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ABSTRACT
                A needs assessment determined the need for
independent living skills for high school students with severe
disabilities, as perceived by the students (n=45), their parents
(n=38) and their teachers (n=7). Results revealed that the students
believed that their lives were steadily improving, that they were
more satisfied than dissatisfied with the quality of their lives, and
that they expected to be happier in the future. Students expressed
greater satisfaction than their parents perceived they were
experiencing. Students' strongest interests were in social
activities, followed by physical sports and home management. A
greater percentage of parents than students perceived finding a job,
managing money, and problem solving as areas of need; a large
percentage in both groups identified filling out forms as a priority.
Regardless of educational classification, the students and their
parents perceived that the students had the greatest need for
development in social/community adaptation and problem-solving
skills. Parents were also found to have needs for programming,
especially in the area of setting goals for their children and
utilizing community resources, while teachers indicated that a number
of independent living skill areas were not sufficiently covered in
existing curricula. (Author/JDD)

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TRANSITION NEEDS ASSESSMENT OF HIGH SCHOOL

STUDENTS WITH SEVERE DISABILITIES

AND THEIR PARENTS AND TEACHERS

Key Words: Transition, Severely Disabled High School Students, Needs Assessment, Occupational Therapy.

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Abstract

A needs assessment was conducted to determine the independent living skill (ILS) perceived needs of high school students (n = 45) with severe disabilities. Additionally, parents (n = 35) and the teachers (n = 7) of the students were surveyed to assess the ILS needs they perceived their children or students had. Results revealed that, regardless of educational classification, the students and their parents tended to perceive that the students had the greatest need for development in social-communication skills. Parents were also found to have needs for programming, especially in the area of setting goals for their children and utilization of community resources, while teachers indicated that a number of ILS areas were not sufficiently well covered in existing curricula. Implications for occupational therapist-directed transition programs are discussed.

In 1975, President Gerald R. Ford signed Public Law 94-142, the Education for All Handicapped Children Act, that guaranteed the right to education for all handicapped children of age 3 to 21. Additionally, the law mandated that related services, of which occupational therapy is one, be provided when needed to maximize educational gains. Although public school personnel have made an enormous effort to comply with the new law, as of 1982, not a single state was judged by the Department of Education to be in compliance and high school students were among those most underserved (Reynolds, 1984).

Statistics presented in the Fourth Annual Report to Congress on the Implementation of PL 94-142 (1982) indicated the scope of the problem with high school students. As summarized by Reynolds, this report indicated in the 1978-1979 school year that (1) secondary education students were the least likely to receive adaptive physical education and related services, (2) only 29% of students who received special education were in grades 7 through 12, and (3) 67% of students for whom an individualized education plan (in accord with the mandate of the law) had been recorded were of ages 12 or under. Clearly this report identified that junior high and high school students were an underserved group at the very time that is optimal for laying the foundation that could be pivotal in ensuring a smooth "transition" from high school to work and independent living.

Employment statistics also suggested a compelling need for such programming. In 1982, the US Bureau of the Census Report revealed that 50% to 80% of adults with disability were reported to be jobless. Even

those adults with disabilities who gained access to publicly supported vocational programs, despite long waiting lists, were poorly paid, socially isolated from non-disabled workers, and seemed to linger at such facilities without adequate movement into a mainstreamed work environment (Will, 1985). With an estimated 250,000 to 300,000 students leaving Special Education each year, a major shift in public policy was needed (Will, 1985).

Signed into law in 1983, Section 626 of the Education for the Handicapped Children Amendments authorized funds to be spent for research, training, and demonstration projects that would address the transition of adolescents with disabilities from high school to work and independent living. To further meet the need for transition services, Madeline Will, Assistant Secretary of the US Department of Special Education and Rehabilitation Services (OSERS) and Jean Elder of the Administration of Developmental Disabilities earmarked discretionary funds for the development of transition programs that included the creation of interagency networking. Thus, by 1984, OSERS had established a national priority directed toward developing and implementing programs aimed at improving the transition of high school students in special education from school to work (Will, 1985). As Ms. Will points out, approximately one school generation after the implementation of PL 94-142, it has been critical that the federal government make a concerted effort to promote transition planning.

Concurrent with these events, in the Fall of 1983, the USC Department of Occupational Therapy submitted a Pupil Personnel Training

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Grant application to OSERS that had the central purpose of establishing an occupational therapist-directed Independent Living Transition Center on the campus of Savanna High School in Anaheim. The center was conceived of as serving the following three purposes:

1. To provide independent living "transition" programming to high school students with severe disabilities

2. To serve as a clinical training facility for USC occupational therapy graduate students who would be trained in occupational therapy transition programming.

3. To enable research on the independent living needs of high school students with disabilities and the effectiveness of occupational therapy independent living skills transition programming.

In the Spring of 1984, the University was notified that the grant was awarded. In this paper, results of the first research project conducted at the Center during 1984-1985 will be presented. The general purpose of the study was to investigate the independent living needs and personality characteristics of the high school students with severe disabilities who were attending Savanna High School that year. This paper will focus on the independent living needs assessment. A subsequent paper will address the personality characteristics of the sample. Results of the needs assessment were then used to guide the development of a program that was implemented in the second year of funding (1985-1986). The following five research questions were addressed in the independent living skills needs assessment.

1. What were the demographic characteristics of the sample?

2. How did the subjects perceive the quality of their lives?

3. What were the interests of the subjects?

4. Was there congruence between the subjects' self-perceived independent living skills needs and those that were identified for them by their parents and teachers?

5. What implications did the results have for future programming at the center?

Review of the Literature

What is transition? If one examines the definition of transition implied in Section 626 of Public Law 98-199, one is immediately impressed with its comprehensiveness. Projects that could be assisted under this section include strategies for transition into independent living, vocational training, postsecondary education, and competitive employment. This legislation suggests that the law makers conceived of transition as a multidimensional phenomenon involving vocational planning and placement as well as sustained independent living.

However, in the preliminary statement of policy that was used to guide programming of transition services by the OSERS, focus was placed on employment, as the central index of effective transition (Will, 1985). It should be noted, however, that also in this document a related index of successful transition is the extent of community integration enjoyed by former students with handicapping conditions after leaving school. In the OSERS model, however, "transitional bridges" proposed are to employment and include transition without special services (e.g., attendance at community college), with time-

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limited services (such as postsecondary vocational or other short-term training programs), and with ongoing services (e.g., supported employment). Although the first two options are not new, the third is, to most professionals, and consists of "supported employment" in which a trainer might, for example, be funded to go to the job site with a handicapped individual, appropriately adapt the work space and job tasks, and provide ongoing assistance in job performance. The concepts of activity (or task) analysis, environmental adaptation, and assisted performances are ones with which occupational therapists are quite familiar; yet of the nine transition projects described in the document Cooperative Programs for Transition from School to Work issued by OSERS, none seemed to be directed by or involve new roles for occupational therapists. Despite the fact that independence is sometimes viewed as a precursor to employment, it is also of interest to note that these projects focused upon employment, not independent living, as the critical outcome measure that is achieved through interagency collaboration.

Yet some of the leaders in transition in special education have endorsed a broader perspective. As an example, Wehman, Moon, and McCarthy (1986) suggest that transition programming should include "job placement assistance, on-the-job training, travel training to be able to reach their jobs, aid in living in a supervised apartment or group home, and support for improving recreational options in the community" (1986, p. 1). This group believes that both employment and independent living are essential features of the transition from school to community

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living. The curriculum developed by this group to enhance this transition involved the collaboration oi special educators with rehabilitation counselors, occupational therapists, speech therapists, and other related personnel.

Wehman et al.'s conceptualization of transition was influenced by the findings of a study conducted by Halpern (1985) on the interrelationships of residential environment, social and interpersonal networks and employment of high school students with mental retardation who were living semi-independently in the community. What these researchers found was that success in one area was essentially unrelated to success in another area. The OSERS model is criticized by Halpern as suggesting instead that employment implies success in the other domains. Halpern recommended that OSERS develop a policy position that puts equal and separate emphasis on each of three facets of transition he studied: residential placement, social networking, and employment.

The Role of Occupational Therapy in Transition

It would appear that whether transition is defined in a narrow sense as the bridge between school and work or as multifaceted, occupational therapists bring an armamentarium of skills along with considerable experience in transition preparation, planning, and coordination. The profession's 60-year history of preparing individuals with handicapping conditions in the prevocational area as well as in daily living skills and organization of time makes it well suited for involvement in model transition programs located on high school campuses. Models such as that proposed by Mary Reilly (1966) for psychiatric settings may have

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application in high school settings serving classes of severely emotionally disabled teenagers. Similarly, we perceived that the Model Independent Living Skills Program established at Santa Monica College for disabled college students by Burnett and Yerxa (1980) could readily be modified to serve Savanna High School students. The authors of the grant relied heavily on the design of the Santa Monica Project in implementing the Savanna High School program. Finally, model occupational therapy programs in the occupational choice (Webster, 1950), life and work planning (Gorski & Miyahe, 1985) and independent living and vocational readiness (Royeen & Little, 1985) would also hold promise for transition programming.

Unfortunately, to date, few occupational therapists appear to be involved in high school-based transition programming. Although the Report of the Ad Hoc Commission on Occupational Therapy Manpower (1985) reveals that the numbers of occupational therapists employed in the schools has shown a steady increase from 11% in 1973, to 14% in 1977 to 18.3% in 1982, these figures do not indicate what proportion of therapists provide services to high school students. A survey conducted in 1979 indicated that the majority of occupational therapists working in the schools probably provide services to students under 10 years of age (Gilfoyle & Hayes, 1979). Nevertheless, the manpower study already cited indicates that the passage of PL 94-142 stimulated such growth that school settings are currently second only to hospitals in the employment of occupational therapists (p. 57). Perhaps the current OSERS emphasis on transition will stimulate growth of the profession

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into high school service delivery focused upon independent living skills training, although occupational therapists might also be involved in fostering the transition to employment. It is appropriate to note at this point that under PL 94-142 a key role of the occupational therapist is to improve independent functioning when function is impaired or lost (Gilfoyle & Hayes, 1979).

· As already pointed out, at least one expert believes that living successfully in the community should actually be the target of transitional services (Halpern, 1985) and that accomplishment of this goal is three-faceted including employment, finding a residence that matches one's independent living skills capability, and building a leisure and social network. In special education, curricula are being developed so that teachers can assist students in learning many of these skills which leads to the ultimate question of what unique skills occupational therapists could bring to transition programming.

One way of conceiving of the role of the occupational therapist in transition planning is as a specialist whose expertise is sought in situations in which a specific child is not benefiting adequately from the available special education "transition" curriculum. The occupational therapist's role might be, as Pennington and Sharrott (1985) have suggested, to foster coping skills and social competence in these students as well as daily living skills. Blom, Kerstin, Irwin, Kulkarni, Miller, and Frey (1983), who conducted a series of studies on coping with disability, defined coping as "an active psychosocial process characterized by a persistent effort to overcome and solve the

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problems and dilemmas of the person and the environment connected or
unconnected with disability" (p. 6). These researchers found that the
persons with severe disabilities they studied who were described by
their peers as doing "remarkably well" and were living satisfying and
productive lives were, by and large, involved in social recreational
activities, were adept in managing their daily activities, had excellent
problem solving skills and had a history of good peer relations.

Yet a limited body of literature exists to suggest that the vast
majority of adolescents with disability may not have adequately
developed these skills. Burnett and Yerxa (1980) f und that young
people with disabilities more frequently than able-bodied students
reported an inability to meet the demands of living independently,
overdependence on family members, and an inability to make the
transition from childhood into the autonc of adulthood. Similarly,
other studies suggest that adolescents with disabilities, experience
greater peer rejection (Friedman, 1974), slip into greater passivity
(Minde, 1978), exhibit more severe behavioral or emotional problems, and
have less intense friendships than non-disabled adolescents (Kleck &
Dejong, 1931). In support of these findings, Anderson (1979) reported
that over 32.8% of the disabled teenagers she studied had marked
psychological problems, 37.8% had fairly restricted social lives (with,
at the most, one visit per week to or from a friend), and many were
still depending on their parents for physical care, had a poor
understanding of their disabilities, and were not well informed of their
legal rights.

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In summary, then, the literature review suggested that high school "transition" can be conceived of as having the ultimate goal of successful community living involving employment, residential placement or independent living, and participation in social and leisure activities. Some studies were located that suggested that the role of the occupational therapist in transition might be to establish independent living programs for those students who needed supplementary and, perhaps more concentrated, help in the area of transition than that which is offered in Special Education curricula. Such programs might focus on the development of coping skills and social competence. Nevertheless, despite the fact that the literature was highly suggestive of the direction that the Savanna High School Independent Living Program should take, the project staff decided it would conduct a needs assessment of the students prior to implementation of the program so that data on the specific students to be served could be used for program development.

Methodology

Subjects

All of the subjects were attending Savanna High School, one of eight high schools serving grades 9 through 12 in Anaheim, Orange County, California. Although the school has a total census of about 1,800 students, only 120 had disabilities at the time of the study. Of these, 45 had severe enough problems to spend more than half of their school day in a self-contained classroom. This latter group comprised the

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first sample. Demographic characteristics will be described in the Results section.

The second sample consisted of 38 parents of the students in sample 1. Finally, the third sample consisted of the seven special education teachers of the students in sample 1.

Instruments

Four instruments were employed to assess individual student needs. A description of each follows.

1. The Cantril Ladder (Cantril, 1965) has been used as a measure of overall life satisfaction in prior research (Yerxa & Baum, 1984). The subjects were asked to mark the rung of a 10-step ladder according to their perception of where they stood in relation to "the best possible life for you" and "the worst possible life for you."

2. The Satisfaction with Performance Scaled Questionnaire (SPSQ) (Yerxa, Burnett, Stocking & Azen, 1981) required the respondents to rate on a 5-point scale of time ranging from "all of the time" to "none of the time" the amount of time they were satisfied with the way in which they performed home management and social-community problem solving skills. Reliability using the split-half procedure for the Home Management scale was estimated at .969 and for the Social/Community Problem Solving scale at .93. The two domains measured on the scale were identified through a factor analysis establishing preliminary construct validity. Additionally, correlational studies indicate that SPSQ scores are related to self-perceived independence in activity (Yerxa et al., 1981).

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3. The Interest Checklist (Matsutsuyu, 1969) is an inventory on which the respondent indicates casual, strong, or no interest in 80 activities. Although the activities are classified on an a priori basis into five domains: Activities of Daily Living, Manual Skills, Cultural/ Education, Physical Sports, and Social Recreational, one factor analysis (Rogers, Weinstein & Figone, 1978) suggests only the items from two of the domains cluster as hypothesized (Physical Sports and Cultural/ Educational). Although no reliability is reported for the original scale, a modified version using a Likert-type rating was found to have a test-retest reliability of .92 (Rogers et al., 1978).

4. Student, Parent and Teacher Needs Assessment Questionnaires were constructed by Gerald Sharrott based on instruments that had been developed by Burnett and Yerxa (1980). The student and parent needs assessments, five and six pages long respectively, required the respondents to identify independent living skills needs of the student. The teacher needs assessment asked the teacher to indicate the extent of emphasis given to specific independent living skills content areas in the existing special education curriculum. The three questionnaires contained forced choice and open-ended questions.

Procedures

The complete battery was administered by trainees and took an average of 6 hours. When a subject's reading ability was limited, the inventory was administered orally. Additionally, each student's parents were asked to respond to the Parent Needs Assessment Questionnaire via mail. Each student's special education teacher was also contacted and

asked to complete the Teacher Needs Assessment Questionnaire. The
procedures for data collection were modeled after similar studies
conducted by Burnett and Yerxa (1980) and by Yerxa and Barr (1984).

Results

Results are presented according to the six research questions.

Question 1. What were the demographic characteristics of the sample?

The student sample consisted of 33 males and 12 females, all of whom
were classified by the school as having severely handicapping
conditions. The mean age of the students was 16.14 years with a
standard deviation of 1.32. 28.89% of the subjects were in 9th grade,
44.44% were in 10th grade, and 13.33% were in each the 11th and 12th
grades, respectively. Most subjects were Caucasian (73.33%), but 11.11%
were Hispanic, 4.4% were Asian, 2.2% were Black, and 8.89% indicated
that they were Other.   Although all the students were classified as
severely handicapped by the Anaheim Union School District, the student
sample was quite heterogeneous with respect to type of disability:
44.44% had multiple handicaps (MH), 15.56% had learning handicaps (LH),
25% had communication handicaps (CH), and 17.78% had severe emotional
disturbances (SED).   Among the multiply handicapped group, two students
were retarded, one was paraplegic, one had cerebral palsy, and one other
had a non-specified physical handicap.

Thirty-eight (84.4%) of the 45 possible parents or caregivers
returned the mailed Parent Needs Assessment Questionnaire and comprised
the parent sample. Twenty-five of the respondents were mothers, six
were fathers, four were houseparents, two were brothers, and one was a

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combination in which both parents served as respondent. The X age was 45 (SD = 9), with 63% married and 11% divorced. Seventy-one percent were Caucasian, 8% Asian, 11% Hispanic, and 3% other. Most lived in homes (78%). Approximately 66% were registered voters.

The third sample consisted of the seven special education teachers from whose classes the student sample had been drawn.

Question 2. How did the subjects perceive the quality of their lives?

As already discussed, on the Cantril Ladder, 9 represented the best possible life while 0 represented the worst. In the total student sample, the average rating for 5 years ago was 3.87 (SD = 2.03), for the present 6.47 (SD = 2.03), and 7.53 (SD = 2.04) for the future. It is interesting to point out that the values obtained by this group with disabilities for the present was comparable to the 6.47 value reported for a non-disabled adult group by Yerxa and Baum (1984), but is somewhat higher than the 5.86 value these authors reported for the adults with disabilities they studied. Although this difference is not statistically significant, the discrepancy in findings may suggest a trend for adolescents with disabilities to be less realistic than their adult counterparts, or that in adolescence persons with disabilities retain greater optimism than they do in adulthood. An alternative explanation might relate to the differing handicapping conditions that characterized the two disabled samples.

Analyses of SPSQ data were performed on the total group. Assuming that dissatisfaction with one's performance implied a desire to improve it through training, a skill on the SPSQ was considered on an a priori

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basis to be a target area for the model program, if 20% or more of the
students indicated that they were satisfied with their performance of
the task 25% or less of the time. Table 1 lists the 14 tasks that met
this criterion.

In the home management domain, five activities met this criterion in
contrast to nine in the social/community problem solving domain. These
findings suggested that the independent living skills program to be
offered in the model training center should probably emphasize social
adaptation and community problem solving.

Further, a series of one-way analysis of variance F tests with four
levels revealed that there were no significant differences between the
educational classification subgroups in their satisfaction with
performance in the home management or social/community problem solving
domains as assessed on the SPSQ.

In summary, the students seemed to believe that their lives were
steadily improving, that they were now more on the satisfied than dis-
satisfied side, and that they expected to be even happier in the future.
However, on 14 (30%) of the 46 skills listed on the SPSQ, 20% or more of
the respondents indicated they were satisfied with their performance 25%
or less of the time.

Question 3. What were the interests of the sample?

Again, one-way analysis of variance F tests revealed that there were
no significant differences in the mean Interest Checklist ratings of the
five domains (cultural arts, physical sports, social, home management,
and cultural/educational) among the four educational category subgroups.

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Further analyses of these data were therefore performed for the entire student sample. These data suggested the students' strongest interests were in social activities with physical sports and home management also exhibiting areas of strong interest. Again, the notion that the model independent living skills program should focus on social competence was reinforced (assuming that the program should be tailored according to student interests). In addition, the data suggested interests relating to home management and physical sports should also be incorporated into the occupational therapy program.

Question 4: Was there congruence between the subject's self-perceived independent living skills needs and those that were identified for them by their parents and teachers?

All 45 students responded to the Student Needs Assessment Questionnaire which included the questions with dichotomous response options listed in Table 2. Most of the subjects did not feel there were any obstacles interfering with their ability to live independently. Responses to other questions indicated that the majority of the subjects needed help doing homework, and wanted to talk to older adults like themselves who lived independently, but did not about their feelings. Twenty-four percent of the subjects had not heard of the Department of Rehabilitation and only two (4.4%) were clients of the agency.

Comparison of the results reported in Tables 3 and 4 (extracted from the Student and Parent Needs Assessments respectively) enable assessment of the degree of correspondence of parent and student responses to questions addressing quality of life. Table 4 summarizes student

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responses to the question, How satisfied are you with your life? Table
5 reports similar results to a question that asked the parents how
satisfied with life their children were. In general, the students
expressed greater satisfaction than their parents perceived they were
experiencing. A similar trend was identified for the two questions that
addressed degree of student happiness. (See Tables 3 and 4)

Students and their parents were also found to differ in their
perception of the independent living needs of the students. Data
presented in Table 5 reveal that a greater percentage of parents than
students perceived managing money and problem solving as a need area,
but that large percentages in both groups identified filling out forms
as a priority. Finally, a much larger percentage of parents than
students identified finding a job as a need area.

Table 5 also shows that traditional activities of daily living
tended not to be identified as priority need areas by either the stu-
dents or their parents. However, when statistical analysis of two of
the questions that identified need areas were performed for educational
classification subgroups, significant differences between the groups
were revealed. The questions were: How much help do you need in these
areas? and Would you like to be able to do any of the following better?
Responses were grouped into "activity clusters" following procedures
described by Burnett and Yerxa (1980) and a series of Kruskal-Wallis
tests revealed that the MH group reported significantly more need for
help in the Home Management cluster area ($X2(df =3) = 881$, $p < .05$) than
the other groups. Similarly, they also indicated significantly more

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desire than the other groups to improve in the social (X^2(df =3) = 9.84, p < .02) and community mobility clusters (X^2(df =3) = 19.68, p = .0002). It should be noted that although the differences on other clusters were not statistically significant, the MH group consistently indicated more need than the other groups.

In Table 6, student responses to the question, Would you like to be able to do any of the following better? are listed. Once again, the table reveals that when the total sample is considered, social/community skills are those in which the students perceived that they had the greatest need.

Students and their parents were asked to identify the areas in which they thought the students needed the most information. More than 50% of each sample identified getting a job, budgeting, and communication as high priority areas. Low need areas included information on sex and disability, adaptive equipment, and getting counseling. Information on going to college was identified as a priority need area by 66% of students but less than 27% of their parents.

Finally, we asked the parents to list the goals they had for their child and the students to list their own goals. What we found was that many students listed many more goals for themselves than their parents could for them. These results are presented in Table 7 and suggested the need for a parent intervention component to the model program that would address reasonable goal setting. Our conclusion that the parents were in need of intervention was additionally supported by the data we gathered on parent utilization of services that indicated that no

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parents were utilizing the Department of Rehabilitation, 10% were
utilizing Regional Centers, and only 24% were receiving DPSS or Social
Security. It appeared that the parent sample was unaware of resources
in the community from which they or their children could benefit.

Finally, and importantly, results on the Teacher Needs Assessment
revealed that, of the seven teachers who served as respondents, four or
more stated that more coverage was needed in 27 of 38 independent living
skills areas included on the Teacher Needs Assessment. Five or six
teachers, the most endorsing the need for programming in any one area,
identified solving problems/making decisions, developing sensitivity to
others, clarifying values, developing positive self-esteem, and
understanding community resources as high priority areas.

Question 5: What implications did the results have for future
    programming?

The results of the needs assessment appeared to have several
implications for program development. First, they suggested that the
program should (1) stress the development of social and vocational
competence, (2) foster problem solving and decision making, and
(3) provide exposure to role models with disability who are living
productive lives. Second, they indicated that a "canned" program for
all disability groups would not suffice, as signficant differences were
found in needs across the group constituted on the basis of educational
classification. Third, the data pointed to the need for a strong parent
learning component, particularly in the areas of resource utilization
and goal setting for their children. Finally, the needs assessment

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identified specific areas of transition that were, in the view of the special education teachers, in need of more intense coverage than is being provided in the special education classroom. Thus, the needs assessment established a complementary new role for occupational therapists who would work in conjunction with special educators.

In the final analysis, the data presented suggested that the students, their parents, and their teachers all perceived that the students had independent living skills needs. Occupational therapists, who have a long history of helping individuals with disability make the transitions from institutions to satisfying independent living are broadly trained in the techniques that foster independent decision making, self-direction, social competence, and coping. These appear to be the very areas the students, their parents, and their teachers identified as in need of programming if transition is to be accomplished.

The findings of the needs assessment thus may have implications beyond the Savanna High School setting. We would suggest that occupational therapists consider the data we have reported in conceptualizing and implementing programming of this kind at other mainstreamed high school settings where transition programs are now being established. The data found support for the notion that occupational therapy programming for high school transition needs to be more than ADL training; rather its focus must be on the organization of social and work behaviors, on the fostering of problem solving, decision making, and autonomy, and on the development of social competence.

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Additionally, we recognize the need for future research in this area if such programs are to be well grounded in a data base. Such studies should address questions such as (1) whether the results we have reported can be validated in other settings and with other adolescents with disabilities, (2) the grade at which "transition" occupational therapy programming should be initiated, and (3) the effects of such programs on the transition from school to work and into independent living.

References

Anderson, E. (1979). The psychological and social adjustment of adolescents with cerebral palsy or spina bifida and hydrocephalus. International Journal of Rehabilitation Research, 2, 245-246.

Blom, G. E., Kerstin, E. K., Irwin, S., Kulkarni, M. Miller, K., & Frey, W. (1983). Coping with handicaps: Implications for adults with physical disabilities. Paper presented at the National Rehabilitation Association Annual Meeting, Anaheim, CA, September 20, 1983. Available from University of International Rehabilitation, College of Education, Michigan State University, East Lansing, MI 48824.

Burnett, S. E., & Yerxa, E. J. (1980). Community-based and college-based needs assessment of physically disabled persons. American Journal of Occupational Therapy, 34, 201-207.

Cantril, H. (1965). The pattern of human concern. New Brunswick: Rutgers University Press.

Cooperative programs for transition from school to work. (1985). U.S. Department of Education, Office of Special Education and Rehabilitative Services. National Institute of Handicapped Research. Prepared under Contract No. 300-83-0158, Washington, DC, 19 August 1985. Available from U.S. Government Printing Office, Washington, DC 20402.

Friedman, R. S. (1974). Modeling behavior of nondisabled and disabled based upon social preference for and similarity to nondisabled and disabled models. Unpublished doctoral dissertation, Hofstra University, Hemstead, Long Island, New York.

Gilfoyle, E. M., & Hayes, C. (1979). Occupational therapy roles and functions in the education of the school-based handicapped student. American Journal of Occupational Therapy, 33(9), 565-576.

Gorski, G. & Miyake, S. (1985). The adolescent life/work planning group: A prevention model. In F. S. Cronwell (Ed.), Occupational therapy and adolescents with disability (vol. 2). New York: The Haworth Press.

Halpern, A. S. (1985). Transition: A look at the foundations. Exceptional Children, 51, 479-486.

Kleck, R. E., & DeJong, W. (1981). Adults' estimates of sociometric status of handicapped and non-handicapped children. Psychological Report, 49, 951-954.

Matsutsuyu, J. S. (1969). The interest checklist. American Journal of Occupational Therapy, 23, 323-328.

Minde, K. K. (1978). Coping styles of 34 adolescents with cerebral palsy. American Journal of Psychiatry, 135, 1344-1349.

Pennington, V., & Sharrott, G. W. (1985). The developmental tasks of adolescence and the role of occupational therapy. In F. S. Cronwell (Ed.), Occupational therapy and adolescents with disability (vol. 2). New York: The Haworth Press.

23

Public Law 98-199, 98th Congress, December 2, 1983, 97 STAT. 1357-1377.

Reilly, M. (1966). A psychiatric occupational program as a teaching
model. American Journal of Occupational Therapy, 20, 61-71.

Report of the ad hoc Commission on Occupational Therapy Manpower.
(April 1985). AOTA, 1383 Piccard Drive, Rockville, MD 20850.

Reynolds, M. (1984). The educational needs of disabled children and
youths. In R. W. Blum (Ed.), Chronic illness and disabilities in
childhood and adolescents. Orlando, FL: Grune & Stratton, Inc.

Royeen, C. B., & Little, L. F. (1985). Autistic adolescents:
Developmental milestones and a model treatment program. In F. S.
Cronwell (Ed.), Occupational therapy and adolescents with disability
(vol. 2). New York: The Haworth Press.

Rogers, J. C., Weinstein, J. M., & Figone, J. J. (1978). The
interest checklist: An empirical assessment. American Journal
of Occupational Therapy, 32, 628-630.

Strax, T. E., & Wolfson. (1984). Life-cycle crisis of the disabled
adolescent and young adult: Implications for public policy. In
R. W. Blum (Ed.), Chronic illness and disabilities in childhood
and adolescence. Orlando, FL: Grune & Stratton, Inc.

U.S. Bureau of the Census. (1982). Labor force status and other
characteristics of persons with a work disability. Washington,
DC: U.S. Bureau of the Census.

U.S. Department of Education. (1982). Fourth annual report to
Congress on the implementation of PL 94-142. Washington, DC:
Author.

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Webster, P. S. (1980). Occupational role development in the young
adult with mild retardation. American Journal of Occupational
Therapy, 34, 13-18.

Wehman, P., Moon, M. S., & McCarthy, P. (1986). Transition from
school to adulthood for youth with severe handicaps. Focus on
Exceptional Children, 18(5), 1-12.

Will, M. (1985). OSERS programming for the transition of youth with
disabilities: Bridges from school to working life. In
Conference proceedings: Making transition a reality.
Sacramento, April 30-May 2.

Yerxa, E. J., & Baum, S. (1984). Engagement in daily occupations
and life satisfaction among people with spinal cord injuries.
Paper presented at the AOTA Conference, Atlanta, GA, April 18.

Yerxa, E. J., Burnett, S. E., Stocking, S., & Azen, S. P. (1981).
Development of the satisfaction with performance scaled question-
naire (SPSQ). Unpublished manuscript available from Dr. E. J.
Yerxa, Professor and Chair, USC Department of Occupational
Therapy, 12933 Erickson Avenue, Downey, CA 90242.

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Table 1

Percentages of Responses in Each Category
to the 14 Items on the SPSQ that
Met the Target Skill Criterion[a]

Item #		1 All of the time 100%	2 Most of the time 75%	3 Some of the time 50%	4 Almost none of the time 25%	5 None of the time	Merge of options 4 & 5
Home Management							
1.	Scrape/stack dishes	28.89	22.22	15.56	2.22	24.44	26.66
2.	Wash pots/pans	31.11	26.67	17.78	2.22	17.78	20.00
7.	Put dishes etc. away	35.56	24.44	8.89	8.89	13.33	22.22
8.	Use a floor mop	22.22	28.89	11.11	13.33	15.56	28.89
12.	Clean a bathtub/ shower	35.56	13.33	17.78	6.67	17.78	24.45
Social/Community Problem Solving							
3.	Explore training requirements	42.22	20.00	13.33	6.67	13.33	20.00
7.	Find/use financial assistance programs	26.67	24.44	13.33	2.22	17.78	19.98
9.	Find/use educational programs	31.11	24.44	22.22	8.89	11.11	20.00
10.	Talk with parents about sex & money	46.67	8.89	8.89	4.44	20.00	24.45
16.	Pay bills/balance account	24.44	20.00	11.11	8.89	11.11	20.00
17.	Plan future savings/expenses	48.89	8.89	11.11	11.11	11.11	22.22

Table 1, continued

Item #		1 All of the time 100%	2 Most of the time 75%	3 Some of the time 50%	4 Almost none of the time 25%	5 None of the time	Merge of option 4 & 5
18.	Budget income	33.33	8.89	20.00	6.67	13.33	20.00
20.	Talk/participate in class	46.67	17.78	15.56	11.11	8.89	20.00
21.	Plan recre- ational activities	44.44	13.33	20.00	8.89	13.33	22.22

[a]When the total percentage does not sum to 100, the remainder of responses were marked in the "does not apply to me" category.

Table 2

Responses of Students to Dichotomous Questions
on Needs Assessment ($\underline{n} = 45$)

Questions	Yes %	$\underline{N}$	No %	$\underline{N}$	Don't know %	$\underline{N}$	Missing %	$\underline{N}$
1. Are there any problems interfering with your ability to live independently?	20.00	9	64.44	29	2.22	1	13.33	6
2. Are you in a self-contained classroom?	84.44	38	13.33	6	22.22	1	--	--
3. Are you in a main-streamed classroom?	22.22	10	55.56	25	22.22	10	--	--
4. Do you need help doing homework?	55.56	25	33.33	15	11.11	5	--	--
5. Would you like to talk to an older adult like yourself who lives independently?	62.22	28	22.22	10	2.22	1	13.33	6
6. Would you like to talk to an older adult about your feelings?	31.11	14	40.00	18	2.22	1	26.67	12
7. Have you ever heard of the Department of Rehabilitation?	24.44	11	64.44	29	0	0	11.11	5
8. Are you a client of the Department of Rehabilitation?	4.44	2	66.67	30	28.89	13	--	--

Note. #4, type of help needed, was cited as (1) written language,
(2) comprehension, (3) checking work, (4) help with specific
subject, (5) reading, and (6) spelling.

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Table 3

Student Responses to Quality of Life Questions

Responses	Mean	SD	%	Number
How happy are you?	3.69	0.97		
Very unhappy			4.44	2
Unhappy			4.44	2
So-so			26.67	12
Happy			46.67	21
Very happy			17.78	8
How satisfied are you with your life?	3.67	0.88		
Very unsatisfied			2.22	1
Unsatisfied			2.22	1
So-so			40.00	18
Satisfied			37.78	17
Very satisfied			17.78	8

Table 4

Parent Responses to Questions on Their Child's Quality of Life

Questions	%	Number
How happy do you think your child is?		
Very unhappy	5.26	2
Unhappy	18.42	7
So-so	34.21	13
Happy	39.47	15
Very happy	2.63	1
How satisfied do you think your child is?		
Very unsatisfied	2.63	1
Unsatisfied	18.42	7
So-so	42.11	16
Satisfied	28.95	11
Very satisfied	7.89	3

Table 5

Student and Parent Perspectives on How Much Help
the Students Need in Specific
Independent Living Functions

Assistance	Students		Parents	
	No.	%	No.	%
Using telephone	4	8.89	5	13.15
Managing money*	21	46.67	26	68.43
Conserving physical energy	8	17.78	4	10.53
Solve problems/make decisions*	15	33.33	26	79.95
Prepare a meal	8	17.77	19	50.00
Shop for groceries	6	13.33	19	50.00
Drive car/take the driving test*	18	40.00	20	52.63
Use public transportation	9	40.00	16	42.10
Go on a job interview*	14	31.11	19	50.00
Fill out forms*	25	55.56	27	71.05
Find a job*	17	37.78	23	60.53
Clean my room	4	8.89	8	21.05
Wash clothes	7	15.55	16	42.11
Schedule time	7	15.55	20	52.64
Grooming myself	2	4.44	11	28.94
Dressing myself	2	4.44	2	5.26
Feeding myself	1	2.22	0	0

Note.   * marks areas in which students, parents, or both perceived need
for help.

Table 6

Student Responses to the Question: Would You Like to Be
Able to do Any of the Following Activities Better?

Responses	Yes %	N	No %	N	Does not apply %	N
Drive car/take driver's test#	64.44	29	33.33	15	2.22	1
Managing money#	57.78	26	40.00	18	2.22	1
Find a job#	55.56	25	42.22	19	2.22	1
Solve problems/make decisions#	53.33	24	44.44	20	2.22	1
Fill out forms#	53.33	24	44.44	20	2.22	1
Date#	48.89	22	48.89	22	2.22	1
Meet new people#	46.67	21	51.11	23	2.22	1
Take a trip#	46.67	21	51.11	23	2.22	1
Go on a job interview#	46.67	21	51.11	23	2.22	1
Prepare a meal#	44.44	20	53.33	24	2.22	1
Enjoy spare time#	40.00	18	57.78	26	2.22	1
Make friends	37.78	17	60.00	27	2.22	1
Eat in a restaurant	35.56	16	62.22	28	2.22	1
Grooming myself	31.11	14	66.67	30	2.22	1
Wash clothes	31.11	14	66.67	30	2.22	1
Schedule time	31.11	14	66.67	30	2.22	1
Be in public comfortably	31.11	14	66.67	30	2.22	1
Talk to teachers	31.11	14	66.67	30	2.22	1
Shop for groceries	28.89	13	68.89	31	2.22	1
Use public transportation	28.89	13	68.89	31	2.22	1
Clean my room	28.89	13	68.89	31	2.22	1
Using telephone	26.67	12	71.11	32	2.22	1
Dressing myself	22.22	10	75.56	34	2.22	1
Feeding myself	22.22	10	75.56	34	2.22	1
Conserving physical energy	20.00	9	77.78	35	2.22	1

Note. # marks areas on which greater than 40% of the respondents wanted to do
better.

Table 7

Number and Percentage of Students and Parents Indicating
Particular Future Goals for the Student*

Goals	Student ($\underline{n}$ = 45) %	$\underline{n}$	Parent ($\underline{n}$ = 38) %	$\underline{n}$
Vocational/job	62.22	28	47.37	18
Material--car, house, money	24.44	11	15.79	6
Sports participation/physical development	20.00	9	0	0
Social/familial--marriage, children	15.56	7	2.63	1
Live independently	11.11	5	18.42	7
School--college, vocational	8.89	4	0	0
Social activities--parties, concerts, shopping	6.67	3	0	0
Increase academic skills	6.67	3	0	0
Social relationships--friends	6.67	3	0	0
Travel	6.67	3	0	0
ADL skills	4.44	2	0	0
Avocational/leisure	4.44	2	0	0
Live with family	4.44	2	0	0
Applied skills, e.g., fixing cars	2.22	1	0	0
Musical skills	2.22	1	0	0
Fame/fortune	2.22	1	0	0
To be useful/productive	2.22	1	2.63	1
Graduating high school	2.22	1	5.26	2
Happiness, good life	2.22	1	0	0
Dropping out	2.22	1	0	0

Table 7, continued

Goals	Student ($\underline{n}$ = 45)		Parent ($\underline{n}$ = 38)	
	%	$\underline{n}$	%	$\underline{n}$
No goals, unclear	2.22	1	5.26	2
Leave group home	0	0	2.63	1
Child not capable of setting goals	0	0	2.63	1
Don't know	0	0	7.89	3
Missing data	8.89	4	21.05	8

*Rank ordered by student data.