**2024**

**State of Maine**

**Comprehensive Statewide Needs Assessment**

**Maine Division for the Blind and Visually Impaired**

**(DBVI)**

#

# **INTRODUCTION AND PURPOSE**

The Maine Division for the Blind and Visually Impaired (DBVI) assists eligible individuals with disabilities to prepare for, achieve, and retain employment in integrated community settings. DBVI administers the Vocational Rehabilitation program in Maine for the Rehabilitation Services Administration (RSA) specifically for Maine citizens that are blind or visually impaired. A separate program is available to individuals who have other significant, but more general disabilities, through the Maine Division of Vocational Rehabilitation (DVR). This comprehensive needs assessment focuses on the Vocational Rehabilitation program for those that are blind and visually impaired and on the needs of individuals eligible for those services.

The assessment is designed to answer important questions about the population eligible for DBVI services living in Maine and their vocational rehabilitation needs. Information gathered for the assessment will guide DBVI in its strategic plan and goal development for the 2024-2027 state plan. Specifically, the report responds to federal regulations (34 CFR 361.29) requiring Maine’s Division for the Blind and Visually Impaired (DBVI) to jointly conduct a “comprehensive statewide assessment” with the State Rehabilitation Council (SRC) every three years that describes the rehabilitation needs of individuals with disabilities residing within the State, particularly the vocational rehabilitation needs of:

- Individuals with the most significant disabilities, including their need for supported employment;

**-** Individuals with disabilities who are minorities and individuals with disabilities who have been unserved or underserved by the vocational rehabilitation program;

**-** Individuals with disabilities served through other components of the statewide workforce development system; and

**-** Youth with disabilities, and students with disabilities, including their need for pre-employment transition services or other transition services.

Additionally, DBVI is required to include an assessment of the need to establish, develop, or improve community rehabilitation programs within the State.

To address these requirements, Maine DBVI relies on a variety of publicly available sources, including survey information from the United States Census Bureau’s American Community Survey and data from the Rehabilitation Services Administration and the Social Security Administration. Maine DBVI gathered information from the Maine Departments of Labor, Education, and Health and Human Services, as well as numerous stakeholder groups, including people with visual disabilities, employers, and DBVI staff members.

## **Description of Division for the Blind and Visually Impaired and the Vocational Rehabilitation Process**

The Division for the Blind and Visually Impaired (DBVI) is an agency within the Bureau of Rehabilitation Services (BRS) located within the Maine Department of Labor (MDOL). The mission of BRS is to provide full access to employment, independence and community integration for people with disabilities.

DBVI provides services that are governed by the federal Rehabilitation Act of 1973, as amended in the Workforce Innovation and Opportunity Act of 2014 (WIOA). The federal statute authorizes services for students with disabilities who are “Potentially Eligible” for VR to receive Pre-Employment Transition Services, which include Job Exploration Counseling; Work-based Learning; Counseling on opportunities for postsecondary education; Workplace readiness training to develop social skills and independent living; and Instruction in self-advocacy, including peer mentoring. A student with a disability is defined as a student between the ages of 14 and the 22nd birthday who is enrolled in an educational program and who is eligible for and receiving special education and related services under Part B of the Individuals with Disabilities Education Act (20 U.S.C. 1411 et seq.); or is an individual with a disability under Section 504.

The Rehabilitation Act further mandates that each applicant entering the publicly funded program follows an individual process from application through eligibility, comprehensive assessment of rehabilitation needs, individual employment plan development, and provision of appropriate services to achieve employment. Any individual with a disability and a commitment to find or maintain employment may apply. Each applicant can expect an eligibility decision within 60 days of application.

An individual is eligible for DBVI services if that person:

* has a visual impairment, which for the individual, constitutes or **results in a substantial impediment to employment** *(Note: Substantial impediment to employment means that the impairment hinders an individual from preparing for, engaging in, or retaining employment consistent with the individual’s abilities and capabilities)*; and
* **requires vocational rehabilitation services to prepare for, secure, retain, or regain employment** consistent with the applicant’s unique strengths, resources, priorities, concerns, abilities, capabilities, interests, and informed choice. Required VR services must be necessary to overcome disability related barriers. Lack of resources by itself does not constitute a disability related barrier.

In addition, there is a **presumption of benefit**. It shall be presumed the individual can benefit in terms of an employment outcome from vocational rehabilitation, unless the DBVI counselor can demonstrate by clear and convincing evidence that such individual is incapable of benefiting from vocational rehabilitation services due to the severity of the disability of the individual. Individuals who receive SSI and/or SSDI are presumed to be eligible for DBVI services.

DBVI uses prescribed titles with definitions which act as a crosswalk to RSA status codes, to track an individual’s progress, as they move through the VR process. This allows both the state agency and federal agency, Rehabilitation Services Administration (RSA), to collect data to ensure timely delivery and fiscal accountability.

Each individual who applies for services has a determination of eligibility and works with a qualified VR counselor and others to identify an employment goal within 90 days of being determined eligible and the appropriate services necessary to achieve that goal. The Individualized Plan for Employment (IPE) may include guidance and counseling, training, education, job search, and job placement among other things. Every applicant coming to DBVI has different abilities, goals, expectations and barriers to employment; therefore, each plan is individualized for each eligible person. The successful conclusion of the VR process is an individual working for a job consistent with his or her capabilities for 90 days with the supposition of continued employment. No person’s path is the same and the process is flexible enough to attend to new barriers as they arise.

By federal statute, any VR program that is unable to provide services to all eligible individuals must implement an Order of Selection, so that individuals with the most significant disabilities receive services first. Under the Order of Selection, eligible individuals are assigned to a priority category based on the severity of their disability and vocational barriers. The highest priority, Category 1, is given to individuals with the most significant visual impairment and highest level of rehabilitation needs. Category 2 is assigned to individuals with visual impairments, but who have fewer functional limitations or less complex rehabilitation needs than those in Category 1. Currently, DBVI is not on a wait list for services and is able to serve those in all categories.

While helping individuals obtain employment is the ultimate success of the VR program, many VR cases are closed each year before the individual achieves and maintains employment for at least 90 days. These closures happen for a variety of causes and can occur at any step in the VR process. Some individuals who apply are found “not eligible” because they do not have a qualifying disability, while others, after being found eligible, leave the VR program for several reasons, including finding employment on their own, having an exacerbation of a chronic condition or their VR counselor is unable to locate them for an extended period. Everyone who applies for VR services has the right to appeal against any decision made by the agency, including the decision to close a case.

Individuals can receive further support through post-employment services after becoming successfully employed, if services are necessary to maintain, regain or advance in employment. This assistance is limited in scope to two or less services and duration of no more than one year. If more comprehensive services are required, and/or there is a new disabling condition, and/or it has been longer than three years since the case was closed successfully, a new application for DBVI services must be completed.

# **State of Maine Demographics**

Population (7/1/2023)- 1,395,722 which is up 33,363 from 2020 and is up 67,361 from 2010. This is a 5% increase in population from 2010, as compared to the United States which had an 8.5% increase in population from 2010 (308,745,538) to 2023 (334,914,895).

Of Maine’s 2023 estimated population stated above, 17.9% is under the age of 18, which is slightly lower than the national average of 21.7%. In contrast, 22.5% of Maine citizens are over the age of 65, which is higher than the national average of 21.7%.

Maine has 50.7% female citizens and 49.3% male citizens.

Maine- Black/African American-2.0% American Indian-0.7% Asian 1.4% Hispanic/Latino 2.1% Caucasian/White 93.9%. In 2022, 94.1% of Maine homes spoke only English, with 5.9% speaking a language other than English.

94.1% of Maine citizens have at least a high school diploma, in relation to the U.S. average of 89.1%. Maine is just slightly below the national average for higher education with 34.1% in Maine and 34.3% nationally.

For people under the age of 65 in Maine, 11.5% state that they have a disability, in contrast to 8.9% across the nation.

Of the total civilian labor workforce, the number aged 16 years and older is 62.0% in Maine and is about on par with the national average of 63.0%.

58.8% of those are females who reside in Maine. Again, this is slightly higher than the national average of 58.5%.

Maine has an average (mean) time of 24.4 minutes to travel to work which is slightly lower than the national average of 26.7 minutes to work.

According to the Maine Department of Labor’s Center for Workforce Research and Information, from 2018-2022, an estimated 16 percent of Maine’s working-age population had one more disability. Thirty-five percent of these individuals were employed, compared to 81 percent of the working-age population without a disability.

Workers with disabilities in Maine are less likely to hold year-round, full-time jobs and tend to earn less than those with no disability. From 2018-2011 median earnings of Maine workers with disabilities were $26,734 in a 12-month period, compared to median earnings of $41,412 among Maine workers with no disability. The earnings gap between Maine and U.S. was more pronounced among earners with disabilities. The median for Maine earners with disabilities was around $2,648 less than the comparable national median, compared to a gap of $1,901 between earners without a disability in Maine and the U.S. Adults with a disability are more likely to live in or near poverty, regardless of work status, and are less likely to have postsecondary education than adults with no disability. In the face of a declining labor force, there is an opportunity for people with disabilities to become employed.

**Blind and Visually Impaired**

The Center for Disease Control and Prevention notes that people with vision loss are more likely to report having depression, diabetes, hearing impairment, stroke, falls, and cognitive decline. Those with vision loss are also more likely to die prematurely.

In addition, vision loss can make it difficult or impossible to drive, read, keep accounts, and navigate new places. These all contribute to a reduced quality of life. As the population of older people increases, the number of people with vision loss increases. In addition, increases in the number of people with diabetes and other chronic conditions that can lead to eye diseases contribute to the increase in vision loss.

Prevent Blindness America estimates that the number of people with blindness and visual impairment will double by 2030 unless actions to prevent and treat eye diseases are taken. Research shows that early detection and treatment can prevent blindness and vision impairment. Screening and treatment for common eye conditions such as diabetic retinopathy, cataracts, and glaucoma are available. However, many people are not screened, diagnosed, or treated.

For example, untreated age-related cataracts are a major cause of blindness among African American people. Glaucoma is also still the number one blinding disease among African American people, even though early detection and treatment can prevent vision loss.

The Disability Statistics website from Cornell University shows that in 2022 the incidence of visual disability in Maine (2.0%) is just slightly lower than for the U.S. (2.5%) and the employment rate in 2022 for people with visual impairments (42.4%) is indicated as lower than the national rate (51.3%). The employment rate of people with visual impairments is up from 28.5% in 2016.

According to the Disability Statistics website from Cornell University of non-institutionalized working-age people (21-64) in Maine with a visual disability:

* 4.4% are not working but are actively looking for work compared to 8.5% nationally and 11.4% of their non-disabled Maine peers.
* 26.6% have full time/full year employment as compared to 36.6% nationally and 64.2% of their non-disabled Maine peers.
* Median annual earnings of $52,100 compared to $46,900 nationally and $55,200 of their non-disabled Maine peers.
* $53,600 is the median annual household income of households including a working-age people with a visual disability as compared to $58,400 nationally and $85,900 for their non-disabled Maine peers.
* 29.1% live in poverty compared to 25.9% nationally and 7.5% of their non-disabled Maine peers.
* 15.6% receive Supplemental Security Income as opposed to 12.9% nationally and 17.4% of their non-disabled Maine peers.
* 36.5% have only a high school diploma as compared to 32.3% nationally and 27.1% of their non-disabled Maine peers.
* 31.0 % have only some college or associate degree as compared to 30.5 nationally and 30.7% of their non-disabled Maine peers.
* 20.3% have a bachelor’s degree or more as compared to 18.1% nationally and 38.3% of their non-disabled Maine peers.
* 92.2% have health insurance coverage as opposed to 87.2% nationally and 89.7% of their non-disabled Maine peers.

Deficits in visual acuity or the visual system can turn the simplest activities of daily living into a challenge, and that is particularly true for people also living with neurologic, cognitive or developmental deficits.

There are an estimated 7.5 million intellectually disabled people living in the United States and nearly 160 million more worldwide. Some estimates suggest that up to 75 percent of intellectually disabled individuals are also affected by some type of vision loss or abnormality. Moreover, ophthalmic impairments that are ordinarily associated with older patients in the general population tend to occur at an earlier age among individuals with intellectual disabilities.

Autism spectrum disorder (ASD) is a lifelong neurodevelopmental disorder characterized by deficits in social communication and restricted, repetitive behaviors. It affects approximately 2.2% of children. Both genetic and environmental risk factors have been identified for ASD. Visual comorbidities are relatively common among children with ASD. Between 20 and 44% of ASD children have visually significant refractive error, one-third have strabismus, and one-fifth have amblyopia. In addition, ASD is 30 times more common in children with congenital blindness.

Looking at students with disabilities served by general VR in Maine, the numbers of students with Autism and Intellectual disabilities continues to grow.

As stated earlier, DBVI provides services that are governed by the federal Rehabilitation Act of 1973, as amended in the Workforce Innovation and Opportunity Act of 2014 (WIOA), to students with a disability between Age 14 – 22nd birthday who are enrolled in an educational program. Below are charts from the Maine Department of Education, depicting students in Maine schools with a Section 504 plan. The chart shows not only those students that DBVI could be working with now but those that will potentially need services as they progress through school. There are currently 8,900 students.

|  |  |
| --- | --- |
| **Grade** | **Section 504** |
| 01 | 157 |
| 02 | 330 |
| 03 | 377 |
| 04 | 533 |
| 05 | 586 |
| 06 | 615 |
| 07 | 832 |
| 08 | 883 |
| 09 | 1008 |
| 10 | 1103 |
| 11 | 1166 |
| 12 | 1259 |
| K | 39 |
| PK | 12 |
| **Grand Total** | **8,900** |

Below, the Department of Education lists special education by disability type and the counties in Maine that have 5 or More Students with a Documented Visual Impairment.

|  |
| --- |
| **Special Education by Disability** |
|  | **2020** | **2021** | **2022** |
|  | **Special ED Count** | **Percent** | **Special ED Count** | **Percent** | **Special ED Count** | **Percent** |
| Autism | 3,513 | 10.77% | 3,578 | 11.18% | 3,813 | 11.68% |
| Deaf-Blindness | 19 | 0.06% | 17 | 0.05% | 21 | 0.06% |
| Developmental Delay | 139 | 0.43% | 156 | 0.49% | 202 | 0.62% |
| Emotional Disturbance | 2,489 | 7.63% | 2,444 | 7.64% | 2,357 | 7.22% |
| Hearing Impairment | 127 | 0.39% | 125 | 0.39% | 127 | 0.39% |
| Intellectual Disability | 899 | 2.76% | 930 | 2.91% | 965 | 2.96% |
| Multiple Disabilities | 3,030 | 9.29% | 2,725 | 8.52% | 2,594 | 7.95% |
| Orthopedic Impairment | 51 | 0.16% | 51 | 0.16% | 49 | 0.15% |
| Other Health Impairment | 7,357 | 22.55% | 7,365 | 23.02% | 7,787 | 23.86% |
| Specific Learning Disability | 9,620 | 29.49% | 9,186 | 28.71% | 9,461 | 28.99% |
| Speech or Language Impairment | 5,285 | 16.20% | 5,324 | 16.64% | 5,181 | 15.87% |
| Traumatic Brain Injury | 51 | 0.16% | 43 | 0.13% | 39 | 0.12% |
| Visual Impairment | 41 | 0.13% | 47 | 0.15% | 45 | 0.14% |

|  |  |  |
| --- | --- | --- |
| County | Disability |   |
| Androscoggin | Visual impairment | \* |
| Aroostook | Visual impairment | \* |
| Cumberland | Visual impairment | 8 |
| Franklin | Visual impairment | \* |
| Hancock | Visual impairment | \* |
| Kennebec | Visual impairment | \* |
| Knox | Visual impairment | \* |
| Lincoln | Visual impairment | \* |
| Oxford | Visual impairment | \* |
| Penobscot | Visual impairment | 5 |
| Sagadahoc | Visual impairment | \* |
| Somerset | Visual impairment | \* |
| York | Visual impairment | 8 |
| Grand Total | Total | 44 |

In addition, the Maine Department of Education also reports the following students receiving special education by gender, age, and disability category.

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| SPECIAL EDUCATION DISABILITY BY GENDER |
|   |   | 2020 | 2021 | 2022 |
|   |   | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT |
| Autism | Female | 687 | 2.11% | 710 | 2.22% | 791 | 2.42% |
| Male | 2,826 | 8.66% | 2,868 | 8.97% | 3,022 | 9.26% |
| Developmental delay | Female | 41 | 0.13% | 48 | 0.15% | 62 | 0.19% |
| Male | 98 | 0.30% | 108 | 0.34% | 140 | 0.43% |
| Emotional disturbance | Female | 861 | 2.64% | 850 | 2.66% | 855 | 2.62% |
| Male | 1,628 | 4.99% | 1,594 | 4.98% | 1,502 | 4.60% |
| Hearing impairment | Female | 49 | 0.15% | 51 | 0.16% | 52 | 0.16% |
| Male | 78 | 0.24% | 74 | 0.23% | 75 | 0.23% |
| Intellectual Disability | Female | 414 | 1.27% | 420 | 1.31% | 430 | 1.32% |
| Male | 485 | 1.49% | 510 | 1.59% | 535 | 1.64% |
| Multiple disabilities | Female | 944 | 2.89% | 845 | 2.64% | 813 | 2.49% |
| Male | 2,086 | 6.39% | 1,880 | 5.88% | 1,781 | 5.46% |
| Orthopedic impairment | Female | 17 | 0.05% | 17 | 0.05% | 18 | 0.06% |
| Male | 34 | 0.10% | 34 | 0.11% | 31 | 0.09% |
| Other health impairment | Female | 2,119 | 6.50% | 2,142 | 6.70% | 2,331 | 7.14% |
| Male | 5,238 | 16.06% | 5,223 | 16.33% | 5,456 | 16.72% |
| Specific learning disability | Female | 4,114 | 12.61% | 3,926 | 12.27% | 4,117 | 12.61% |
| Male | 5,506 | 16.88% | 5,260 | 16.44% | 5,344 | 16.37% |
| Speech or language impairment | Female | 1,988 | 6.09% | 2,008 | 6.28% | 1,934 | 5.93% |
| Male | 3,297 | 10.11% | 3,316 | 10.37% | 3,247 | 9.95% |
| Traumatic brain injury | Female | 21 | 0.06% | 15 | 0.05% | 10 | 0.03% |
| Male | 30 | 0.09% | 28 | 0.09% | 29 | 0.09% |
| Visual impairment | Female | 12 | 0.04% | 13 | 0.04% | 12 | 0.04% |
| Male | 29 | 0.09% | 34 | 0.11% | 33 | 0.10% |

|  |
| --- |
| SPECIAL EDUCATION DISABILITY BY AGE |
|   |   | 2020 | 2021 | 2022 |
|   |   | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT | SPECIAL EDUCATION COUNT | PERCENT |
| Autism | 5 | 239 | 0.73% | 218 | 0.68% | 270 | 0.83% |
| 6 | 278 | 0.85% | 314 | 0.98% | 320 | 0.98% |
| 7 | 276 | 0.85% | 285 | 0.89% | 329 | 1.01% |
| 8 | 247 | 0.76% | 268 | 0.84% | 309 | 0.95% |
| 9 | 275 | 0.84% | 246 | 0.77% | 287 | 0.88% |
| 10 | 242 | 0.74% | 279 | 0.87% | 252 | 0.77% |
| 11 | 256 | 0.78% | 244 | 0.76% | 289 | 0.89% |
| 12 | 283 | 0.87% | 258 | 0.81% | 244 | 0.75% |
| 13 | 289 | 0.89% | 282 | 0.88% | 259 | 0.79% |
| 14 | 236 | 0.72% | 297 | 0.93% | 276 | 0.85% |
| 15 | 271 | 0.83% | 241 | 0.75% | 293 | 0.90% |
| 16 | 233 | 0.71% | 282 | 0.88% | 245 | 0.75% |
| 17 | 240 | 0.74% | 223 | 0.70% | 260 | 0.80% |
| 18 | 106 | 0.32% | 101 | 0.32% | 114 | 0.35% |
| 19 | 33 | 0.10% | \* |   | 37 | 0.11% |
| 20 | 9 | 0.03% | \* |   | 25 | 0.08% |
| Developmental delay | 5 | 110 | 0.34% | 95 | 0.30% | 155 | 0.47% |
| 6 | 29 | 0.09% | 61 | 0.19% | 47 | 0.14% |
| 7 | 0 |   | 0 |   | 0 |   |
| Emotional disturbance | 5 | 20 | 0.06% | 16 | 0.05% | 11 | 0.03% |
| 6 | 57 | 0.17% | 43 | 0.13% | 33 | 0.10% |
| 7 | 93 | 0.29% | 74 | 0.23% | 64 | 0.20% |
| 8 | 146 | 0.45% | 127 | 0.40% | 85 | 0.26% |
| 9 | 164 | 0.50% | 163 | 0.51% | 140 | 0.43% |
| 10 | 225 | 0.69% | 173 | 0.54% | 175 | 0.54% |
| 11 | 210 | 0.64% | 232 | 0.73% | 181 | 0.55% |
| 12 | 197 | 0.60% | 230 | 0.72% | 243 | 0.74% |
| 13 | 253 | 0.78% | 205 | 0.64% | 243 | 0.74% |
| 14 | 250 | 0.77% | 293 | 0.92% | 244 | 0.75% |
| 15 | 274 | 0.84% | 250 | 0.78% | 317 | 0.97% |
| 16 | 286 | 0.88% | 286 | 0.89% | 276 | 0.85% |
| 17 | 208 | 0.64% | 238 | 0.74% | 253 | 0.78% |
| 18 | 87 | 0.27% | 89 | 0.28% | 61 | 0.19% |
| 19 | \* |   | 25 | 0.08% | 23 | 0.07% |
| 20 | \* |   | 0 |   | 8 | 0.02% |
| Hearing impairment | 5 | 5 | 0.02% | 8 | 0.03% | 9 | 0.03% |
| 6 | 12 | 0.04% | 8 | 0.03% | 12 | 0.04% |
| 7 | 16 | 0.05% | 11 | 0.03% | 9 | 0.03% |
| 8 | 15 | 0.05% | 12 | 0.04% | 11 | 0.03% |
| 9 | 17 | 0.05% | 15 | 0.05% | 12 | 0.04% |
| 10 | 7 | 0.02% | 17 | 0.05% | 13 | 0.04% |
| 11 | 13 | 0.04% | 5 | 0.02% | 12 | 0.04% |
| 12 | 8 | 0.02% | 11 | 0.03% | 10 | 0.03% |
| 13 | \* |   | 8 | 0.03% | 11 | 0.03% |
| 14 | \* |   | \* |   | 6 | 0.02% |
| 15 | 5 | 0.02% | 7 | 0.02% | 5 | 0.02% |
| 16 | 7 | 0.02% | 5 | 0.02% | \* |   |
| 17 | \* |   | 8 | 0.03% | \* |   |
| 18 | \* |   | \* |   | \* |   |
| 19 | \* |   | \* |   | 0 |   |
| 20 | 0 |   | 0 |   | \* |   |
| Intellectual Disability | 5 | \* |   | \* |   | \* |   |
| 6 | 34 | 0.10% | 25 | 0.08% | 30 | 0.09% |
| 7 | 37 | 0.11% | 45 | 0.14% | 43 | 0.13% |
| 8 | 63 | 0.19% | 43 | 0.13% | 55 | 0.17% |
| 9 | 50 | 0.15% | 71 | 0.22% | 51 | 0.16% |
| 10 | 70 | 0.21% | 52 | 0.16% | 72 | 0.22% |
| 11 | 57 | 0.17% | 74 | 0.23% | 60 | 0.18% |
| 12 | 85 | 0.26% | 65 | 0.20% | 88 | 0.27% |
| 13 | 78 | 0.24% | 98 | 0.31% | 69 | 0.21% |
| 14 | 86 | 0.26% | 82 | 0.26% | 110 | 0.34% |
| 15 | 82 | 0.25% | 99 | 0.31% | 89 | 0.27% |
| 16 | 82 | 0.25% | 86 | 0.27% | 105 | 0.32% |
| 17 | 62 | 0.19% | 85 | 0.27% | 94 | 0.29% |
| 18 | 74 | 0.23% | 49 | 0.15% | 60 | 0.18% |
| 19 | 23 | 0.07% | 34 | 0.11% | \* |   |
| 20 | \* |   | \* |   | 19 | 0.06% |
| Multiple disabilities | 5 | \* |   | 32 | 0.10% | 45 | 0.14% |
| 6 | 84 | 0.26% | 64 | 0.20% | 64 | 0.20% |
| 7 | 117 | 0.36% | 102 | 0.32% | 92 | 0.28% |
| 8 | 189 | 0.58% | 140 | 0.44% | 138 | 0.42% |
| 9 | 196 | 0.60% | 202 | 0.63% | 170 | 0.52% |
| 10 | 247 | 0.76% | 185 | 0.58% | 203 | 0.62% |
| 11 | 261 | 0.80% | 233 | 0.73% | 212 | 0.65% |
| 12 | 308 | 0.94% | 252 | 0.79% | 236 | 0.72% |
| 13 | 262 | 0.80% | 277 | 0.87% | 256 | 0.78% |
| 14 | 275 | 0.84% | 237 | 0.74% | 270 | 0.83% |
| 15 | 295 | 0.90% | 259 | 0.81% | 224 | 0.69% |
| 16 | 305 | 0.93% | 274 | 0.86% | 235 | 0.72% |
| 17 | 259 | 0.79% | 279 | 0.87% | 238 | 0.73% |
| 18 | 140 | 0.43% | 128 | 0.40% | 130 | 0.40% |
| 19 | 47 | 0.14% | 52 | 0.16% | 51 | 0.16% |
| 20 | \* |   | 9 | 0.03% | 27 | 0.08% |
| Orthopedic impairment | 5 | 6 | 0.02% | \* |   | 5 | 0.02% |
| 6 | 9 | 0.03% | \* |   | \* |   |
| 7 | 5 | 0.02% | 8 | 0.03% | 6 | 0.02% |
| 8 | 10 | 0.03% | 6 | 0.02% | \* |   |
| 9 | \* |   | 7 | 0.02% | 5 | 0.02% |
| 10 | \* |   | 5 | 0.02% | 9 | 0.03% |
| 11 | \* |   | \* |   | \* |   |
| 12 | \* |   | \* |   | \* |   |
| 13 | \* |   | \* |   | \* |   |
| 14 | 0 |   | \* |   | \* |   |
| 15 | \* |   | \* |   | \* |   |
| 16 | \* |   | \* |   | 0 |   |
| 17 | 0 |   | \* |   | \* |   |
| 18 | \* |   | 0 |   | \* |   |
| 19 | 0 |   | 0 |   | 0 |   |
| Other health impairment | 5 | 245 | 0.75% | 248 | 0.78% | 214 | 0.66% |
| 6 | 377 | 1.16% | 356 | 1.11% | 392 | 1.20% |
| 7 | 449 | 1.38% | 438 | 1.37% | 466 | 1.43% |
| 8 | 589 | 1.81% | 514 | 1.61% | 587 | 1.80% |
| 9 | 582 | 1.78% | 616 | 1.93% | 617 | 1.89% |
| 10 | 646 | 1.98% | 616 | 1.93% | 657 | 2.01% |
| 11 | 662 | 2.03% | 651 | 2.03% | 671 | 2.06% |
| 12 | 630 | 1.93% | 657 | 2.05% | 704 | 2.16% |
| 13 | 642 | 1.97% | 646 | 2.02% | 730 | 2.24% |
| 14 | 664 | 2.04% | 647 | 2.02% | 691 | 2.12% |
| 15 | 609 | 1.87% | 656 | 2.05% | 675 | 2.07% |
| 16 | 575 | 1.76% | 591 | 1.85% | 648 | 1.99% |
| 17 | 503 | 1.54% | 533 | 1.67% | 541 | 1.66% |
| 18 | 160 | 0.49% | 173 | 0.54% | 161 | 0.49% |
| 19 | \* |   | \* |   | 24 | 0.07% |
| 20 | \* |   | \* |   | 7 | 0.02% |
| Specific learning disability | 5 | \* |   | \* |   | \* |   |
| 6 | 69 | 0.21% | 40 | 0.13% | 45 | 0.14% |
| 7 | 286 | 0.88% | 171 | 0.53% | 237 | 0.73% |
| 8 | 578 | 1.77% | 431 | 1.35% | 549 | 1.68% |
| 9 | 844 | 2.59% | 724 | 2.26% | 739 | 2.26% |
| 10 | 1025 | 3.14% | 921 | 2.88% | 938 | 2.87% |
| 11 | 1076 | 3.30% | 1058 | 3.31% | 1008 | 3.09% |
| 12 | 1059 | 3.25% | 1053 | 3.29% | 1107 | 3.39% |
| 13 | 1025 | 3.14% | 1055 | 3.30% | 1080 | 3.31% |
| 14 | 969 | 2.97% | 969 | 3.03% | 1018 | 3.12% |
| 15 | 884 | 2.71% | 935 | 2.92% | 909 | 2.78% |
| 16 | 847 | 2.60% | 847 | 2.65% | 845 | 2.59% |
| 17 | 700 | 2.15% | 736 | 2.30% | 724 | 2.22% |
| 18 | 221 | 0.68% | 223 | 0.70% | 224 | 0.69% |
| 19 | 20 | 0.06% | 16 | 0.05% | 24 | 0.07% |
| 20 | \* |   | \* |   | \* |   |
| Speech or language impairment | 5 | 909 | 2.79% | 836 | 2.61% | 821 | 2.52% |
| 6 | 1175 | 3.60% | 1102 | 3.44% | 1076 | 3.30% |
| 7 | 950 | 2.91% | 1043 | 3.26% | 955 | 2.93% |
| 8 | 690 | 2.12% | 705 | 2.20% | 704 | 2.16% |
| 9 | 464 | 1.42% | 469 | 1.47% | 477 | 1.46% |
| 10 | 303 | 0.93% | 371 | 1.16% | 334 | 1.02% |
| 11 | 225 | 0.69% | 240 | 0.75% | 243 | 0.74% |
| 12 | 163 | 0.50% | 168 | 0.53% | 181 | 0.55% |
| 13 | 123 | 0.38% | 116 | 0.36% | 118 | 0.36% |
| 14 | 95 | 0.29% | 88 | 0.28% | 85 | 0.26% |
| 15 | 79 | 0.24% | 69 | 0.22% | 68 | 0.21% |
| 16 | 44 | 0.13% | 56 | 0.18% | 58 | 0.18% |
| 17 | 46 | 0.14% | 39 | 0.12% | 42 | 0.13% |
| 18 | \* |   | 17 | 0.05% | \* |   |
| 19 | \* |   | 5 | 0.02% | \* |   |
| 20 | 0 |   | 0 |   | \* |   |
| Traumatic brain injury | 5 | 0 |   | 0 |   | 0 |   |
| 6 | \* |   | 0 |   | 0 |   |
| 7 | \* |   | \* |   | \* |   |
| 8 | \* |   | \* |   | \* |   |
| 9 | \* |   | \* |   | \* |   |
| 10 | \* |   | \* |   | \* |   |
| 11 | \* |   | \* |   | \* |   |
| 12 | \* |   | \* |   | \* |   |
| 13 | 6 | 0.02% | \* |   | \* |   |
| 14 | \* |   | 8 | 0.03% | \* |   |
| 15 | 5 | 0.02% | \* |   | 7 | 0.02% |
| 16 | \* |   | 5 | 0.02% | \* |   |
| 17 | 15 | 0.05% | \* |   | 6 | 0.02% |
| 18 | \* |   | \* |   | \* |   |
| 19 | \* |   | \* |   | \* |   |
| 20 | 0 |   | 0 |   | \* |   |
| Visual impairment | 5 | \* |   | \* |   | \* |   |
| 6 | \* |   | \* |   | \* |   |
| 7 | \* |   | \* |   | \* |   |
| 8 | \* |   | \* |   | \* |   |
| 9 | 5 | 0.02% | \* |   | \* |   |
| 10 | \* |   | \* |   | \* |   |
| 11 | \* |   | \* |   | 5 | 0.02% |
| 12 | \* |   | \* |   | \* |   |
| 13 | \* |   | \* |   | \* |   |
| 14 | \* |   | \* |   | \* |   |
| 15 | \* |   | \* |   | \* |   |
| 16 | \* |   | \* |   | \* |   |
| 17 | \* |   | \* |   | \* |   |
| 18 | 0 |   | 0 |   | \* |   |
| 19 | 0 |   | 0 |   | \* |   |
| 20 | 0 |   | 0 |   | 0 |   |

**Maine Division for the Blind and Visually Impaired Data from Aware Case Management System for clients served FFY 2021-FFY 2023**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Gender** | **#** | **%** | **#** | **%** | **#** | **%** |
| Does not wish to self-identify | 1 | 0.6% | 2 | 0.9% | 2 | 0.8% |
| Female | 71 | 39.7% | 97 | 44.5% | 119 | 46.1% |
| Male | 106 | 59.2% | 119 | 54.6% | 136 | 52.7% |
| Non-Binary | 1 | 0.6% | 0 | 0.0% | 1 | 0.4% |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Age Group at Application** | **#** | **%** | **#** | **%** | **#** | **%** |
| 13-22 | 61 | 34.1% | 78 | 35.8% | 84 | 32.6% |
| 23-54 | 79 | 44.1% | 96 | 44.0% | 124 | 48.1% |
| 55-65 | 25 | 14.0% | 27 | 12.4% | 27 | 10.5 |
| 66+ | 14 | 7.8% | 17 | 7.8% | 23 | 8.9%  |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Race/Ethnicity** *(Some numbers may be duplicated as some consumers identified more than one race/ethnicity)* | **#** | **%** | **#** | **%** | **#** | **%** |
| White | 169 | 91.8% | 203 | 91.0% | 237 | 89.4% |
| Black or African American | 4 | 2.2% | 7 | 3.1% | 7 | 2.6% |
| Asian | 2 | 1.1% | 5 | 2.2% | 4 | 1.5% |
| Hispanic or Latino | 5 | 2.7% | 6 | 2.7% | 6 | 2.3% |
| Native Hawaiian or Other Pacific Islander | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| American Indian | 4 | 2.2% | 2 | 0.9% | 6 | 2.3% |
| Does Not Wish to Identify | 0 | 0.0% | 0 | 0.0% | 5 | 1.9%1 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Education at Application** | **#** | **%** | **#** | **%** | **#** | **%** |
| Less than HS | 25 | 14.0% | 22 | 10.1% | 21 | 8.1% |
| HS or Equivalent | 13 | 7.3% | 11 | 5.0% | 7 | 2.7% |
| Some College | 4 | 2.2% | 4 | 1.8% | 3 | 1.2% |
| College or More | 5 | 2.8% | 5 | 2.3% | 6 | 2.3% |
| Unknown/Null | 132 | 73.7% | 176 | 80.7% | 221 | 85.7% |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **New Applications** | 45 | 65 | 78 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **New IPE** | 23 | 47 | 51 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **All Closures** | 91 | 95 | 76 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Education at Closure** | **#** | **%** | **#** | **%** | **#** | **%** |
| Less than HS | 1 | 0.6% | 1 | 0.5% | 1 | 0.4% |
| HS or Equivalent | 1 | 0.6% | 0 | 0.0% | 0 | 0.0% |
| Some College | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| College or More | 0 | 0.0% | 0 | 0.0% | 0 | 0.0% |
| Unknown/Null | 177 | 98.9% | 217 | 99.5% | 257 | 99.6% |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Months App to Closure Average** | 36.0 | 30.2 | 31.4 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Work Status at Application** | **#** | **#** | **#** |
| Self-Employed (Not BEP) | 1 | 0 | 0 |
| Not Employed: Student in Secondary Education | 14 | 9 | 10 |
| Not Employed: Other | 14 | 13 | 12 |
| Not Employed: All Other Students | 8 | 11 | 9 |
| Homemaker | 2 | 3 | 2 |
| Employment without Supports in Integrated Setting | 7 | 3 | 3 |
| Employment with Supports in Integrated Setting | 1 | 2 | 1 |
| Business Enterprise Program (BEP) | 0 | 1 | 0 |
|  |
|  | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| **Work Status at Closure** | **#** | **#** | **#** |
| Self-Employed (Except BEP) | 3 | 5 | 4 |
| Competitive Integrated Employment (Except SE) | 20 | 18 | 13 |
| Competitive Integrated Employed (SE) | 3 | 2 | 1 |
| Business Enterprise Program (Randolph-Sheppard) | 0 | 1 | 0 |
|  |
|  |
| **Case Costs by Service Group and Federal Year** | **FFY 2021** | **FFY 2022** | **FFY 2023** |
| Job Development & Placement | $0.00 | $119,994.39 | $139,034.24 |
| College or University Training | $51,572.14 | $21,705.51 | $19,411.00 |
| Assessment | $13,485.89 | $11,794.46 | $27,915.97 |
| On-The-Job Supports | $0.00 | $1,070.00 | $15,308.75 |
| All Other Services | $275,437.08 | $318,167.52 | $476,800.76 |
| Pre-Employment Transition Services | $110,581.36 | $204,978.53 | $167,493.80 |
| Occupational/Vocational & Other Training | $21,834.79 | $6,147.00 | $24,428.02 |
| Hearing Aid | $960.00 | $5,049.25 | $5,797.99 |
| Transportation | $6,386.82 | $5,688.40 | $23,677.01 |
| Rehabilitation Technology | $68,568.21 | $69,054.62 | $109,041.20 |
| Maintenance | $316.21 | $2,129.00 | $2,886.44 |
| Diagnosis & Treatment | $32,878.43 | $24,148.68 | $21,338.11 |
| **Total** | **$537,311.88** | **$789,927.36** | **$1,033,133.29** |

# According to the National Center on Deafblindness’ 2022 National Deafblind Child Count Report, there are 55 Maine children eligible for Deafblind project services.

# **Surveys**

The primary instrument was a survey used to gather input from DBVI staff, contractors, and clients, regarding DBVI services and unmet needs for the blind and visually impaired population in Maine. Surveys were completed by clients via phone calls, or email unless alternative methods were requested. On-line surveys were sent and completed by DBVI staff and contracted partners.

## **Maine Division for the Blind and Visually Impaired Clients**

Survey results will be available June 30, 2024.

## **DBVI Staff Survey**

This survey was sent via Survey Monkey to all DBVI staff located statewide. The survey was sent to staff at DBVI, the Iris Network, and Catholic Charities Maine. From the three agencies, there were 30 responses. The average time it took to complete the survey was 22 minutes.

65% of the responses were from direct service staff, 17% were administrative, 12% were from supervisors, and 4% were from “other”.

Results:

1. Please select your location of service:

Southern Maine: 27%

Coastal Maine: 12%

Central Maine: 30%

Western Maine: 11%

Downeast Maine: 9%

1. What agency do you work for?

The Iris Network: 36%

Catholic Charities Maine: 33%

DBVI: 30%

1. How many years have you worked in the blindness field?

26+ years: 26%

6-15 years: 40%

1-5 years: 16%

Less than 1 year: 6%

1. When do you plan to resign/retire?

More than 10 years: 46%

6-10 years: 10%

1-5 years: 33%

The coming year: 10%

Most questions were open-ended. In the section below, responses were reviewed and summarized, common themes are noted, as well as some direct quotes from responses.

5. Given your experience working with individuals who are blind and visually impaired, do you see any gaps in services that inhibit individuals from meeting their vocational and life goals?

-Assistive technology

-Lack of job placement opportunities

-Lack of transportation in a very rural state

-Adjustment Counseling and social/emotional support for parents/guardians and clients/students

-Public and individual education around ableism, anti-ableism, and societal stigma

-Not enough transitional support from high school to life

-More work on life skills and ECC including training for parents on how to implement it in daily activities.

-Work with families to recognize employment as a goal

-More conversations from VRCs on job development and career exploration/information

-Difficulty finding jobs for those with developmental disabilities/Autism

-Staff shortages

-Length of time for device recommendations, approvals, authorizations

-Lack of Low Vision Eye Doctors

-Hard for all team members in different agencies to know what is going on with other parts of the system

-Long intake process and lack of timely response

-Need more resources for family members who provide support

-More coordination with Career Exploration Workshop

-Not enough funding for the IL program given the aging Maine population

"It could be inspiring/motivating/encouraging to have career/interest exploration groups of clients. Also, beyond benefits counseling, it might be beneficial for them to hear experiences of other clients who have chosen to work, whether at risk of benefit reduction or not. Also, building of technology skills and awareness/access to technology-related resources often seems advantageous."

6. What ideas do you have, that could be done by DBVI and/or our partner agencies, for improving services for individuals who are blind and visually impaired?

-Better communication and collaboration among agencies

-Education to school districts

-Transportation program

-Education about the transition process and help with transition those who are not going to be entering the workforce

-Better staff to client/student ratios

-Increased pay, incentives to hire more qualified staff

-Interest based groups involving children and adults to offer peer interactions for both

-Start working with students at a younger age and introducing more experiences to know what there are for jobs in the world

-Specific blindness training for the agencies

-Recruitment/filling vacancies

-Assistance in processing referrals

-Working with employers to identify jobs for those who are blind and visually impaired with a developmental disability

-More face-to-face and Zoom interactions between VRCs and clients

-Flexibility with schedules, lower caseloads, increased administrative support

-Support NAPVI or establish a program for parents to connect them with each other and mentors who have raised children with visual impairments

-Resource library of websites and materials for regional services

-More outreach to doctors and eye doctors’ offices

-Group classes open to those that are not clients for information and introductory lessons

-Annual list of students for TVIs who are also in VR

-Explore grants/resources for the IL program

-Community based low vision screening outreach program

-Create a “group” service delivery system to meet low vision needs

-Increased legislative advocacy around issues affecting our clients

-Develop/offer trainings around accessibility, anti-ableism, disability inclusion

"Completing tech assessment at the IRIS Network to allow students to know the equipment that is out there. Hands on. Additionally, using handheld magnifiers and connecting them to monitors via HMDI cord. Eliminate old CCTVs or do not fix anymore. Create a flyer of ideas from VRTs for kids to learn things at home regarding organization or how to differentiate items with low tech ideas."

"Perhaps we could have a list of people who would be willing to drive (friends and family of current clients perhaps?) We could maybe pay them for driving people, which could be more cost effective than Uber and taxis depending on the cost. Maybe we could do like a ride share, where people who cannot drive all carpool to work at a specific time, and then do the same thing on the way home. "

7. What specific activities and/or learning would you find valuable for future All Blindness Agency Days?

-Awareness of funding options for equipment

-A chance to see new technology

-More work around ECC and coming up with ideas to incorporate these skills into students’ lives

-More education and understanding of working with clients with autism and adhd

-Personal adjustment resources

-Peer support resources

-Public awareness, education of community members and employers

-Mental health and self-care

-Working with people in unsafe environments

-Discussion of where VRT ends, and AT services start

-Presentation from iCanConnect coordinator for Maine

-Master list of resources

-Examples of what we do daily and how we stretch our time to get everything accomplished

-Information from employers who have hired individuals who are blind and visually impaired

-Team bonding, Bingo

-Derek Cote, blind wrestler at USM, to speak to accommodations and PE

-Time management

"Panel of fearless clients who will honestly answer questions regarding their experience participating in our services."

"I really like time spent with the other disciplines and seeing what is new in their field. Would like to hear from optometrists or opthalmologists about what they see and try to build better relationships with those folks. "

"Learning from experts in the field on issues that are relevant to all of us regardless of which blindness agency we work for. For example, training around CVI/vision and brain injury, working with blind/VI folks with multiple disabilities, blindness and neurodivergence. Training around working with blind/VI individuals with intersectional identities (i.e. QTBIPOC, immigrants and English language learners, etc.)"

8. What do you need to do your job better?

-More TVIs

-More people working in this field

-Transportation for students/clients to attend activities

-More collaboration with the other blind agencies and understanding what everyone provides including spending time with other disciplines

-Positive feedback about the effectiveness of staff work

-More administrative support in order to spend more time on client needs

-More opportunities to brainstorm new programs and approaches to feel more energized about the work

-Client-counselor meetings

-Peer networking

-More access to stock supplies (i.e. white canes)

-Updated technology to demo to clients

-Clear communication as things change and about administrative decisions

9. Please add anything additional you wish to include.

-"I would love to see more blind/VI individuals and/or people with disabilities working at all levels in our agencies. I believe that our agency should reflect the population we serve, not just in direct service but in leadership as well. This helps build trust among our clients/consumers and improves engagement in services. It would be great if we could put some energy/thought into how we can recruit/retain individuals of diverse backgrounds, including but absolutely not limited to disability."

-"There does seem to be challenges with a collaborative approach to supporting shared students between agencies and types of services. Some of which seems to be related to communication, but maybe there are other, cultural aspects involved. From what I understand, it is an historical dynamic that has existed for quite awhile. It would be great to try to shake out some of the wrinkles!"

-"Enlist or seek out companies that will donate vehicles to transport instructors to clients. Many auto dealers will do this if asked."

-"I would love to find more ways to let people know what we do."

-"Some regional/area client/student classes in things like cooking, shopping, home care, etc."

-"The referral process needs to be streamlined. The elder-elder population is waiting too long and their time is short. "

-"There has been a lot of focus on the VR aspect of DBVI in the past number of years. It has felt as though there is not adequate representation in decision making from the direct service personnel."

-"It could be beneficial to identify/address reasons for staff turnover. I think most clients are happy with most of their services! "

-"I feel that despite some communication hurdles, we have a lot of amazing support from DBVI and that is awesome to see!"

# **References**

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