Choices in Transition: A Model for Career Development

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Introduction
This brief describes the Choices in Transition program for low-income ethnic minority youth with disabilities in Chicago. It is well documented that minority youth with disabilities who live in urban areas face numerous obstacles that affect their opportunities for education and employment (Wilson, 1997). Since its inception seven years ago, the Choices in Transition model has been empirically supported in studies of high school students (Taylor-Ritzler et al., 2001), adjudicated youth (Balcazar, Keys, & Garate-Serafini, 1995), high school graduates (Balcazar & Keys, 2000), and dropouts with disabilities (Balcazar & Keys, 1994). The program’s goal is to support participants in the process of transition in order to improve educational and vocational success and to increase self-determination.

The Choices in Transition Model
The transition literature supports several basic program elements that most effectively meet the transition needs of all students with disabilities (Chadsey-Rusch & Rusch, 1996; Cobb & Hasazi, 1987; Collet-Klingen, 1998; Dowdy, 1996). These elements have been incorporated into the Choices in Transition model (see Figure 1 on page 2). This empirically verified model is based on a holistic view of transition that places individual student goals at the center of the program. Its components include:

a) goal-driven case management;

b) an interactive goal-setting, action-planning, and help-recruiting social skills curriculum;

c) direct and authentic instruction (including student involvement in constructing knowledge, elaborating inquiry with writing, and generating products of learning that have value beyond the classroom) (Hanley-Maxwell, Phelps, Braden, & Warren, 2000);

d) parent education and support;

e) mentoring;

f) interagency collaboration; and

g) outcomes-based evaluation.
A) **Goal-driven case management.** This has been proven effective with a variety of clients in several settings (Blalock, 1996; Freedman & Lynch, 1996). Each student participant is assigned a case manager, who initially works with the participant to identify individual educational or vocational goals. Case managers also work with participants and their families to develop realistic goals responsive to their vocational interests while considering their abilities and challenges. Once these goals are established, case managers provide participants with instrumental assistance, guidance, and/or emotional support, depending on the situation. Case managers may work with participants directly or indirectly and also collaborate with other agencies in order to support goal attainment. For example, they may help participants get a state identification card or register for technical college courses, or accompany them to appointments at state vocational rehabilitation offices. Their primary task is to simultaneously 1) support participants as they work toward their goals, and 2) teach them how to self-advocate and navigate within the various systems. These efforts provide scaffolding for participants to build self-advocacy skills.

B) **An interactive goal-setting, action-planning, and help-recruiting social skills curriculum.** Training is also meant to promote self-advocacy and empowerment. The skill development component of Choices in Transition occurs in a classroom setting where participants learn through group exercises, one-on-one activities, and role-playing situations. These activities are designed to teach participants about their disability and their rights and how to advocate for themselves. Participants learn how to access resources, find assistance, identify mentors, and pursue their educational and vocational goals. To achieve these tasks, case managers teach a course using a culturally sensitive curriculum for high school students with disabilities. The curriculum, developed and updated to reflect the specific goals of this project, is organized into four sections:

1. **Goal-setting and Action-planning** teaches participants how to set clear and attainable goals.

2. **Help-recruitment** focuses on accessing resources available to participants and identifying mentors in their community. These skills range from how to prepare for a job interview and make a positive impression on a potential employer to how to negotiate for services and accommodations.
3. **Knowledge of Rights and Services** informs participants about legislation (the Americans with Disabilities Act, the Individuals with Disabilities Education Act, etc.) and services (vocational rehabilitation, college disability services offices, etc.). Learning this information is fundamental to participants’ ability to engage in the final component of the curriculum.

4. **Self-advocacy and Self-awareness** provides information and activities to enable students to learn about self-advocacy and practice their ability to advocate for their needs and rights.

The overall goal of this curriculum is to empower participants to take an active role in determining the direction of their future.

**C) Direct and authentic instruction.** In this component, participants are encouraged to find jobs. In some situations, case managers help participants find jobs, but participants must complete the job application, attend the interview, and fulfill other pre-employment requirements such as drug tests. The employment experience helps participants develop confidence in their ability to deal with employers and learn the etiquette of the job setting. Most participants are also encouraged to enroll in vocational training at community colleges—training which is central to their career development. Participants are also encouraged to apply to career preparation programs that match their abilities and strengths. High-functioning participants may want to pursue college credits, while participants with more severe challenges are encouraged to pursue short-term certificate programs. Adult education courses, which often provide good training and preparation for successful careers, may also be an option for participants.

**D) Parent education and support.** Parents are partners in the process of building a successful future for their children. However, parents can also serve as barriers to their child’s success due to fear, overprotection, concerns about losing Social Security benefits, and other factors. Case managers work closely with family members to address their concerns and educate them about the process. They help parents consider the long-term benefits of independence and self-sufficiency for their child. Parents are also encouraged to support their child in developing realistic expectations about future careers. Parents can also help other parents; for example, a bilingual parent of a former participant was recently recruited to serve as a parent-trainer and provide guidance and support to other parents.

**E) Mentoring.** The at-risk status of youth with disabilities has led researchers, educators, and service providers to consider mentoring programs as one way of promoting positive youth development. A strengths-based mentoring approach affords control to mentees and emphasizes youths’ interests and future aspirations. A competence-based approach to mentoring assumes that youth can successfully engage in relationships and benefit from them. In the Choices in Transition model, participants learn to recruit their own mentors and ask for support in pursuing their life goals. Goal-driven mentoring relationships are encouraged as a way to engage natural supports in employment, academic, and/or social settings.

**F) Interagency collaboration.** Participants in the Choices in Transition program utilize the services of vocational rehabilitation (VR) agencies to pay for their postsecondary education. The project has been successful in securing the collaboration of teachers and special education coordinators from Chicago Public Schools, who refer students to VR. The VR agency, in turn, has designated some local offices and specific counselors as points of entry for participants. The counselors work in coordination with the school case managers to facilitate the transition and provide adult certification for services. The City Colleges of Chicago are also involved, through their disability services offices, in providing supports to participants. Students are trained to ask for reasonable accommodations in order to overcome potential barriers.

**G) Outcomes-based evaluation.** The Choices in Transition program uses goal-attainment scaling to measure participants’ progress in reaching their goals. The scale ranges from deterioration (e.g., the participant is not able to fulfill his/her goal of working because he/she is now in jail) to unanticipated success (e.g., the participant obtained a full-time job with benefits and recently received a salary increase). In addition to the goal-attainment assessment, the evaluation strategy utilizes other quantitative (e.g., self-efficacy and social support) and qualitative methods (e.g., focus groups, individual semi-structured interviews) in order to capture the complexity of participants’ transition efforts. (See Garate-Serafini, Balcazar, Weitlauf, & Keys, 2001 for more detailed information about this strategy and the other assessment instruments utilized in the project.)
Preliminary Results
Data have been collected from 164 participants to date, of which 52% are male, 48% are Latino, and 45% are African-American. Sixty-seven percent of these participants have a learning disability, 23% have cognitive disabilities, 7% have emotional/behavioral disorder (EBD), and 3% have physical disabilities. All of these participants graduated from inner-city high schools. Approximately 65% of these participants are currently working, of which 24% are working full time and 41% are working part time.

Of these 164 participants, 126 (77%) have enrolled in postsecondary courses (see list of training areas in Table 1). Of these 126, 40% have completed postsecondary programs, 52% are making progress, and 7% have dropped out. (Note: percentages do not add up to 100% due to rounding.)

Practical Recommendations
For those interested in improving the transition outcomes of youth with disabilities graduating from high school, we offer the following recommendations:

- Assess the individual context of the school and community in order to develop a more accurate understanding of the factors that affect a student’s performance and to identify potential barriers to successful transition.
- Assess the impact of the student’s disability on transition-related activities, goals, and outcomes.
- Develop multi-dimensional transition programs that utilize best practices (e.g., student-centered planning, skills development, family involvement, and interagency collaboration).
- Consider the student’s culture and language needs and the community context.
- Consider the educational experience of the student (e.g., level of contact with nondisabled peers, exposure to general education, exposure to past career/work activities).
- Collaborate with policymakers and service providers to develop community-wide transition policies, procedures, and resources.
- Collaborate with local support agencies (e.g., local education agencies, postsecondary schools, state VR agency, advocacy groups, youth employment networks, etc.) in the development of individualized, culturally competent transition programs.
- Revise recommendations of best practices to fit the context and needs of the target community or school, since all best practices do not necessarily work in all contexts.
- Develop professional development for the program implementation team to ensure accurate delivery of the transition model.
- Ensure that each student participates actively in the formulation of transition goals during their transition planning meetings and/or education meetings and ensure that family members support the student’s transition plan.
  - Prepare students for participation in these meetings through classroom instruction and practice.

Table 1. Participants’ Placement in Post-Secondary Education (n = 126)

- Associate’s credit (30)
- Office specialist (19)
- Pre-credit (12)
- Referred to Illinois Division of Rehabilitation Services for job placement (9)
- Pharmacy technician (6)
- A+ certification (5)
- Security training (5)
- Auto-mechanic program (4)
- Certified Nursing Assistant (4)
- Medical billing/coding (4)
- Computer literacy (3)
- Cosmetology (3)
- Vocational training through community college (3)
- Computer graphics (2)
- Electronic industrial maintenance manager (2)
- Emergency Medical Technician (2)
- Four-year college (2)
- Medical office specialist (2)
- Medical terminology (2)
- Radiology (2)
- Carpentry (1)
- Electrical classes (1)
- Fiber optics (1)
- Physical/Occupational Therapy (1)
- Sign language (1)
– Use role-playing, modeling, and technology to provide positive examples for participation.
– Conduct a pre-planning meeting to assess the student’s level of readiness for participation.
– Use aids to support student participation (e.g., suggest students bring a pre-recorded, spoken statement about long-term goals and aspirations, list of support team members, and/or agenda with expected outcomes).

• Incorporate transition planning and progress monitoring into the high school education experience, linking it to standards.
• Strengthen the student’s support systems during the transition process to reinforce progress.
  – Provide goal-driven transition planning.
  – Provide goal-driven mentoring and/or peer mentoring.
• Monitor progress during classroom instruction and on a quarterly basis.
  – Update plan and goals as needed.

Conclusion
The Choices in Transition model provides students with disabilities an opportunity to develop a career through postsecondary training and vocational guidance and support. Goal-driven mentoring and case management play a central role in supporting the student participants and their families in their efforts. The Choices in Transition model also provides supports that allow participants to develop and strengthen their self-advocacy skills and promote self-determination. The foundation for this process is working with participants and their families to set realistic and feasible goals that are challenging yet attainable. These goals provide participants with the necessary direction, while goal-driven mentoring and case management provide the supports to help participants achieve their goals. These processes enable youth with disabilities to move beyond the social prescription of dependence toward independence and self-realization.

References


Resources

Research Institute on Secondary Education Reform (RISER) for Youth with Disabilities http://www.wcer.wisc.edu/riser

National Institute for Urban School Improvement http://urbanschools.org

The Institute for Academic Access http://www.academicaccess.org

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