In recent years there has been a virtual explosion of information published in the health and human service area. Vocational rehabilitation has been no different. There are scores and scores of articles, chapters and books published every year and this does not even begin to count the hundreds of papers presented at state, local, and national conferences, as well as abstracts, etc. Much of this research, of course, is not research, but instead one person's view or thoughts on a given topic. But true research, that is, the uncovering of new information and postulating new ideas or applications from this information is considerably less available in the vocational rehabilitation field.

There are many types of research that can be of value. For example, we see too little of controlled single subject study research. While there have been a plethora of case studies published over the years in rehabilitation, there have been relatively few controlled single subject studies where the individual with the disability is their own control. The use of multi-element designs, multiple baseline designs, and reversal designs need to have a higher profile in the field of rehabilitation given the high level of application that our field is about. For example, retraining persons with traumatic brain injury on memory sequences, or helping individuals with spinal cord injury take care of pressure sores or helping persons with autism learn to communicate better — these are all good illustrations of problem areas that could be subjected to single subject design and outcome evaluation.

Another type of research is good quality survey design. There are probably far too many papers published based on simple mail-out surveys that bring back a low return rate and then often outrageous generalizations are drawn from this information. However, the use of a high quality survey instrument that targets specific information from a reasonable sample size of respondents and with a good return can be a highly valuable way to procure necessary information. There are many community agencies, families, businesses, and other organization entities, including persons with disabilities that can provide a great deal of information about what happens in rehabilitation that is good and not good. The survey format is one way to glean this information and should be utilized with an understanding of what the benefits as well as limitations are.

Another form of useful research is retrospective analysis of charts, policy instruments, patient folders, client records, state agency computer tapes, etc. While this is a highly static form of analysis, at the same time, it can be a very useful way to aggregate large numbers for understanding trends that may be occurring in certain populations. This can be a very useful tool for a short-term analysis such as trying to discover the number of persons with spinal cord injury (SCI) who also have a tumor associated with SCI. On the other hand, one could look at the state employment agency records of hundreds and even thousands of rehabilitative persons with disabilities and track their earnings over a period of years, thus providing possible clues as to the efficacy of different approaches.

There are other more traditional forms of research as well with the classic randomized double controlled designs and also the more rigorous double blinded studies. Clearly, when appropriate
these are highly desirable studies which are absolutely essential for determining the relationship between an independent variable which are absolutely necessary for evaluating cause effect relationships between variables.

All of the above topics and the many other ways of providing research analysis still only point to the fact that if the research is not utilized by appropriate end users, then it has limited value. It is incumbent upon those who do research to always question the timeliness and relevance of the study and this is especially true in a very applied field such as vocational rehabilitation.

For example, topics selected for research should be able to be justified by a significant policy need, treatment need, instructional need, diagnostic need, or any other critical function that would help persons with disabilities improve the quality of their lives. If we use this as a standard, how many papers that have been published, how many studies that have been undertaken, how many survey forms that have been completed, would meet such a standard? What we need to have is information that makes it easier to empower persons with disabilities as well as those people who are in a position to help them directly.

Therefore when one looks at the idea of research utilization, thinking about the type of research methodology is only part of the puzzle. Perhaps the more critical question to ask is what will we do with these findings? What is the value of the data to be collected? Who will use this information? If these questions cannot be readily answered and defended, then it may be that the research in question should not be undertaken.

In conclusion, there are so many unmet needs that persons with disabilities experience. There are so many questions left unanswered about the best way to help people become more independent in the workplace community and at home. Researchers must spend a greater amount of their time thinking about how to answer those questions. Yes, it is very difficult at times to create valid and reliable research methodologies that will answer these questions of application in the home community and workplace, but these issues are the ones that are closest to the end users of the research, i.e. persons with disabilities, and the ultimate Litmus test must be, did my research make a difference in the lives of persons with disabilities?

I would challenge all writers, present company included, to look hard at their own published work and apply it against that standard.

Paul Wehman, Editor