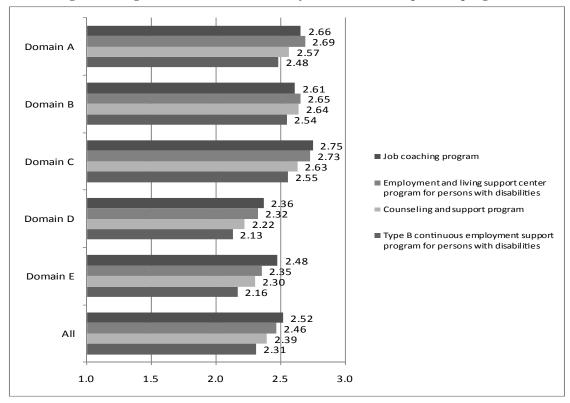


Fig. 3 Average scale scores on the fidelity scale in terms of parallel programs

IV. Discussion

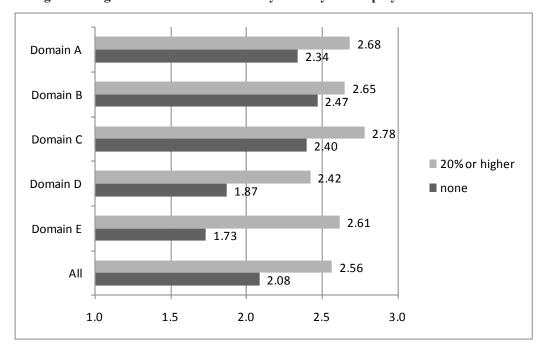
1. Validity of an effective model of program implementation

An effective model of program implementation constructed through collaboration between program implementers and researchers has a certain degree of validity because of the way in which it was established. In addition, measurement of its performance primarily via the employment transition rate also demonstrated the effectiveness of program implementation in accordance with this model.

Specifically, Support Providers with an annually calculated employment transition rate during the survey period of over 20% had average scale scores substantially exceeded those of Support Providers with no persons with disabilities who were entering the workforce from April-December 2008. This was true in Domain E, which primarily involved support after entry into the workforce, and similar trends were noted in all of the domains, assuring the validity of this effective model of program implementation (Fig. 4).

In addition, Support Providers with a relatively short duration of program usage had high average scale scores for all items, so this effective model of program implementation can be deemed to be consistent with the original goals of the program in the sense of achieving entry into the workforce, which is what users want (Fig. 2).

Thus, the validity of this effective model of program implementation and its critical ingredients is assured.





2. Improvement in average scores on the fidelity scale

Results of this study have indicated the validity of this effective model of program implementation with regard to the employment transition support program for persons with disabilities. Thus, improvements

in average scores on the fidelity scale must be examined based on results of other studies. Having specifically examined the bottom 5 items in terms of average scale scores, the current work will examine improvements in the average scale scores for each domain.

Items with low average scale scores were items D8, D4, E4, D6, and A4. Items D8 and D4 can be classified as items directly related to support with an eye towards entry into the workforce while items E4, D6, and A4 can be classified as items required for liaison with other organizations, like obtaining workplace information.

Item D8 asked about the results of employment transition support, and this item is likely to be improved as a result of a review of support systems overall. Item D4 involved apprenticeships and trial employment, so this item will be readily affected by changes in the employment transition rate. Thus, program orientation must be reviewed from a long-term perspective. Actual survey results also indicated that about 40% of Support Providers had no persons with disabilities who were entering the workforce, and items D8 and D4 corroborate this finding.

Items E4, D6, and A4 will now be examined. Item E4 involved network-building to maintain quality of life after one's entry into the workforce and is an essential ingredient to a stable career. Responses from Support Providers with no persons with disabilities who were entering the workforce from April-December 2008 may have affected this item, but a network must be constructed prior to employment transition. Item D6 indicated the difficulty of job placement. This item was affected by both the lack of adequate network-building primarily in the form of Hello Work (public employment offices) and external factors such as a lack of privately owned support providers to cultivate depending on the region. Item A4 indicated that liaison with networks to sustain quality of life was lacking when programs had to specialize in employment transition. Issues common to these 3 items were the lack of adequate sharing of information and network-building in regions. As an example, information on job placement is often not shared with other support providers offering the same program. In addition, small-scale support providers lack the sheer number of staff members and are unable to allocate time to network-building. As a result, information is likely to be concentrated in large-scale support providers and support providers offering other programs in parallel. Personnel assignment criteria are based on laws and ordinances, and Support Providers often are unable to make improvements themselves. These points were noted in the comments and indicate the limitations of a model based on laws and ordinances.

An orientation towards improving average scale scores on the fidelity scale indicated the effectiveness of parallel programs offered by the same entity. As an example, Support Providers that used a job coaching program had average scale scores in Domains C to E that substantially exceeded the average. In addition, a counseling and support program resulted in higher average scale scores for Domain B, which involved publicity efforts and acceptance. Offering an employment and living support center program for persons with disabilities (such centers are considered to have a wealth of information) in parallel led to high scale scores for each item. Conversely, average scale scores tended to decrease when a Type B (non-contracted work) continuous employment support program, which is not predicated on an employment contract, was offered in parallel. The extent of a user's disability and factors such as regional differences must be taken into account, but a Type B (non-contracted work) continuous employment support program.

cannot readily coexist with a program that has an employment transition to open employment as its goal.

Given these facts, construction of regional networks and sharing of information will lead to improvements in average scale scores on the fidelity scale. In addition, parallel programs differ in effectiveness depending on their nature but can be considered effective when predicated on employment transition. Whether or not personnel assignment criteria as stipulated by laws and ordinances are appropriate must also be reexamined.

Formulation and assessment approaches using the Nationwide Survey of Support Providers

This study used the Nationwide Survey of Support Providers to examine examples of model formulation and assessment approaches based on the example of the employment transition support program for persons with disabilities. This survey allowed the validity of an effective model of program implementation to be ascertained and it allowed the current status of the aforementioned program to be ascertained. In particular, this survey indicated that an effective model of program implementation will help to improve the employment transition rate, which is a major issue with the program, and this survey allowed the closer examination of program orientation with an eye towards specific improvements. As a result of analyzing changes in average scores on the fidelity scale by individual efforts, the effects of those efforts on program implementation can be measured. Thus, measuring a program's effects using a fidelity scale can also be used to verify models of effective implementation of other programs.

There were other anticipated benefits of conducting the Nationwide Survey of Support Providers. These were that the Nationwide Survey of Support Providers allowed many program implementers to determine an effective model of program implementation and that the survey provided an opportunity for program implementers to reaffirm their own practices, e.g. pros and cons of the models of effective implementation. Survey responses took some time but represented less of a burden to sites of program implementation in comparison to observation of other sites of program implementation or participation in training workshops. Thus, the survey was particularly effective for Support Providers with substantial time constraints. Another major benefit was the ability to provide research results to Support Providers throughout the country as a result of their completion of the survey form. The survey form featured a number of research results, allowing the systematic provision of information. A benefit for researchers was the fact that responses from numerous program implementers facilitated the obtaining of information needed to restructure this effective model of program implementation. Program assessment requires collaboration with program implementers, so increasing the exchange of information between program implementers and researchers is crucial.

4. Topics for the future

As indicated, methods of model formulation and assessment using the Nationwide Survey of Support Providers are effective, but several issues remain at this point. First is the process by which an effective model of program implementation is constructed. The effective model of program implementation used in this study was originally devised based on theories of program assessment and has been revised in conjunction with program implementers. This study began by using an effective model of program implementation that had already been constructed, but cooperation by numerous program implementers and researchers was needed to construct this model. The model had to be constructed using appropriate techniques and studied repeatedly in order for the Nationwide Survey of Support Providers to be effective. The current model represents the fruits of about 2 years of research and it proved effective. Second is the difficulty of applying the model to programs that do not have a consistent format. As an example, support systems and intended users may change when systems are run by prefectural and city governments and municipalities even if programs are pursuant to the same laws and ordinances. This issue can be overcome by adequately determining the evaluability of a program beforehand. Third is the difficulty of applying the current technique to programs that are highly unique and rooted in the community. In such instances, efforts in the community must be assessed by assembling case studies. Fourth, there was no weighting by item or ingredient in the Implementation Survey conducted in this study; the inability to emphasize particularly important forms of support is an issue worthy of note. However, the current survey content has been improved through the development of a fidelity scale with weighting⁴). Fifth and last are the budgetary constraints on all research. In some instances a survey of all support providers nationwide would be difficult. Carefully scrutinizing prerequisites in terms of the region, program scale, and the like will allow effective model formulation and assessment even on a small scale, and the same technique can be used to resolve Issues 2 and 3.

V. Conclusion

Results of the Nationwide Survey of Support Providers conducted in this study were closely examined, and methods of improving those results were studied. Results indicated that the Nationwide Survey of Support Providers is an effective approach to construction of an effective model of program implementation. In addition, the Nationwide Survey of Support Providers was also effective as a means of promulgating or sharing research results. Some issues remain at this point, but all of these issues can be remedied. Several have already been remedied and revised to take advantage of the lessons learned.

Collaboration with a greater number of program implementers is required to improve the accuracy of this research. When there are various constraints, however, opportunities must be provided for program implementers and researchers to disseminate information. The Nationwide Survey of Support Providers was effective a means of accurately ascertaining current conditions at a range of sites of program implementation and the survey will allow the construction of better program models.

This study was conducted with a 2008 research grant for joint research at the Japan College of Social Work. In addition, an effective program model of the employment transition support program for persons with disabilities was constructed by our research group on the basis of a Ministry of Education, Culture, Sports, Science, and Technology Research Grant for Basic Research (A) (Topic No. 19203029) (Principal Investigator: Iwao Oshima) and served as the basis for the Survey on Implementation of Critical Program

Ingredients in this study. The authors wish to express their thanks to all of the Support Providers who responded to the surveys for their numerous notes and encouragement.

Note

- 1) Koukanoagaru-Syurouikoushien-Program-no-Arikata-kenkyukai(2009)
- 2) Oshima, I., et al. (2010). kosaza, N., Oshima, I., Domyo, A., et al. (2010)
- 3) Koukanoagaru-Syurouikoushien-Program-no-Arikata-kenkyukai(2009)
- 4) Koukanoagaru-Seishinsyogaisyataiinsokushienjigyo-Syurouikoushienjigyo-Monitoring-System-nokaihatsukenkyukai(2010)

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