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# Overcoming Barriers to Employment: Strategies of Rehabilitation Providers

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**Abstract:** Focus groups of rehabilitation providers identified barriers to the employment of persons who are visually impaired and strategies to overcome them. The barriers included negative attitudes of employers and of persons with visual impairments, inadequate transportation, the lack of access to print, and administrative issues. Strategies for overcoming each barrier are discussed.

When the employment rate among persons who are visually impaired (that is, those who are blind or have low vision) is found to be unacceptably low, administrators, policy makers, and others often turn a critical eye toward rehabilitation practitioners, the professionals who are charged with assisting persons with disabilities to obtain jobs. What barriers to the employment of persons who are visually impaired do rehabilitation providers need to overcome to increase the rates of competitive employment? What are successful rehabilitation providers doing to overcome these barriers? We conducted a series of focus groups with rehabilitation providers to address these questions because we believe that rehabilitation providers who have been successful in helping consumers obtain competitive employment can provide constructive feedback to colleagues, administrators, and policy makers.

# **Background**

Rehabilitation providers have identified pervasive barriers to achieving competitive employment outcomes for people who are blind or visually impaired. These barriers include negative attitudes toward visual impairment and persons who are visually impaired (Crudden, McBroom, Skinner, & Moore, 1998; Dahl, 1982; Moore & Wolffe, 1997) and transportation issues, which may include orientation and mobility (Crudden et al., 1998; Dahl, 1982; Maxson, McBroom, Crudden, Johnson, & Wolffe, 1997; Moore & Wolffe, 1997). Other reported employment barriers include the lack of job-readiness skills (Dahl, 1982; Link, 1975; Moore & Wolffe, 1997), lack of access to print (Crudden et al., 1998; Dahl, 1982; Maxson et al., 1997), and problems within the rehabilitation system (Link, 1975).

Previous research has identified strategies to address some of the major employment barriers that persons with disabilities confront. Attempts to educate employers (Dahl, 1982) and the general public (Maxson et al., 1997) are strategies that rehabilitation providers typically use to overcome negative attitudes toward visual impairment and visually impaired persons; to overcome this barrier, the rehabilitation provider must have a positive attitude toward placing visually impaired persons in competitive employment (Young, 1996). With regard to the transportation barrier, rehabilitation providers learn about and network with transportation providers and systems (Dahl, 1982). Other researchers have recommended a macrolevel approach--an approach that targets changes in the system for a large number of people with transportation providers and their funding sources (Maxson et al., 1997).

Rehabilitation providers can help clients to improve their skills in a number of ways, including careful assessment (Dahl, 1982; Link, 1975), remedial education, and supported employment (Hopf, 1991). Although barriers to access to print are addressed through the provision of assistive technology, funds for obtaining

this technology may be limited, and consumers must have appropriate training to use the technology effectively. Successful rehabilitation providers seek alternative funding sources to obtain assistive technology (Maxson et al., 1997) and make referrals for training (Dahl, 1982).

Administrative barriers to employment can be difficult for rehabilitation providers. Comprehensive case management, long-term support, and client advocacy (Apter, 1992) have addressed some administrative problems. Greater communication among and within the parties who are involved in the rehabilitation process, improved access to information on employment, and increased resources that are targeted toward job placement and retention can address other administrative barriers (Kirchner, Johnson, & Harkins, 1997). Changing policies and revamping the rehabilitation system have also been suggested as ways to address administrative barriers (Maxson et al., 1997).

Although some studies have examined the rehabilitation provider's perspective on how to overcome employment barriers, more current, in-depth research is needed to increase understanding of these issues. This article reports the results of one such attempt to go directly to rehabilitation providers to determine what they regard as the barriers to employment and their solutions for overcoming these barriers.

# Methodology

#### Focus groups

Focus groups have an established history of use in gathering opinions, exploring topics, discussing experiences (Fontana & Frey, 2000), and determining what people think and why they think it (Connaway, 1996). A focus group is an intensive group interview that is used to collect information; questions are

carefully planned, yet the conduct of the focus group session remains flexible.

Because of the qualitative nature of the data, it is not our intention to generalize the results of the focus group to the population at large. Focus group data contribute to an understanding of the participants' perceptions and attitudes regarding specific issues. Readers can gain additional information and useful insights about specific topics and make their own decisions about whether the suggestions are appropriate for another setting, as is consistent with the concept of transferability (Krueger, 1998, p. 70).

Previous research has used focus groups to explore factors that are related to the evaluation of rehabilitation programs (Race, Hotch, & Packer, 1994). Job placement and the effectiveness of rehabilitation providers in placing visually impaired persons have been addressed in two notable efforts that were conducted with the Oregon Commission for the Blind (Young, 1996) and rehabilitation providers in Illinois (Kirchner et al., 1997).

#### **Procedure**

Focus group participants were recruited from a list of rehabilitation providers who preregistered for a national conference on the employment of persons who are visually impaired. Each participant was contacted by telephone, and the 18 persons who were willing to participate were given their choice of two time slots. In addition, 25 rehabilitation providers from the Mississippi Department of Rehabilitation Services, Office of Vocational Rehabilitation for the Blind, participated in two other focus groups. Thus, a total of 43 individuals participated in the study.

Each participant was read and asked to sign a statement of informed consent that was consistent with procedures that were

approved by a university institutional review board for the protection of human subjects. Each participant completed a brief form on which he or she provided demographic information. After a welcome, introductions, and a brief description of how the group would be conducted and the problem to be addressed, the participants were asked, as a group, a series of questions: (1) "What is one of the major barriers to employment for persons who are blind?" (2) "What methods have you seen that are successful in overcoming barriers to employers' attitudes?" (3) "What methods have you seen used successfully to overcome the transportation barrier to employment?" and (4) "What methods have you observed that are successful in assisting persons to overcome this barrier [print access] to employment?" Before the sessions ended, the participants were asked to provide any additional comments on overcoming employment barriers. Given the fluid nature of a focus group, items were not always addressed in the same order, nor was the same amount of time devoted to each question within or among the groups. The sessions lasted approximately 1 1/2 hours and were audiotaped. Transcripts of the audiotapes were analyzed using the methods described by Krueger (1998) and Stewart and Shamdasani (1990).

## **Results**

#### **Subjects**

Of the 43 participants, 30 (70%) were female and 13 (30%) were male. The participants' level of education ranged from 15 years to 18 or more years (M = 17 years, SD = 1.1). All the participants were currently employed, with a mean length of employment of more than 10 years (M = 10.1, SD = 8.4). The participants were employed in public rehabilitation agencies for persons who are visually impaired (86%, n = 37), general public rehabilitation agencies (4.7%, n = 2), a private agency for visually impaired people (2.3%, n = 1), public education (2.3%, n = 1), private

education (2.3%, n = 1), and another private agency (2.3%, n = 1). They identified themselves as rehabilitation counselors (58%, n = 25), rehabilitation teachers (18.6%, n = 8), job specialists (9%, n = 4), other (7%, n = 3), rehabilitation supervisors (4.7%, n = 2), and counselor/teacher (2.3%, n = 1). The majority of the participants (n = 36, 84%) did not have a disability; of the 7 (13%) who did, 6 had a visual impairment. The participants were employed in the rehabilitation field from less than 1 year to 32 years (M = 10 years). Of the 18 participants from the national conference, the mean length of employment was 11 years (SD = 8.6), compared to 10 years (SD = 8.4) for the 25 Mississippi participants (see Table 1).

# **Barriers to employment**

The participants' responses were consistent with consumers' sentiments (Crudden et al., 1998) in identifying employers' attitudes, transportation, and access to print as major barriers to employment for persons who are visually impaired. In addition to the lack of information about visual impairment, adaptive techniques, and assistive technology, the participants believed that employers fear blindness. Their comments included: "Attitudinal barriers are fundamental...people are scared to death of going blind," "Employers are fearful and ignorant about what a person with a visual impairment can do," and "It comes more from their lack of understanding and their fear."

The participants reported that transportation, especially in rural areas, is a major problem, as it is for those with limited mobility skills. The technology that is used to address barriers to print access can create additional barriers, such as changing technology, lack of technical support, the incompatibility of systems, delays in acquiring equipment, and lack of high-quality training programs in assistive technology.

Administrative barriers were also cited. The participants reported being restricted by their choice of vendors, time constraints, poor communication, inefficient and inflexible use of time and the workforce, poor coordination of services, and lack of high-quality training programs for consumers. One provider stated, "It's like we are working on separate sides of the wall. We need more interagency communication, more coordination of services, [and] proper training programs." Another participant said, "I don't know that I am giving enough time to [placement] because of being stretched so thin."

In addition, the participants expressed concern that consumers who are newly visually impaired are pressured to return to work before they are comfortable with adaptive techniques or have made the psychological adjustment to their visual impairment. Assisting consumers who do not have adequate job skills was another problem. One provider commented, "I am receiving referrals with no job skills--[people] who are not job-ready; they have not adjusted to what has happened to them."

Still another concern was consumers who lack braille literacy and adaptive skills. Consumers who lack self-confidence or are fearful of losing their benefits (such as Supplemental Security Income or Social Security Disability Insurance) are difficult to move into competitive employment. The participants voiced particular concern about consumers who are well educated and unwilling to take entry-level jobs, but lack the adaptive skills, emotional adjustment to visual impairment, or technology training to make them competitive in the labor force. As one participant noted, "[For] people [who] are referred to me who are not really jobready, my main barrier is to try to get [them] to the level they need to be at before they start competitive employment."

### **Overcoming employment barriers**

#### Attitudes

Solutions to overcoming the attitudinal barriers to employment fell in two broad categories: those that were directed toward educating employers about visual impairment and how it affects functioning and those that were directed toward increasing contact between employers and persons who are visually impaired. There was some overlap in these techniques. When employers are extremely resistant, the rehabilitation providers recommended nonthreatening methods, such as videotapes, portfolios, or meetings in which a provider introduces a group of employers to the concept of employing visually impaired persons. As two participants put it, "We have testimonials, newspaper articles, a list of referrals; we tell employers [that] an entire agency backs this employee" and "We do whatever it takes until people feel comfortable around a blind person. It is a step-by-step process." Another strategy was this: "[The consultants each do] 10 presentations a month in which they go through the whole process [and the benefits] of hiring a blind person."

Offering training about the Americans with Disabilities Act or educating employers about how visual impairment may have an impact on an aging workforce provides some rehabilitation counselors with entrée to employers. A participant stated, "[We] let [the employers] know we can help them keep their valued employees." Delivering skills training to consumers in public areas that are visible to employers increases employers' awareness of blindness, assistive technology, and adaptive skills and techniques. As one participant reported, "We set up in day care centers, churches, libraries, [or] a business with a conference room; we have community education days."

The participants found that providing education to groups of employers is an effective strategy. An example of one such strategy was this: I have employer conferences....I send out a thousand invitations to employers.... I do follow-up phone calls. We have technology displays, speakers, funding sources for equipment, every resource we can tap.... Schools help me....We pass out cards, literature, information. Safety is always the big deal. It worked out real well.

Educational activities are particularly targeted for October because it is National Disability Awareness Month.

After they gain some familiarity with blindness and low vision, employers are sometimes more interested in talking to others who employ persons who are visually impaired or taking tours of businesses that employ visually impaired persons. Employer mentoring programs and breakfast meetings are effective strategies in this regard. The development of long-term relationships with employers, particularly those with large businesses, was recommended. As their relationships with the employers developed, the participants expanded their educational efforts to the staff. As one participant commented, "We do sensitivity awareness throughout management; we cater it to their [availability]...we break down some of these barriers."

The participants noted that employers are encouraged to visit job sites where persons who are visually impaired are working and to talk with these employees. Consumer groups can be helpful in facilitating contacts between employers and visually impaired persons who are employed. A participant suggested, "Get competent blind people on the job and publicize it every way we can;...enlist consumer organizations."

Employers with no experience hiring persons who are visually impaired are sometimes more willing to make their first job offer to a person who is seeking summer or temporary employment. On-the-job training programs and job coaches were strongly recommended to promote positive integration into the workplace. As one participant reported, "I use temporary placement that does

not commit the employer to the consumer--it appears less stressful on the employer. If it doesn't work, the employer is not obligated. But, more times than not, it works out without stress for the employer." Because it is imperative that these first experiences are positive, the rehabilitation provider must be sure that the placement fits the abilities and needs of the consumer and the employer. One participant told how this issue is addressed: "No one goes to an interview at any of my companies until I screen him or her first.... There are very specific guidelines to make sure that [the person is] ready."

The participants encouraged consumers to volunteer information on how they perform specific activities and their transportation options. One provider remarked, "That issue of answering the unasked question is very, very important.... What the employer is imagining is so much worse than anything [a visually impaired job applicant] could possibly be that [applicants] need to address [employers' fears].... Bring your tools and show how you use them." Another provider stated, "If you go into a job interview, and you do not discuss your blindness, you have not had a job interview." The participants also educated employers about technology issues, as reflected in this remark: "Our computer specialist goes to an employer and demonstrates equipment at the job site, shows how it works. Most employers are fascinated."

The participants preferred to meet their clients at the initial interview site, rather than either to arrive with the consumer or have the consumer go alone. The importance of doing so was illustrated by one participant as follows: "The consumers must walk in by themselves. I'll come later if necessary.... It is important [for applicants] to show the employers independence because [dependence] is what they fear." In addition, having appropriate equipment available and the consumer properly trained in its use prior to the date of employment is vital to successful placement. Lost time because of equipment problems

must be minimized. "The employer has a job that has to be done; we must get there quickly and get it accessible," one participant said.

The participants recognized that the placement process is difficult and stressful for clients and noted that consumers who maintain a sense of humor and put employers at ease reduce employers' fears and concerns. Throughout this process, the rehabilitation provider must be a resource and support system for the consumer and the employer. A participant commented, "It is important for the consumer to work with the rehabilitation counselor--that they both understand the qualifications or skills that are necessary to perform the essential functions of the job."

#### **Transportation**

Strategies to overcome transportation barriers can also be grouped into two broad areas: those that are directed toward changing the system and those that target specific consumers. The providers advocated paying the consumer's transportation expenses for at least 60 days after the consumers are employed.

Consumer-specific strategies include relocation and networking with co-workers and community agencies to hire drivers. A succinct comment from a participant regarding relocation was this: "Live in town if you want to go to work." In regard to networking, the comments included, "Car pool, meet somebody, post [messages on] bulletin boards, run an ad in the newspaper" and "try to find somebody within your community or your area of the county and work out something." A participant described a successful networking strategy this way: "In each community, we try to find a cadre of retired folk and use fee for service. If they are driving, I pay them directly." As a consumer proceeds through the rehabilitation program, the provider transfers responsibility for paying the driver to the consumer, while still providing funds.

Efforts to change the public transportation system included involving the employer in advocating for the creation, modification, or expansion of transportation programs. One participant put it this way: "We need to get more active politically in transportation.... We need to get more involved. We can start at the grassroots level." The participants found that employers have more success getting attention and action from community leaders. As one participant said, "If employers go to the transportation systems and say 'we need changes,' and enough of them do that, the systems begin to change."

The use of funds from grants to initiate transportation programs was found to be helpful. A success story in that regard was this: "We got a grant for vans and set them up throughout the state, and we provide transportation for 60 days after the client goes to work." One participant suggested contacting Lions' Club International for a grant and assistance in writing the application. Some participants helped consumers with other disabilities to become self-employed providers of transportation, as in the following account: "Our agency did a self-employment plan with a person who has a small transportation company, and we funnel a lot of business to her." Some providers have negotiated voucher systems with taxi companies, so consumers pay reduced fees.

The participants noted that private transportation systems that are used by other businesses, such as child care centers, were also used for transportation to and from the workplace. An example of such a negotiation was this:

One of my clients had a son with a business hauling kids for day care centers. I called him and asked about driving blind people. It worked real well because he brings the kids to day care, school--that kind of thing--and then people going to and from work.

#### Access to print

The interface between the consumer's assistive technology and the employer's computer system is an important part of resolving barriers to print access. Some participants said that they have access to an agency technology specialist who can visit the workplace and assist in this process, while others noted that they hire technical consultants or use the employer's own technology specialist. Different strategies appeared to be more helpful or less helpful to various participants. For example, one participant stated, "I've done better hiring the employer's technology specialist who works for the company than using our adaptive technology specialist. There is more confidence--the person works for the company [and] knows the equipment." Another participant remarked, "I have the employer's person work with our adaptive technology specialist; I don't send our assistive technology person to work out the bugs or problems." In response to these remarks, another participant said, "Our experience is just the opposite; we have a technology specialist, and all he does is go out to employers."

Various parties work with the consumers to make sure that they are prepared for the job tasks and to provide additional training when needed. One strategy for this training is to establish a "feefor-service [arrangement] for a person to bring adaptive equipment and teach software applications to consumers either prior to getting the job or once they get the job. We go into a company and teach on the job." Consumers are typically paid through on-the-job training funds until the equipment is totally functional and the consumers have mastered new work skills.

#### Administrative barriers

Open communication among all parties was noted as the most important aspect in resolving administrative barriers.

Rehabilitation providers need requirements for paperwork to be as streamlined as possible to allow them to spend more time with

consumers and to engage in job development and placement activities. The importance of competitive employment outcomes must be stressed throughout the agency.

Providers also benefit from networking with each other and sharing their experiences. Some typical remarks on this issue included, "This is the first time I've been to a conference like this," "I find it interesting to share ideas," "It's encouraging to know I'm not the only one who has these problems," and "I'd like to see us exchange ideas and work closer together because we all have the same goal." Another participant stated, "You get into a funk sometimes;...the barrier is then yourself and your own energy level and attitude. Something like this [conference] is a shot in the arm."

#### Consumer barriers

Successful placement also depends on whether the consumer fully understands how working will have a positive impact on his or her financial and benefit status and makes a decision that it is worthwhile to engage in employment. Job clubs are helpful in promoting appropriate work behavior and increasing knowledge about employment options. Peer support can be a powerful force in assisting consumers through the training and employment process.

Consumers must be competent in discussing their skills, qualifications, and visual impairment with employers. High-quality training in adaptive skills and assistive technology are vital aspects of preparation for employment. Some consumers may need a transitional period to full-time employment during which they engage in volunteer work, part-time work, or on-the-job training. Some consumers engage concurrently in training and employment.

#### **Discussion**

Focus groups of rehabilitation providers identified barriers to employment that are encountered by persons who are visually impaired and offered strategies to overcome them. Readers must determine the feasibility of implementing these strategies within their own service delivery systems.

The participants in these focus groups relied on a number of strategies to promote competitive employment outcomes for visually impaired consumers. Many of the strategies are familiar to persons who are experienced in job placement activities, while others are more innovative. Education and increased exposure to and contact with persons who are visually impaired were frequently used to address attitudinal barriers to employment. These efforts were indirect when employers appeared fearful or hesitant and became more direct as the employers became more comfortable and interested in how a person who is visually impaired could work at their companies.

Strategies that were used to overcome transportation barriers ranged from those that targeted one client at a time, such as relocation or developing a network of volunteer drivers, to efforts to change the system that strive to improve transportation for multiple clients. These systemwide techniques included such strategies as obtaining funds from grants and assisting clients who can drive to become self-employed providers of transportation.

To resolve barriers to access to print, the participants used their agencies' technology personnel, vendors, consultants, and the employers' technology specialists to facilitate an interface between assistive technology and the employers' information systems. The importance of giving clients the opportunity to engage in high-quality training programs was also emphasized. Administrative barriers were combatted with greater efforts to

communicate with all parties, to reduce unnecessary or duplicative paperwork, and to focus on competitive employment outcomes. The importance of peer support for persons who are seeking employment was a primary strategy in overcoming consumer barriers to employment.

When strategies were unsuccessful, these providers revised them or attempted to find alternative solutions, such as developing networks among employers and other professionals to facilitate placements. They were persistent and dedicated in their attempts to assist consumers with job placement and found it helpful to develop long-term relationships within the community.

The participants who considered themselves successful were passionate about their work and committed to facilitating competitive employment for visually impaired persons. They persevered in this effort despite setbacks and what some perceived as the lack of support by their agencies. These providers were enthusiastic at the focus groups and expressed an interest in maintaining this dialogue so they could continue to learn from each other and to get much-needed positive feedback and encouragement from their peers. This finding illustrated both the importance of professional peer support for rehabilitation professionals and the need to identify and disseminate effective placement strategies.

Additional research on employment barriers that are encountered by persons who are visually impaired is indicated. Determining the most effective means of educating employers to reduce attitudinal barriers would be helpful in improving efforts and directing resources toward addressing this barrier. Transportation barriers appear to be more difficult to address, particularly since the extent of the problem is not known. Determining how many people are unable to work because they do not have access to transportation and what transportation options would be most

helpful in assisting them is one avenue that should be explored in searching for solutions to the transportation barrier.

The impact of assistive technology, particularly its influence on facilitating access to print, is another area of potential research. Identifying the aspects of superior assistive technology training programs would be helpful to consumers who need such training and to administrators who plan, develop, and operate such programs. Research to determine methods for streamlining paperwork and emphasizing competitive employment goals would assist administrators in focusing rehabilitation providers' job duties on finding employment for visually impaired consumers.

#### References

Apter, D. (1992). A successful competitive/supported employment program for people with severe visual disabilities. *Journal of Vocational Rehabilitation*, 2(1), 21-27.

Connaway, L. S. (1996). Focus group interviews: A data collection methodology for decision making. *Library Administration & Management*, 10, 231-239.

Crudden, A., McBroom, L. W., Skinner, A., & Moore, J. E. (1998). *Comprehensive examination of barriers to employment among persons who are blind or visually impaired*. Mississippi State: Rehabilitation Research and Training Center on Blindness and Low Vision, Mississippi State University.

Dahl, P. R. (1982). Maximizing vocational opportunities for handicapped clients. *Vocational Guidance Quarterly*, *31*(1), 43-52.

Fontana, A., & Frey, J. H. (2000). The interview: From

structured questions to negotiated text. In N. K. Denzin & U. S. Lincoln (Eds.), *Handbook of qualitative research* (2nd ed., pp. 645-672). Thousand Oaks, CA: Sage.

Hopf, A. G. (1991). Placement decision dilemmas and solutions. *Journal of Visual Impairment & Blindness*, 85, 268-269.

Kirchner, C., Johnson, G., & Harkins, D. (1997). Research to improve vocational rehabilitation: Employment barriers and strategies for clients who are blind or visually impaired. *Journal of Visual Impairment & Blindness*, 91, 377-392.

Krueger, R. A. (1998). *Analyzing and reporting focus group results*. Thousand Oaks, CA: Sage.

Link, H. J. (1975). Placement and employment of the visually impaired: State of the art and identification of unmet needs. *New Outlook for the Blind*, 69, 320-324.

Maxson, J., McBroom, L. W., Crudden, A., Johnson, G., & Wolffe, K. (1997). A strategy to improve employment outcomes for persons who are blind or visually impaired. In F. Menz, J. Eggers, P. Wehman, & V. Brooke (Eds.), *Lessons for improving employment of people with disabilities from vocational rehabilitation research* (pp. 363-373). Menomonie, WI: Rehabilitation Research and Training Center, Stout Vocational Rehabilitation Institute, University of Wisconsin-Stout.

Moore, J. E., & Wolffe, K. E. (1997). Employment considerations for adults with low vision. In A. Corn & A. Koenig (Eds.), *Foundations of low vision: Clinical and functional perspectives* (pp. 340-362). New York: American Foundation for the Blind.

Race, K. E., Hotch, D. F., & Packer, T. (1994). Rehabilitation

program evaluation: Use of focus groups to empower clients. *Evaluation Review*, 18, 730-740.

Stewart, D. W., & Shamdasani, P. N. (1990). Focus groups: Theory and practice. Newbury Park, CA: Sage.

Young, C. (1996). How successful vocational rehabilitation counselors place clients in jobs: Results of a focus group. *Journal of Visual Impairment & Blindness*, 90(2), 1-5.

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