An Ideal Model for Transitional Programs for Autistic Youth: Evaluating the High School to Employment Programs for Autistic Youth in Georgetown, TX.

By

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Applied Research Project
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Abstract

*Purpose:* The purpose of this applied research project is threefold. First, it describes the ideal components of an effective transitional program for youth with ASD transitioning from high school to employment in a community. Second, it assesses the transitional programs from high school to employment for youth with ASD who reside in Georgetown, TX. Third, it provides recommendations for improving the transitional programs for youth with ASD who reside in Georgetown, TX.

*Methodology:* The components of an effective transitional program for youth with ASD transitioning from high school to employment identified in the literature led to the development of a conceptual framework. This framework allowed the researcher to develop an assessment tool designed to gauge the transitional programs for youth with ASD from high school to employment in Georgetown, TX. An assessment is accomplished through the use of a case study approach employing multiple methods. The methods used to collect data include interviews, document analysis, nonparticipation observations of public presentations, and survey research.

*Findings:* Results indicate that the Georgetown Independent School District (GISD) has an outstanding transitional program/process for youth with ASD. There were only a few recommendations for GISD, such as having a self-determination curriculum, having a policy requiring transition meeting facilitators to use person-centered-planning (PCP), and training general education teachers on how to best work with students with ASD. At the state level process, the state agency provides most of the elements identified as best practices transitional programs for this population. Recommendations for the state include having policies to use PCP, video modeling and covert audio coaching for this population, and limiting the number of clients their Rehabilitative Counselors can have on their caseloads. At the community level process, there are several recommendations, as only a few of the agencies offer some of the elements identified as best practices for this population. Several major concerns for the community level process include only 45% of the agencies have specialized case managers to work with this population; 50% of the agencies complete employment plans; 30% of agencies use rehabilitative technology; 44% offer supported employment; 25% offer vocational training; none of the organizations offer a specialized vocational training in a field that has been proven to help this population gain competitive employment; and only 38% collaborate with other agencies to assist this population.
About the Author

Deron J. Reinders was born in San Antonio, TX. Deron graduated from Southwest Texas State University in 1999 with a Bachelor’s Degree in Criminal Justice and a minor in Psychology. Deron has been employed in several challenging, but rewarding careers in the fields of Juvenile Probation, Job Readiness, and Children Protective Services. Deron is currently employed with Williamson County Juvenile Services as a Preservation Supervisor, where he supervises a team consisting of a Juvenile Probation Officer, Case Manager, and two Therapists who serve juvenile offenders and their families using a multi-systemic approach.

Deron is happily married to his wife of 13 years. Together, they have two children, one of which is diagnosed with Autism Spectrum Disorder (ASD). Deron’s research is dedicated to all families with a special needs child who are worried about their child’s future after high school. Deron can be reached via e-mail at Deronreinders@yahoo.com.
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Chapter One: Introduction

The Challenges of Gaining Meaningful Employment for those with ASD

Most Americans want meaningful full-time employment after completion of secondary or higher education. Employment fills a void in many Americans’ lives by providing them with a sense of purpose, social interactions, a means to support themselves and their loved ones, and the ability to purchase luxury items, among other things. However, some individuals have more challenges obtaining and maintaining meaningful full-time employment following completion of secondary or higher education. Individuals with Autism Spectrum Disorder (ASD) have significantly more challenges gaining full-time employment following secondary or higher education than those without mental health disabilities. ASD is a neurological disorder that is normally noticed by age three that inhibits the individual’s ability to communicate, interact socially, and often includes repetitive behaviors (Macfarlane & Kanaya, 2009, p. 662).

Individuals with ASD often have deficiencies in life skills that make obtaining employment challenging. The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (American Psychiatric Association, 2013, p. 50), which is the standard tool used by mental health professionals to classify mental health disorders, states people with ASD have deficits in “social–emotional reciprocity.” The DSM-V (2013, p. 50) says this may include abnormal social encounters, lack of “back-and-forth communication,” fewer sharing of emotions, interests or affect, and “failure to initiate or respond to social interactions.” Additional, the DSM-V (2013, p. 50) says individuals with ASD will have “deficits in nonverbal communication behavior for social interaction,” which may include having poor eye contact, having difficulty understanding and using gestures, having blank facial expressions, or failing to use nonverbal communication. Other features of individuals with ASD include difficulty developing and
maintaining relationships, having repetitive behavior patterns, interests or activities, having “hyper or hypo-reactivity to sensory input,” and having difficulty adapting to change (American Psychiatric Association, 2013, p. 50). Another challenge is that 80% of individuals with ASD have IQ’s below 70, which is in the range of intellectually disabled (Berkell, 1987, p. 15). Per Schall, Wehman, and Carr (2014, p. 43), it is more often their social and communication deficiencies rather than their rituals and routines that create problems in the workplace. Some social challenges that individuals with ASD encounter on the job include failure to respect other employees’ personal space, over-reliance on supervisors, talking too much or too little, poor time keeping, inappropriate dress, and a lack of social awareness (Mahwood & Howlin, 1999, p. 150). With all the aforementioned limitations, it is no wonder that individuals with ASD have significant challenges obtaining and maintaining employment.

Individuals with ASD have low employment rates. Taylor and Seltzer (2011, p. 571) found that employment rates for those with ASD are between 4.1% and 11.8%, regardless of their intellectual ability. In their study, Taylor and Seltzer (2011, p. 579) found that the majority of young adults with ASD who were employed had menial jobs, such as bussing tables at restaurants, rolling silverware into napkins, washing dishes, folding towels, and working in grocery stores. Additionally, working adults with ASD, work fewer hours per week and earn smaller wages than adults who have other disabilities (Cimera & Crown, 2009, p. 294). Results from the National Longitudinal Transition Study 2 (NLTS2) from 2001-2009 that included a sample size of 922 youths with ASD, revealed that only 32% of the sample attended postsecondary education, 6% had competitive employment, 21% had no education or employment experience at all, 80% of the sample were still residing with their parents, 40% said they had no friends, and 64% did not have a driver’s license (Wehman et al., 2012b, p. 145). All
these studies suggest that something is askew with the high school to employment transition process for this population.

The unfortunate reality is that secondary education systems are not preparing those with ASD for meaningful full-time employment. This not only affects the lives of those with ASD, but it affects their family members, as they have to continue to support their ASD kinfolk. Also, it affects society, as those with ASD are often financially supported by public resources. It is evident that changes in the transition process need to be made.

Research has shown that adults with ASD can have meaningful employment and contribute to society (McDonough & Revell, 2010, p. 90). There are many programs that are designed to help youth with ASD transition from high school to full-time employment, including vocational education programs, job placements, supported employment, job coaching, and work internships, among others. Youth with ASD can gain full-time employment following secondary education with the aid of transitional programs and have more rewarding lives. Full-time employment can empower them and help them become more self-sufficient, thus allowing them to reach their full potential.

**Research Purpose Statement**

The purpose of this research is to describe the ideal components of an effective transitional program for youth with ASD transitioning from high school to employment in a community. Then, it will assess the transitional programs from high school to employment for youth with ASD who reside in Georgetown, TX. Lastly, it provides recommendations for improving the transitional programs for youth with ASD who reside in Georgetown, TX. The practical ideal type framework will provide a model for such programs (Shields & Rangarajan,
The elements of the framework will be identified and refined by reviewing scholarly literature on the subject.

Chapter Overview

This chapter provides a description of ASD, the challenges youth with ASD face in obtaining meaningful employment, and a justification for an assessment tool to gauge transitional programs (high school to employment) for youth with ASD in Georgetown, TX. Chapter 2 provides a brief synopsis of the history of ASD, policy history of ASD, and the research setting. Chapter 3 presents the model assessment tool developed to gauge the effectiveness of transitional programs (high school to employment) for youth with ASD. The model assessment tool consists of three components, i.e., high school level process, state level process, and community level process, which are all involved in the transition process from high school to employment for youth with ASD. Chapter 3 serves to explain each levels’ role in assisting youth with ASD go from high school to employment. Chapter 4 provides the methodology of the paper, which uses a case study approach that uses interviews, document analysis, nonparticipation observations of public presentations, and surveys to gauge the transitional programs (from high school to employment) for youth with ASD of all organizations that provide such services to youth with ASD in Georgetown, TX. Chapter 5 presents the research findings of the case study. Chapter 6 makes recommendations to the programs affiliated with the transition process for youth with ASD who reside in Georgetown, TX.
History of Autism

It is safe to say that since autism is a neurological disorder, it has always been around. As early as the 1700s, cases were reported that today’s psychologist would identify as individuals with ASD (Feinstein, 2010, p. 3). For example, a German boy with the alias of Wild Peter was seen running naked in fields, he never learned to speak, and he was insensitive to foul orders, which is common in individuals with ASD (Feinstein, 2010, p. 3). In the 1800s, doctors started documenting cases of children who would now have a diagnosis of ASD. For example, in 1853, Herman Melville published, Bartleby. Bartleby was a short story about a boy during that time, who had impairment in non-verbal communication, refused to make eye contact, was expressionless during conversation, had no friends, and preferred solitude every day (Koegel, 2008, pp. 270-271). The 1700s and 1800s marked the beginning of observing and documenting peculiar behaviors in individuals, which would now be considered characteristics found in those with ASD.

The 20th century had several special developments transpire in the field of autism. In the early 20th century, professionals started defining sub-groups within childhood psychosis (Feinstein, 2010, p 5.) During that time, Sancte de Sanctis from Italy and Theodor Heller from Austria used the term “dementia infantilis” to categorize individuals who would now be diagnosed with ASD (Feinstein, 2010, p. 4). Dementia infantilis originated from the German Psychiatrist, Dr. Emil Kraepelin’s term “dementia praecox,” also known as schizophrenia (Feinstein, 2010, p. 4). In 1908, Dr. Eugen Bleuler was the first person to use the term “autism,” which comes from the Greek word “autos,” meaning self (Maresca & Magistris, 2015, p. 2). During that time, Bleuler used the term “autistic thinking” to refer to a normal type of thinking in
children and adults, which was evident in dreams, fantasies, pretend play, and delusions of individuals with schizophrenia (Feinstein, 2010, p. 5). Bleuler also coined the term schizophrenia, and included autism as one of the four types of schizophrenias: associated disturbance, ambivalence, affective disturbance, and autism (Feinstein, 2010, p. 5). As one can tell, Bleuler’s use of the term “autistic thinking” is not associated with the way we conceptualize autism today. The beginning of the 20th century was the period in which terminology for autism was being introduced, although the terminology was askew by today’s standards.

In the 1920s and 1930s, several professionals around the world were describing characteristics in people that are now characteristics associated with autism. In 1927, Eugene Minkowski from France introduced the term autism to his country by writing the book, La schizophrenie, which depicts autism as an absence of “vital contact with reality,” between the individual and their world (Feinstein, 2010, p. 6). Minkowski contended that there were two types of autism: autisme riche or rich autism and autisme pauvre or poor autism (Urfer, 2001, p. 285). Autisme riche described individuals whose dreams were intense; whereas, autism pauvre described individuals who lacked the intense fantasies and were capable of success in challenging fields (Urfer, 2001, pp. 285-286). Several more cases were documented in the 1930s that described individuals with autism. Prior to the start of World War II, researchers at the University of Nijmegen used to term “autistic” to describe a group of children who exhibited autistic like behaviors as we associate these same behaviors with autism today (Feinstein, 2010, p. 6). By the end of the 1930s, some professionals around the world were referencing the term autism in a similar context that professionals use the term today.

Hans Asperger and Dr. Leo Kanner are considered to be the two most prominent pioneers in the area of autism. In the early 1930s, Asperger was treating children within a therapeutic
Asperger was using the term “autistic” as early as 1934 (Feinstein, 2010, p. 6). In 1938, he gave a lecture where he spoke about children with “autistic psychopathy,” which was published later that year under, Das psychisch abnorme kind, in the Vienna weekly (Feinstein, 2010, p.10). Asperger also wrote the paper, Die ‘autistischen Psychopathen im Kindesalter (Autistic Psychopathy of Childhood), which was published in the journal, Archiv Für Psychiatrie und Nervenkranckheiten, in 1944 (Barahona-Correá & Filipe, 2015, p. 3). The paper was not translated into the English language until 1991 (Barahona-Correá et al., 2015, p. 3). In the paper, Asperger discussed his research on over 400 children who had autistic psychopathy. Asperger reported that the common characteristics in those with autistic psychopathy included social isolation, normal or precocious language acquisition, lack of reciprocity in social interactions, having above average linguistic skills, but abnormalities in verbal and non-verbal communication (Barahona-Correá et al., 2015, p. 3). He also described some subtle positive features in his clients, including “they often had extremely original thought, they tended to cultivate abstract and intellectualized interests, often had a rare maturity of taste in art, and even a peculiar, fascinating physical appearance, with finely boned features of almost aristocratic appearance” (Barahona-Correá et al., 2015, p 3). Asperger later became the Director of a children’s clinic in 1946. It was at this clinic where a nursing colleague, Viktorine Zak, created the initial program for children, who we would now consider as having Asperger’s syndrome (Feinstein, 2010, p. 13). The therapy focused on play, drama, music, and speech therapy, which were all used to teach the children social skills. In 1980, Asperger died prior to Lorna Wing coning the term Asperger’s syndrome in 1981 (Feinstein, 2010, p. 179). Asperger was a leading pioneer in the field of autism. His research on autistic psychopathy sparked the curiosity in many more professionals, which led to more research and developments in the field.
Dr. Leo Kanner was the other great pioneer in the field of Autism. Kanner wrote the hallmark paper, *Autistic disturbances of affective contact*, which was published in the American Journal, *The Nervous Child*, in 1943 (Maresca & Magistris, 2015, p. 2). Kanner’s paper was based on his study of 11 children with autistic features and provided five elements for diagnostic purposes: “a profound lack of affective contact with other people; an anxiously obsessive desire for the preservation of sameness in the child’s routines and environment; a fascination with objects, which were handled with skill in fine motor movements; mutism or a kind of language that does not seem intended for interpersonal communication; and good cognitive potential shown in feats of memory or skills on performance tests” (Feinstein, 2010, p. 24). Kanner coined the term “early infantile autism” to categorize these individuals and he provided an onset for the condition, i.e., from birth or prior to 30 months old (Maresca & Magistris, 2015, p. 2). Kanner reported that these children had difficulty relating to others or as he called it, “extreme autistic aloneness,” which according to Kanner, was the salient variable of autism (Feinstein, 2010, p. 24). Kanner was also the first person to use the term “refrigerator mother,” which suggest that cold and distant mothers are to blame for their autistic child’s detachment from others (Barahona-Correa et al., 2015, p. 3). In 1960, Kanner reported to Time magazine that autistic children were the progeny of “parents cold and rational who just happened to defrost long enough to produce a child” (as cited in Feinstein, 2010, p. 33). In 1969, at the first congress of America’s National Society for Autistic Children in Washington DC, Leo Kanner formally announced that parents were not responsible for their children’s autism (Feinstein, 2010, p. 99). It was not until 1998 and in Venice, Italy, that the IACAPAP, which is the international umbrella association that represents 60 associations of pediatricians, psychiatrists, psychologists, and educationalists, finally declared that parents have absolutely no responsibility for their
offspring’s autism (Feinstein, 2010, p. 73). Kanner died in 1981; however, his dedication to the field of autism is still recognized by professionals around the world.

In the 1950s, some controversial treatment methods were being used on this population. The first Diagnostic and Statistical Manual of Mental Disorders (DSM I) was published by the American Psychiatric association in 1952. In the DSM I, autism was not categorized as an individual condition, but instead, autism like behaviors were listed under the diagnosis of childhood schizophrenia (Feinstein, 2010, p. 40). During this period in history, many individuals with schizophrenia were institutionalized; therefore, individuals with autism were also institutionalized unless their parents recoiled from the idea of placing their child in an institution. Lauretta Bender, who worked as a Psychiatrist at Bellevue mental hospital in New York, treated this population (as young as 3 years old) with electric shocks (Feinstein, 2010, p. 43, 46). Many individuals that received electric shock treatment were worse off following the treatment. It was also reported that Bender used LSD to treat some of her patients (Feinstein, 2010, p. 43). Bender believed that autism was a defense mechanism that occurred in young schizophrenics, or severely traumatized, or brain-damaged, or emotionally deprived children, to withdrawal from the anxiety they had due to their condition (Feinstein, 2010, p. 44). Oddly, electric shock treatment is still used today, but under the name electroconvulsive therapy (ECT). Per the Mental Health of America Association (2015), ECT is administered to approximately 100,000 individuals per year in psychiatric units or hospitals to treat patients with severe depression, certain schizophrenic syndromes, and acute mania. During the 1950s, institutionalizing and electrical shocks were common practices for individuals with ASD. These methods would continue for several decades, but new and more effective treatment methods would also be introduced.
There were also some beneficial treatment programs that commenced in the 1950s. In 1953, Dr. Carl Fenichel founded the League Treatment Center, in Brooklyn, New York (Feinstein, 2010, p. 52). The treatment center was one of the first centers to allow parent involvement in the treatment process. In 1955, Jeanne Simmons opened the first school for autistic children, Linwood Method, in Ellicott City, Maryland (Feinstein, 2010, p. 51). The school was open from 9 A.M. to 9 P.M., and used behavioral therapy to teach the students who were as young as age three. These two practices, parental involvement and behavioral therapy (now called applied behavioral analysis), are still widely used in treating individuals with autism today. Both methods have been found to be effective ways for helping youth with ASD progress.

In the 1950s, studies commenced for the possible etiology of autism. During this period, it was noticed that many individuals with autism had epileptic seizures. This sprang the belief that the etiology of autism was a neurological disorder. W.R. Keeler conducted the first study on identical twins with autism in 1957 (Feinstein, 2010, p. 49). Several more twin studies were done in the later part of the 1950s that revealed that a significant number of monozygotic (one cell) twins were concordantly autistic, which prompted the belief that autism had a biological root (Nordenbaek, Ohm Kyvik, Jorgensen & Bilenberg, 2013, p. 35). More studies were done during this period that suggested that autism was due to some type of central nervous system injury, or due to both oxygen deprivation and over-oxygenation during birth (Feinstein, 2010, p. 49). Research is still being done today to pinpoint the precise etiology of autism, but it is widely accepted as a neurological disorder.

In the 1960s, research on autism continued. Gilbert Lelord was one of the first persons to use electroencephalogram (EEG) tests on children with autism (Feinstein, 2010, p. 103). EEG tests measure electrical activity in the brain. Another study conducted by R.J. Schain and H.
Yannet in 1960, revealed that a child with autism had a reduction of cells in the hippocampus (Feinstein, 2010, p. 48). These studies were the first to examine the neurological properties in individuals with autism.

In the 1960s, most professionals in the autism field still blamed the parents for etiology of their child’s autism. Bruno Bettelheim wrote, The empty fortress: Infantile autism and the birth of self, in 1967 (Feinstein, 2010, p. 55). The book blamed the parents for their child’s autism. Bettelheim believed that an autistic child’s behavior was in response to a mother, who was “selfish, controlling and as cold as an icebox” (Griffin, 2014, p. 6). Bettelheim also said that the child’s lack of language should be identified as a “defense against emotional pain or any further depletion of the self,” (as cited in Feinstein, 2010, p. 55). Bettelheim believed that autistic children should be separated from their parents’ care in order to cure them. Also, it was reported that Bettelheim hit children with autism as a form of treatment (Feinstein, 2010, p. 59-61). Most countries around the world no longer blame parents for their children’s autism; however, there are still a couple of countries that place the blame on parents.

During the 1960s, parents of autistic children began to fight back. Parents began creating autism associations to spread awareness about autism and to protect their children. The National Autistic Society was one of the first associations created for autism in the United Kingdom (Edward, 1978, p. 566). In 1961, the Creak Committee also in the UK developed a set of nine factors that were used to screen for autism; however, autism was still considered to be childhood schizophrenia during this time (Feinstein, 2010, p. 77). The first US association for autism was created in 1963 in Albany, New York (Feinstein, 2010, p. 98). Associations for autism began to start up in different countries around the globe during this time, including Australia, Scotland, and Denmark. Associations in different regions of the world started advocating for autistic
children’s educational needs, as children with schizophrenia and/or autism had no educational rights. In 1962, the Invalid Children’s Aid Association in the UK opened a boarding school, Edith Edwards House, for children that were disruptive and difficult at the Belmont Hospital Institution (Feinstein, 2010, p. 87). Educational systems for children with autism started to spring up in different areas of the world, primary due to the awareness that the associations were spreading in the field. Sybil Elgar was the first autism specific teacher in the UK (Feinstein, 2010, p. 87). Elgar stared a school in the basement of her home, and she used innovative ways (at the time) to teach the children, e.g., visual aids (Feinstein, 2010, p. 88). Eventually, Elgar’s husband, Jack Elgar, located a school building in Ealing, West London (Feinstein, 2010, p.88). After fundraising, the Sybil Elgar School was opened in 1965. Three members from the band, The Beatles, including John Lennon attended the grand opening. It was reported that John Lennon was playing with the children on the floor and he donated funds to the school (Feinstein, 2010, p. 88). In the U.S, Amy Lettick founded Benhaven in 1967 to educate severely autistic children. Parents sparked a great movement by starting autism associations around the globe to increase awareness about the condition. Their dedication to their children from that point on would change the way individuals with ASD are perceived and treated around the globe today.

A variety of treatment methods were used in the 1960s. Electric shock treatment and behavior therapy were still being used in different institutions around the world. In fact, the Autism Society of American (ASA), which was founded in 1969, endorsed electric shock therapy (Feinstein, 2010, p. 130). In the 1960s, cattle-prods were the only electric shock methods available (Feinstein, 2010, p. 130). Ivar Lovaas, who was an Assistant Professor at UCLA in 1961, endorsed the “refrigerator mother” theory. He contended that autistic children could be treated with rewards or punishments. Lovaas would give M&Ms for rewards. For punishment,
Lovaas would slap the children on their thighs or use electric shock treatment (Smith & Eikeseth, 2010, p. 2). Due to electric shock therapy, many patients lost their ability to talk, started self-harming again, and had lower IQs (Feinstein, 2010, p. 131). Le packing was another controversial treatment method that was used in France and was pioneered by Pierre Delion (Feinstein, 2010, p. 105). Le packing was the practice of wrapping autistic children in cold wet sheets anywhere from 30 minutes to an hour, and was said to rid the autistic child of their “pathological defense mechanisms,” therefore the child would no longer self-harm (Feinstein, 2010, p. 105). Another questionable treatment method posed by the Autism Society of America, proposed that all children with autism be placed on a vitamin B12 regime (Feinstein, 2010, p. 100). Dr. Paul Nordoff and Clive Robbins introduced music therapy to treat autistic children during this period (Feinstein, 2010, p. 101). Additionally, Gibert Lelord and Catherine Barthelemy introduced play therapy to this population to develop their communication skills (Feinstein, 2010, p. 105). Even though there were some controversial treatment methods in the 1960s, this period introduced many beneficial forms of treatments, such as the aforementioned parental involvement, play therapy, and innovative ways of teaching children with autism.

The 1970s were marked with a better understanding of Autism. In 1971, Israel Kolvin conducted a study in which he proposed that the psychosis in children developed in two distinct waves. In the first wave, psychosis symptoms were noticeable by age 3; whereas, in the second wave the symptoms were noticeable between the ages 5 and 15 (Feinstein, 2010, p. 143). Kolvin said that the children in the first wave had characteristics indicative of autism, while the children in the second wave had characteristics that closely mirrored schizophrenia. Many professionals in the field agreed that childhood schizophrenia and autism were two separate conditions and should be treated as separate diagnosis. It was during the 1970s, that professionals started doing
pharmaceutical research to possibly identify treatment. Another study conducted on fraternal twins during the 1970s ( dizygotic or two cell twins), found that when one of the twins was diagnosed with autism, not a single co-twin had autism (Feinstein, 2010, p. 147). A study done on identical twins ( monozygotic or one cell twins) found that out of 11 pairs of twins, 4 pairs were concordant with autism (Feinstein, 2010, p. 147). Also, research during that time found that if a child had autism, then their siblings had a 3% chance of also having autism (Feinstein, 2010, p. 148). This led to the belief that autism was due to genetics. Studies in the 1970s also found that many children with autism had disturbances in sensory modulations around the age of 5 that were labeled as either over-reactivity or under reactivity to sensory stimuli (Feinstein, 2010, p. 154). During this period, research was done on language deficits in autistic individuals. The research indicated that when compared to children with a severe language developmental disorder, children with autism had “a more deviant language, had a more severe comprehension defect, had a more extensive language disability, and showed a defect in the social usage of the language they possessed” (Feinstein, 2010, p. 155). In the 1970s, research was also being conducted on the prevalence of the disorder. Studies at that time found the prevalence rate to be 4.5 per 10,000 individuals (Feinstein, 2010, p. 172). Many of the studies done during this period, pointed to genetics or neurological problems as the possible etiologies of autism.

In 1972, a special school was opened that would change the way autistic individuals are educated and treated. That year, TEACCH (Treatment and Education of Autistic and related Communication Handicapped Children) was founded by Eric Schopler in North Carolina (Blubaugh & Kohlmann, 2006, p. 1). Per Feinstein (2010, p. 58), TEACCH was created in part as a response against Burno Bettelheim’s parental blame for their children’s autism. While Bettelheim wanted to cut parents off from their autistic children, Schopler did the exact opposite.
by encouraging parents to participate to the fullest in their child’s schooling and treatment. TEACCH was developed to keep autistic children and adults in the community rather than locked up inside institutions. From 1972 to 2010, TEACCH has grown from 3 clinics and 10 special autism classrooms in schools, to 9 clinics and over 300 TEACCH affiliated classrooms (Feinstein, 2010, p. 125). TEACCH has training programs for professionals and parents around the world, internships and postdoctoral programs for all levels of higher education students, and a supported employment program (Feinstein, 2010, p. 125). During the 1970s, TEACCH’s methods were widely revered. In fact, Ivar Lovaas would eventually adopt the TEACCH philosophy. TEACCH inspired Lovaas to begin teaching parents to be their children’s teachers by showing them how to give appropriate rewards for good behaviors and how to punish inappropriate behaviors (Lovaas was no longer incorporating corporal punishment) (Feinstein, 2010, p. 133). In 1981, Lovaas published, Teaching developmentally disabled Children: The ME Book, which was a training guide that included seven components that described the principals of behavior therapy (Feinstein, 2010, p. 133). During that time, Lovaas was mostly using positive reinforcements to teach children with ASD appropriate communication and social skills. In 1987, Lovaas published, Behavioral Treatment and Normal Educational and Intellectual Functioning in Young Autistic Children, in the Journal of Consulting and Clinical Psychology (Smith & Eikeseth, 2010, p. 377). The report encouraged professionals to use Applied Behavior Analysis (ABA) on children with autism as an early intervention. ABA therapy is still widely used today on children with autism. Lovaas was not the only professional to be positively influenced by TEACCH. TEACCH became so popular that schools and professionals around the world have adopted their teaching practices.
In the 1970s, individuals with autism were gaining better access to education. South Africa had its first school for children with autism opened in 1970 (Feinstein, 2010, p. 163). Britain’s and Europe’s first autism specific residential school, Somerset Court, was created in 1974 in Brent Knowl, Southwest England (Feinstein, 2010, p. 162). The center was a 52-week residential center for autistic adults (Feinstein, 2010, p. 162). In 1975, educational laws were passed in both the UK and the United States allowing children with any type of disability to have equal educational rights. During the 1970s, autistic children around the world were gaining more rights and were gaining access to public education for the first time. This was truly a turning point in the treatment and education for individuals with autism.

During the 1970s, a variety of treatment methods were being used to assist those with autism. In the UK, a behavior modification method called “operant conditioning” was used (McLeod, 2015). Operant conditioning was developed by Burrhus Frederic Skinner in 1938. It was based on the idea that behavior that was reinforced tended to be repeated, while behavior that was not reinforced tended to cease (McLeod, 2015). In the Netherlands, Nikolaas Tinbergen was treating autistic children with a procedure known as “tampering procedure.” This required the professional to carefully touch the child’s hand with their own hand in order to build a bond, which was believed to bring the child’s personality out (Feinstein, 2010, p. 160). Marth Welch introduced holding therapy in the US during the 1970s (Feinstein, 2010, p. 161). This approach is where the therapist holds the child to comfort them. The Germans adopted this practice and are still using it today (Feinstein, 2010, p. 161). Dr. Carl Delacto published, The ultimate stranger: the autistic child, in 1974. The book discussed Delacto’s belief that autism was caused by a brain injury and it recommended neurological rehabilitation to treat autism by using
sensory integration therapy (Couteau, 2011). During the 1970s, countries around the world were taking notice of autism and trying differing treatment methods on this population.

There were more breakthroughs in the autism field in the 1970s. The term “autism spectrum” was introduced in 1979 by Lorna Wing and Judith Gould after they developed their Handicap, Behavior, and Skills (HBS) schedule (Feinstein, 2010, p. 174). The HBS was a way to collect and record data on the development and behaviors needed for individuals to receive a diagnosis of autism (Jjort Bernsen, 1980, p. 168). Also in 1979, the World Health Organization recognized autism for the first time in the International Statistical Classification of Diseases -9 (ICD-9) (Feinstein, 2010, p. 175). The ICD-9 also listed a new category, Other Specified Pervasive Developmental Disorders, defined as “a childhood disorder predominately affecting boys and similar to autism. It is characterized by severe, sustained, clinically significant impairment of social interaction, and restricted repetitive and stereotyped patterns of behavior. In contrast to autism, there are no clinically significant delays in language or cognitive development” (Feinstein, 2010, p. 176). In the 1970s, autism was gaining more attention in the way it was categorized.

During the 1980s, more research was done on autism. Many professionals contended that autism was a biological disorder that was caused by neurological anomalies. Neurological research found that epilepsy was common in individuals with autism (Feinstein, 2010, p. 206). In 1985, Dr. Margaret Bauman and Dr. Thomas Kemper at Boston University, published research that was conducted on a 29-year-old man with autism who had died due to drowning. The research showed that “cells in the hippocampus, subiculum, and amygdala were found to be more tightly packed and reduced in size” (Feinstein, 2010, p. 207). This research led to the belief that autism could be treated as a biological disorder. During the period, Christopher Gillberg
found that the ages of both the mother and the father could increase the chances of having an autistic child. Gillberg suggested that as the age of the parents increased, so did the chance that their offspring would develop autism. The research that was conducted in the 1980s supported some of the research that was done in the 1970s, which claimed that autism was due to neurological abnormalities.

In the 1980s, major advances were made in the way autism was categorized. In 1980, the third edition of the Diagnostic and Statistical Manual of Mental Disorders (DSM III) separated autism from schizophrenia for the first time and introduced autism under “pervasive developmental disorders” (Feinstein, 2010, p. 40). In the DSM III and under pervasive developmental disorders, a subgroup called “infantile autism” was identified and distinguished by five elements: “lack of responsiveness to others, language absence or abnormalities, resistance to change or attachment to objects, the absences of schizophrenic features, and an onset before 30 months” (Feinstein, 2010, p. 178). As previously mentioned, the term “Asperger’s syndrome” was coined by Lorna Wing in 1981. Asperger syndrome was said to be on a continuum of the autism spectrum. The revised DSM III or DSM III-R that was published in 1987 replaced the term “infantile autism” with “autistic disorder” (Barahona-Correa et al., 2015, p. 4). The DSM III-R also used the term pervasive developmental disorder-not otherwise specified (PDD-NOS) (Barahona-Correa et al., 2015, p. 4). The category changes made in the 1980s were a major turning point in the way that individuals with ASD would be diagnosed and treated in the U.S.

Since autism finally had its own category in the DSM III, new assessment tools had to be created. In the 1980s, two diagnostic tools were developed: the Autism Diagnostic Interview (ADI) and the Autism Diagnostic Observation Schedule (ADOS), which are both still used
around the globe today (Thompson, 2013, p. 87). Both diagnostic tools quantify the three areas that define ASD: “social reciprocity, communication, and restricted, repetitive behaviors and interests” (Feinstein, 2010, p. 184). Eric Schopler and other staff at TEACCH started working on developing the Childhood Autism Rating Scale (CARS) in the 1970s, which they completed and was finally published in 1980 (Feinstein, 2010, p. 177). CARS is a screening test used to determine if a child would be diagnosed with autism (Thompson, 2013, p. 93). CARS is the most universal tool used today to diagnosis autism in children as young as 2 (Feinstein, 2010, p. 177). Schopler and Robert Reichler developed the Psychoeducational Profile (PEP) to assess the skills and behaviors of youth with autism, which would be used to create behavioral intervention plans and educational programs (Feinstein, 2010, p. 178). The PEP was published in 1980 and later revised in 1990. Just like the CARS assessment, PEP is still used today by educational professionals around the world (Feinstein, 2010, p. 178). It is amazing that these assessment tools that were developed approximately 30 years ago are still being used today.

Theory of mind was first considered for individuals with autism in the 1980s. Theory of mind is the ability of children as young as age four, to reflect on the emotions, desires, and beliefs of themselves and others (Maresca & Magistris, 2015, p. 5). Theory of Mind is important because “the ability to make inference about what other people believe to be the case in a given situation allows one to predict what they will do (Baron-Cohen, Leslie & Frith, 1985, p. 39). Uta Frith, Alan Leslie, and Simon Baron-Cohen conducted research on theory of mind at the Medical Research Council’s Cognitive Development Unit in London (Feinstein, 2010, p. 211). Frith, Leslie and Baron-Cohen concluded that theory of mind was either absent or critically delayed in individuals with autism, which explained why they struggled with social communication (Feinstein, 2010, p. 211). In 1983, Heinz Wimmer and Josef Perner published a paper that
provided a methodology called the “Sally-Anne test” to study theory of mind in children ages 3 to 4. The Sally-Anne test uses two dolls, “Sally” and “Anne,” that are in a room with the child and a researcher. The child observes Sally putting a marble in her basket and then Sally leaves the room. Anne then takes the marble from Sally’s basket and places it in her [Anne’s] basket. The researcher will then ask the child where Sally will look for the marble when she returns to the room. Children who have theory of mind will say that Sally will look for the marble in her basket. Children without theory of mind will say Sally will look in Anne’s basket because they cannot comprehend that Sally’s belief will be different from their own belief (Cosgrave & McGuinness, 2016). Interestingly, brain scans that were conducted revealed that there were specific patterns of activation in specific regions of the brain associated with theory of mind, and those brain regions in autistic individuals had reduced activation (Feinstein, 2010, p. 212). The research shows that many children with ASD lack theory of mind.

New developments emerged in the areas of diagnosis and research in the 1990s. In 1993, the World Health Organization published the ICD-10, which formally acknowledged Asperger’s syndrome for the first time (Barahona-Correa et al., 2015, p. 5). In 1994, Asperger’s syndrome was also listed in the DSM IV. Both the DSM IV and the ICD-10 were vague in their descriptions of Asperger’s syndrome, by indicating that if an autistic child does not have any problems with either language or early development, then they are diagnosed with Asperger’s syndrome (Feinstein, 2010, p. 197). Simon Baron-Chohen and his Cambridge associates developed the Checklist for Autism in Toddlers (CHAT) in the late 1980s to diagnosis autism in toddlers as young as 18 months (Feinstein, 2010, p. 187). The diagnostic tool looked at two criteria: the absence of pretend play and the absence of joint attention, since the presence of both are typically present in toddlers by age 18 months and are normally delayed or absent in children.
with autism. In 1992, Baron-Cohen and his Cambridge associates conducted research on high risk siblings, and found that siblings who had an absence of both pretend play and joint attention would later receive an autism diagnosis (Feinstein, 2010, p. 187). In 1996, Baron-Chohen would do a follow-up study with 16,000 toddlers. The research showed that 11 out of 12 toddlers who lacked these two skills would later receive a diagnosis of autism (Feinstein, 2010, p. 187). However, the study also indicated that CHAT had a significant rate of false negatives, i.e., the study missed several children who would later receive a diagnosis of autism (Feinstein, 2010, p. 187). Another study in the 1990s conducted by Marilyn Miller and Kerstin Stromland, found that 5% of adults who had been exposed to the drug, thalidomide, while in their mother’s womb, went on to develop autism (Feinstein, 2010, p. 209). This suggested that autism could possibly develop within the first few weeks of the mother’s pregnancy, “when the embryo’s brain and the rest of the nervous system were just beginning to develop” (Feinstein, 2010, p. 209). Dr. Manuel Casanova conducted research on the brain and found that there was an increase in the number of “mini-columns of neurons in the neocortex” in people with autism (Feinstein, 2010, p. 209).

Mini-columns are the smallest part of cells capable of processing information. In individuals with autism, mini-columns are smaller in size, but more numerous in numbers (Feinstein, 2010, p. 210). Casanova believes that this may explain why many individuals with autism are hypertensive to sensory input and/or more prone to having seizures (Feinstein, 2010, p. 210).

The research conducted in the 1990s provided professionals and parents with hope that one day the cause(s) of autism would be known.

There was also a spurious study conducted in 1998. That year, Dr. Andrew Wakefield reported that the triple MMR (measles, mumps, and rubella) vaccine could cause autism in children (Feinstein, 2010, p. 226). Wakefield said that in their study, eight out of twelve children
who had the vaccine went on to develop “autistic enterocolitis,” which is an intestinal inflammation. This spread fear in many parents around the globe, who then refused to have the vaccine administered to their children. Several follow up studies were conducted, which revealed that the MMR vaccine did not cause autism. However, many parents still refused to have the vaccine administered to their children.

In the 21st century, several new developments have emerged in the field of autism. In 2003, Dr. Eric Courchesne at the University of California found that infants who had dramatic head growth went on to develop autism (Feinstein, 2010, p. 191). Another study conducted by Dr. Lonnie Zwaigenbaum at the University of Alberta in 2008, also found that infants who had rapid head growth, went on to develop autism (Feinstein, 2010, p. 191). This was a major finding, as early intervention services could now be offered sooner to these children to help them develop their communication and social skills. In 2013, the American Psychiatric Association published the 5th edition of the Diagnostic and Statistical Manuel of Mental Health Disorders (DSM-V). The DSM-V excluded Asperger’s syndrome and Pervasive Developmental Disorder not otherwise specified, and named Autism Spectrum Disorder (ASD) as the general diagnosis for individuals who meet the criteria. This name change has broadened the range for individuals to receive an autism diagnosis, and as a result more individuals have received an ASD diagnosis. In 2012, 1 in 88 individuals were diagnosed with ASD, but as of February 2015, 1 in 68 individuals were diagnosed with ASD (Center for Disease Control and Prevention, 2015). This means that more individuals will qualify for services from schools, states, and local agencies, which can better prepare them for life after high school.

Currently, there are differing beliefs on autism around the world. In China, autism is considered a disability, and children with autism have equal rights as other children with
disabilities (Feinstein, 2010, p. 238). Some Chinese parents refuse to tell friends and family members that their child has ASD. In India, parents are still blamed for causing their children’s autism, and their culture believes that autism is so rare that they don’t have to deal with the issue (Feinstein, 2010, p. 241). In Pakistan, autism is considered to be “the curse of Allah,” and they use some atypical methods to treat autism, such as making those with autism drink dirty water intended for livestock (Feinstein, 2010, p. 242). In Japan, 30% of the population believes that autism is an emotional disorder or it is due to the parent’s inability to parent. Also, 20% of Japanese parents are reluctant to have their children play with children who have ASD (Feinstein, 2010, p. 244). In South Africa and Nigeria, many children with autism are kept in institutions, and some parents take their children with autism to witch doctors to drive out the demons that possess their children (Feinstein, 2010, p. 246). Israel provides several programs to those with autism including educational, vocational, residential, and leisure activities (Feinstein, 2010, p. 247). Many countries around the globe are gaining insight into ASD and are trying to improve their educational and treatment methods for this population. Unfortunately, there are several countries that lag behind in their beliefs, education, and treatment of those with ASD.

Federal Laws

There are several US federal laws that created rights for disabled individuals. The Rehabilitation Act of 1973 (Public Law 93-112) was the federal law that authorized certain state programs be paid by federal grants to assist individuals with disabilities in obtaining and maintaining employment. Federal funds are allocated to state vocational rehabilitation agencies to provide the programs. Some of the grant programs include vocational rehabilitation, independent living, and vocational counseling. The Rehabilitation Act was amended in 1986 (Public Law 99-506) authorizing state rehabilitation agencies to provide supported employment
services to individuals with severe disabilities who could not traditionally be placed in competitive employment. This is often the case for youth with ASD. The 1986 amendments served to displace the traditional practice of long-term placement in sheltered workshops. The Act was amended again in 1998 changing its name to the Workforce Investment Act (Public Law 105-220), which authorized one stop career centers for individuals needing assistance in securing employment. Also, the Act allowed all agencies involved to share employment resources, such as job openings. This amendment allowed individuals with disabilities to be served by various programs and not solely dependent upon state VR agencies.

In 1975, Congress enacted the Education for All Handicapped Children Act (Public Law 94-142). This law was passed to assist states and local governments in preserving the rights, meeting the needs, and improving the lives of individuals with disabilities and their families (Office of Special Education Programs, 2015). Prior to this law, many states had laws prohibiting children with disabilities (e.g., deaf, blind, emotionally disturbed, mentally retarded) from receiving public education. Instead, many individuals with mental illnesses were institutionalized (Office of Special Education Programs, 2015). The Education for All Handicapped Child ACT mandated each state and locality to guarantee each child, no matter what disability they have, to receive free public education. The law also spurred the development and implementation of successful programs for early childhood interventions and special education for children with disabilities (Office of Special Education Programs, 2015). This Act was instrumental in allowing individuals with disabilities to receive an education with their peers and no longer be discriminated against.

In the 1990s, schools were mandated to assist individuals with disabilities in the transition process. In 1990, The Education for All Handicapped Child ACT was amended and the
name was changed to the *Individuals with Disabilities Education Act* (IDEA) (Public Law 108-446). The IDEA required “public schools to develop a transition plan for students with individual education programs (IEPs) aged 16 or older, or younger if appropriate.” This mandate mostly derived from research in the 1980s revealing that young adults with disabilities had poor post-school integration, significantly high dropout rates, high unemployment rates, low rates of post high school education, and “low-quality independent living and community participation outcomes” (Baer et al., 2003, p. 7). The IDEA was amended in 1997, which required that by age 14, "a statement of transition services had to support the student’s high school course of study (e.g., vocational education or advanced academics)” (as cited in Baer et al., 2003, p. 8.). The prominent features of the IDEA are that it mandated schools to start the transition process for individuals with disabilities and it required the process to be documented in the student’s IEP.

School officials were also mandated to assess whether students were eligible to receive special education services. The IDEA requires an evaluation committee to determine whether a student meets the diagnostic criteria for a disability. Such a committee will likely include the student’s parents, teachers, and a school psychologist (MacFarlane & Kanaya, 2009, p. 662). The evaluation committee is required to use the diagnostic standards delineated in the *Code of Federal Regulations* (CFR) and not the DSM-V (MacFarlane et al., 2009, p. 662). The salient variance between the CFR and the DSM-V is that “a child’s impairment and behaviors must affect his or her educational functioning in order to qualify for services under the Autism category” (MacFarlane et al., 2009, p. 663). Therefore, some high functioning students with ASD may never be tested by a school psychologist due to meeting or acceding the academic standards while being in their appropriate grade level. All U.S. states are given autonomy to
develop their eligibility determination for special education services, as long as it meets or exceeds the standards listed in the CFR (MacFarlane et al., 2009, p. 665).

It wasn’t until 1990 that autism was listed in the CFR as a special education diagnosis (National Information Center for Children with Disabilities, 1997). During the 1991-1992 school year, public education institutions had the option of offering special education services to students with ASD, but they were mandated to do so by the 1992-1993 school year (MacFarlane et al., 2009, p. 663). At the beginning of the 1992 school year, children with autism could officially be enrolled in special education classes and have an IEP that described their transition plan.

Georgetown Texas

The city of Georgetown is located in Williamson County just 25 miles north of Austin. There are approximately 55,000 residents residing in Georgetown (City of Georgetown, 2015). The City has 3 high schools with a total combined student population of 4005 (Public School Review, 2015). With the current ratio of 1 out of 68 students having ASD, there are approximately 59 students with ASD enrolled in a Georgetown high school. It is safe to assume that the majority of this population are age 14 or older; therefore, they should have a statement of transition services in their IEP and have or are about to start the transition process.

State and community agencies are also a part of the transition process. According to the Georgetown Independent School District’s (GISD) webpage (2015), there are two agencies that assist Georgetown ISD students with ASD during the transition process: Bluebonnet Trails Community Services and the Texas Department of Assistive Rehabilitation Services (DARS),
which is the Texas vocational rehabilitation agency. Hopefully, my research will locate more agencies that provide transitional programs to youth with ASD who reside in Georgetown.

**Agencies that Provide Transitional Services to the Georgetown Community**

Bluebonnet Trails Community Services is located in Round Rock, TX and is the local mental health/behavioral health services provider for Williamson County residents. Bluebonnet Trails Community Services offers a wide range of services, including an autism program, behavioral health services, crisis services, disaster services, early childhood intervention program, employment services, family health care, intellectual developmental disabilities services, justice involved services, mental health first aid, peer supports, substance abuse services, supported housing, and veterans’ services (Bluebonnet Trails Community Services, 2015). To find out specific information about their transitional programs, a survey will be sent to the Program Director or another administrator within the employment department.

The Texas agency, DARS, has a location in Round Rock, TX. According to their website, DARS offers the following services to individuals with disabilities: autism program, transition planning, independent living assistance, rehabilitative technology resource center, supported employment, counseling, training, medical treatment, assistive devices, and job placement assistance, amongst others (Texas Department of Assistive and Rehabilitative Services, 2015). To find out specific information about their transitional programs, a survey will be sent to the Program Director and other staff who are familiar with the transitional services offered to youth with ASD.
Chapter 3: Components of Effective Transitional Programs

Chapter Purpose

The purpose of this chapter is to discuss the components of an ideal model transitional program for youth with ASD (ages 16-21) that will guide the youth from high school to employment. There is a need for this model tool to gauge the effectiveness of transitional programs in communities. Scholarly literature was used to develop the ideal model tool. This chapter provides the rationale behind the model assessment tool.

Introducing the Model Assessment Tool

The components of an effective transitional program from high school to employment for youth with ASD ages 16 through 21 are found in the conceptual framework (table 3.1) below.

Table 3.1: Conceptual Framework

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<thead>
<tr>
<th>Practical Ideal Type Category 1</th>
<th>Literature Sources</th>
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<tbody>
<tr>
<td>High School Level Process</td>
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<tr>
<td>1.1 Individual Education Programs (IEP) Transition Planning</td>
<td>Dente &amp; Coles (2012); Hart, Grigal &amp; Weir (2010); Lee &amp; Carter (2012); McDonough &amp; Grant (2010); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss, (2012); Baer, Flexer, Beck, Amstutz, Hoffman, Brothers, Stelzer &amp; Zechman (2003); Szidon, Ruppar &amp; Smith (2015).</td>
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<td>1.2 Family &amp; Other Support Systems</td>
<td>Baer, Flexer, Beck, Amstutz, Hoffman, Brothers, Stelzer &amp; Zechman (2003); Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); Dente &amp; Coles (2012); Hart, Grigal &amp; Weir (2010); Test, Mustian, Kortering &amp; Kohler (2009); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss (2012); Benz, Lindstrom &amp; Yovanoff (2000); Szidon,</td>
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<td>1.3 Interagency Collaboration</td>
<td>Ruppar, &amp; Smith (2015); Chiang, Cheung , Li &amp; Tsai (2012).</td>
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<td>Baer, Flexer, Beck, Amstutz, Hoffman, Brothers, Stelzer &amp; Zechman (2003); Fabian, Lent &amp; Willis (1998); Test, Mustian, Kortering &amp; Kohler (2009); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss, (2012); Benz, Lindstrom &amp; Yovanoff (2000); Test, Mustian, Kortering &amp; Kohler (2009); Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); Dente &amp; Coles (2012); Hart, Grigal &amp; Weir (2010); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss, (2012); Benz, Lindstrom &amp; Yovanoff (2000); Chiang, Cheung , Li &amp; Tsai (2012).</td>
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<td>1.5 Inclusion in General Education</td>
<td>Eisenman, Pell, Poudel &amp; Pleet-Odle (2015); Wehman, Schall, McDonough, Molinellie, Riehle, Han &amp; Thiss (2012); Keane, Aldridge, Costley &amp; Clark (2012).</td>
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<td>1.6 Independent Living Skills</td>
<td>Schall, Wehman &amp; Carr (2014); Duran (2013); Bellamy (1978); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss, (2012).</td>
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<td>1.7 Vocational Education Training (VET)</td>
<td>Baer, Flexer, Beck, Amstutz, Hoffman, Brothers, Stelzer &amp; Zechman (2003); Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); Dente &amp; Coles (2012); Hart, Grigal &amp; Weir (2010); Test, Mustian, Kortering &amp; Kohler (2009); Wehman, Schall, McDonough, Molinellie, Riehle, Ham &amp; Thiss, (2012); Benz, Lindstrom &amp; Yovanoff (2000); Szidon, Ruppar, &amp; Smith (2015); Chiang, Cheung , Li &amp; Tsai (2012).</td>
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<td>1.8 Work Internships/Paid Employment</td>
<td>Baer, Flexer, Beck, Amstutz, Hoffman, Brothers, Stelzer &amp; Zechman (2003); Fabian, Lent &amp; Willis (1998); Test, Mustian, Kortering &amp; Kohler (2009); Wehman, Schall, McDonough, Molinellie, Riehle,</td>
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<td>Practical Ideal Type Category 2</td>
<td>Ham &amp; Thiss (2012); Benz, Lindstrom &amp; Yovanoff (2000); Test, Mustian, Kortering &amp; Kohler (2009).</td>
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<td>2. State Level Process</td>
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<td>2.2 Rehabilitation Counselor</td>
<td>Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); Chan, Chronister, Allen, Catalano &amp; Lee (2004); Chappel &amp; Somers (2010); Agran, Cain &amp; Cavin (2015).</td>
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<td>2.3 Employment Services</td>
<td>McDonough &amp; Grant (2010); Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); Hayward &amp; Schmidt-Davis (2003); Schall, Wehman &amp; Carr (2009).</td>
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<td>2.4 Rehabilitation Technology Services</td>
<td>Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); McDonough &amp; Grant (2010); Tsiopela &amp; Jimoyiannis (2013); Strickland, Coles &amp; Souther (2013); Bennett (2013).</td>
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<tr>
<td>2.5 Supported Employment</td>
<td>Del Valle, Leahy, Sherman, Anderson, Tansey &amp; Schoen (2014); McDonough &amp; Grant (2010); Schaller &amp; Yang (2005); Keel, Mesibov &amp; Woods (1987); Schall, Wehman &amp; Carr (2014); Wehman, Lau, Molinelli, Brooke, Thompson, Moore &amp; West (2012); Hiller, Campbell, Mastriani &amp; Izzo (2007); Lee &amp; Carter (2012).</td>
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<tr>
<td>Practical Ideal Type Category 3</td>
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<td>3. Community Level Process</td>
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<tr>
<td>3.1 Specialized Employment Education and Training</td>
<td>McDonough &amp; Grant (2010); Keel, Mesibov &amp; Woods (1997); Berg (2015); Hillier, Campbell, Mastriani &amp; Izzo (2007); Liu, Wong, Chung, Kwok, Lam, Yuen, Arblaster &amp; Kwan (2013); Lynas (2014); Strickland, Coles &amp; Southern (2013); Tsiopela &amp; Jimoyiannis (2013); Wehman, Lau, Molinelli, Brooke, Thompson, Moore &amp; West (2012).</td>
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Table 3.1

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<tr>
<th>Component</th>
<th>References</th>
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<tr>
<td>3.2 One Stop Career Centers</td>
<td>Schall, Wehman &amp; Carr (2014); Workforce Investment Act (1991); Jorgensen Smith (2013).</td>
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<tr>
<td>3.3 Follow-up support</td>
<td>McDonough &amp; Grant (2010); Keel, Mesibov &amp; Woods (1997); Garcia – Villamisar &amp; Hughes (2006); Hillier, Campbell, Mastriani &amp; Izzo (2007); Wehman, Lau, Molinelli, Brooke, Thompson, Moore &amp; West (2012).</td>
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There are three main components in the Conceptual Framework listed in table 3.1 above. The three components that were identified in the literature include the high school level process, state level process, and community level process. In a community, there is not one sole entity responsible for the transitional process from high school to employment for youth with ASD. In order for the transitional process to be effective, each level of the process should be involved. This may be challenging for smaller communities, as they may not have the resources to implement all levels of the transition process. However, the practical ideal type helps ascertain how similar the process or policy is “to an ideal or standard” and how the process can be enhanced (Shields & Tajalli, 1998, p. 203). Also, the conceptual framework should be used as a guide and improved upon as new research on the subject is introduced.

The three components will be discussed in detail and will be used to gauge the transitional programs at each level in Georgetown, Texas. Then, recommendations will be made to the agencies in each level that provide transitional programs to youth with ASD in Georgetown.

**High School Level Process**

High schools were required to provide transitional services to youth with ASD by the 1992 – 1993 school year. The high school process starts with the creation of an individual education program (IEP), which maps out the transitional services that the youth with ASD will...
participate in. The high school transitional process should include the youth with ASD, family members, other supportive individuals, and collaboration with other agencies. During the transition planning, all parties involved should discuss their roles in assisting the youth with ASD go from high school to employment. This may include preparing the youth with ASD for higher education, if that is the route they want to take and can be successful in that environment. However, youth with ASD are more likely to pursue employment immediately following high school rather than attending a higher education facility.

An effective high school process will include teaching the youth with ASD self-determination skills, including the youth with ASD in general education courses, if possible, offering vocational education programs, and offering work internships or paid employment opportunities. If the high school cannot provide some of the services, then other collaborating agencies will need to provide the services.

**Individual Education Program/Transition Planning**

The initial step for a high school is to develop an individual education program (IEP). An IEP is defined as “a written statement for each student with a disability that is developed, reviewed and revised by the ARD committee, of which parents are active members. The IEP includes the student's present levels of academic achievement and functional performance, participation in state and district-wide assessments, transition services, annual goals, special factors, special education, related services, supplementary aids and services, extended school year services, and least restrictive environment” (Texas Transition and Employment Guide, 2014). The IDEA of 1990 (Public Law 108-446) defines transition planning as “a coordinated set of activities for a child with a disability that (A) is designed to be within a results-oriented process, that is focused on improving the academic and functional achievement of the child with
a disability to facilitate the child’s movement from school to post-school activities, including post-secondary education, vocational education, integrated employment (including supported employment), continuing and adult education, adult services, independent living, or community participation; (B) is based on the individual child’s needs, taking into account the child’s strengths, preferences, and interests; and (C) includes instruction, related services, community experiences, the development of employment and other post-school adult living objectives, and, when appropriate, acquisition of daily living skills and functional vocational evaluation.”

The definition of transition planning illustrates the wide spectrum of services and programs that schools can use during the process. The high school transition process should start by the time the youth with ASD reaches the age of 16 or younger, if deemed appropriate by the IEP team. However, as previously mentioned, a statement of transition services must be in the student’s IEP by the time the student is age 14. Lee and Carter (2012, p. 991) advise that one of the biggest “hallmarks” of the transition planning process is that it must be based on the student’s needs, strengths, interests, and preferences. Without these critical elements, the disabled student will likely not be motivated to adhere to their transition plan. Not only should the transition plan be structured around the student’s strengths and needs, it should also incorporate the values of the student’s family, the school, and the community (Woolcock, Stodden & Bisconner, 1992, p. 236). Since ASD affects all aspects of the individual’s life, it is vital that all persons involved in the transition planning process acknowledge these affects and develop a well thought out transition plan that will address the specific needs of the youth. Szidon, Ruppar, and Smith (2015, p. 148) advise that educators should consider and plan for the wide range of outcomes that can be expected from students with ASD. In order to do this, Szidon et al. (2015, p. 148) suggest
that the IEPs be individualized and carefully tailored programs should be identified for the youth with ASD to make substantial progress.

It is imperative that the student with ASD participate in their IEP meeting. Since the transition planning should be based on the student’s strengths, needs, interests, and preferences, they need to be present to provide their input. Notwithstanding the importance of the student’s presence and participation at the meeting, Cameto, Levine, and Wagner (2004, p. ES3) found that 22.6% of students with disabilities do not attend their IEP meetings while in high school, 44.8% of students said their participation in the meeting was minimally, 30% said they participated moderately in the meeting, and only 2.6% said they actively participated in and actually led their meeting. One way to encourage the youth with ASD to participate in their IEP is to use person-centered-planning (PCP). PCP is a “process that can allow individuals with disabilities to participate more actively in their transition planning” (Hagner, May, Kurtz & Cloutier, 2014, p. 4). In PCP, the student directs the process, which is based on their strengths, abilities, desires, and preferences (Hart, Grigal & Weir, 2010, p. 141). PCP allows the student to be the focal person in the transition meeting. Since the student is in charge, they describe their values and dreams with other transition team members. During the process, the student and transition team members will identify the student’s deficits and limitations to achieving the student’s life goals. The process encourages the student to have the main voice on how they can overcome their deficits, while other team members can chime in with suggestions. Even though PCP is strongly recommended to encourage disabled students to participate in their IEPs, PCP is only used 4.5% of the time during IEP meetings (Powers et al., 2005, p. 51).

There are several practices that schools can incorporate to encourage PCP. Schools can encourage PCP by preparing the student with ASD for their IEP transition meeting; doing
activities between the student and the transition meeting facilitator prior to the meeting to build a rapport; having flexible meeting arrangements; allowing the student to attend the meeting from afar; and having available accommodations for the student to communicate (Hagner et al., 2014, p. 4). Schools can prepare the student for the meeting by role playing the scenario and having a trusted adult discuss the importance of the meeting. The trusted adult can also provide the student with a fill in the blank script that allows the student to voice their desires at their IEP/transition meeting. Since many youths with ASD struggle with change, being flexible with when and where the meeting takes place will encourage the student to participate in and/or lead their meeting. For example, if the student is not comfortable talking in a large office, then maybe the meeting should take place at the student’s home where the student is more likely to speak. Some students may not feel comfortable sitting around a table discussing their transition plan. If this is the case, the student should be allowed to sit somewhere comfortable that still allows them to participate in the meeting. Lastly, since many students with ASD struggle with communication, any necessary accommodations will need to be made for the student to communicate their desires. For example, students with ASD should be allowed to use non-verbal gestures (e.g., thumbs up or down or nod their head) to approve or disapprove of something being discussed at their meeting. Another example is allowing the student with ASD to use electronical devices to communicate. The aforementioned PCP strategies should help the student with ASD actively participate in and possibly lead their transition meeting.

Szidon et al. (2015) identified five steps to good transition planning. The first step is to “identify transition goals.” This is done by identifying the student’s needs in the areas of employment, post-secondary education, and independent living (Szidon et al., 2015, p. 148). Some factors in this process include determining where the student will be (e.g., community,
college, employment) following high school, what skills they will need to be successful in these environments, and assessing the student’s abilities in the skills they will need. Szidon et al. (2015, p. 148) advise that a common error in transition planning for youth with ASD, is the failure of the IEP team to consider and evaluate the student’s deficits in key areas associated with ASD. For example, if the student with ASD has significant challenges with verbal communication, the IEP team should consider whether the student will be able to succeed in certain fields and what accommodations they will need to be successful in those settings. Schall et al. (2015, p. 44) advise that it is necessary for IEP team to address any eccentric behaviors that the youth with ASD may have from an employer’s perspective. For example, if the youth with ASD says repetitive phrases or does repetitive inappropriate behaviors, the IEP team will want to create goals that diminish the phrases and/or repetitive behaviors. After the initial assessments of the student’s strengths and needs, the IEP team should use the data to formulate reasonable, measurable post-secondary goals, and create transitional services. The transitional services should include the necessary classes and trainings in order for the student with ASD to achieve their goals.

Szidon et al.’s (2015, p. 148) second step is to link the post-secondary goals with the IEP goals. Common errors Szidon et al. (2015, p. 148) found in transition IEP writings were that they failed to have any linkage between the postsecondary goal and the IEP goals. High school personnel should be able to research and identify the skills students with ASD will need for specific careers, and the IEP goals should focus on the students achieving those skills to prepare them for their careers. Schall et al. (2015, p. 46) advise that as youth with ASD enter adulthood they will need skills in career awareness, self-management, self-determination, and
independence to have more rewarding lives. IEP goals should address how the student will develop these critical skills and how they will achieve their post-secondary goals.

Szidon et al.’s (2015, p. 148) third step is to troubleshoot and adjust transition and IEP goals. This is an on-going step, as youth with ASD may have multiple challenges that the IEP team will need to address as problems arise. During this step, the IEP team should identify supports that will assist the student in achieving their goals. Per Baer et al. (2003, p. 9), the transition practices must be accepted by all involved stakeholders. This may include parents, professionals, vocational programs, post-secondary programs, social workers, state vocational rehabilitation agencies, and potential employers. The more stakeholders that are involved in the process, should lead to several ideas on how the student with ASD can achieve their goals.

The fourth step identified by Szidon et al. (2015, p. 150) is to “provide opportunities to teach skills.” The IEP team will need to identify appropriate transition programs for the youth with ASD. Some appropriate transition programs may include vocational training, paid employment, post-secondary education, independent living, adult services, and community participation (Westbrook et al., 2015, p. 11). This step involves identifying how and where the student will learn the skills they need. Some of the skills can be taught in a classroom setting, such as writing resumes. Other skills may be better suited for the community, such as using public transportation to get to and from employment. It is the transition team’s job to identify where the student can learn the skills they will need to achieve their employment goals.

The final step identified by Szidon et al. (2015, p. 151) is to evaluate the student’s progress. During this step, if the student with ASD is not making significant progress, the IEP team should return to the second and/or third steps to adjust the transition goals and make the necessary alterations for the student to learn the needed skills. Most schools only meet on an
annual basis to discuss the student’s progress on their IEP goals. It is prudent that schools do more than what is required of them and discuss the students’ progress more frequently, such as on a quarterly basis. This will allow all parties to make alterations sooner, which may significantly improve the student’s success in obtaining their IEP goals.

Family and other Support Systems

Support systems are the individuals that “give assistance to” others, “especially financially” (Oxford Dictionary, 2015). Students with ASD “need a personal relationship with a trusted adult who will be available to encourage their efforts, validate their fears, and celebrate their accomplishments” (Benz, Lindstrom & Yovanoff, 2000, p. 522). In order to be successful during the transition process, students with ASD will need the extra support from family members and others. The student’s family is critical during the entire transition process. Family members have witnessed the youth with ASD struggle, fail, progress, and achieve; therefore, second to the youth with ASD, family members can provide valuable insight during the transition planning. For example, since many students with ASD have deficits in communication, parents will know what accommodations their child will need to effectively communicate their preferences during transition meetings. Since most family members are the autistic youth’s biggest support system and will continue to be their biggest support system throughout their life span, family members’ values should be considered secondary to the autistic student’s. By the time the autistic youth turns 16, parents should have an idea on whether their autistic child will be able to live independently, can continue living with them, or if they will need to live in an adult assisted living facility. Parents and guardians can offer multiple support during the transition process, some examples include giving advice, helping their child develop and learn about their personal interests and strengths, assisting their child with locating job openings,
completing applications, providing transportation, offering encouragement, and helping them problem-solve (Lee et al., 2012, p. 993). Parents play a vital role during the transition process and can significantly help their autistic child succeed in life.

School personnel can also play a vital role during the transition process. Dente and Coles (2012, p. 33) recommend that school social workers be included during the transition process. Social workers can act as case managers to assist with the assessment, planning, and interventions needed for a smoother transition from high school to post-high school activities (Dente et al., 2012, p. 28). Social workers can also help the student with ASD and their family members gain access to community resources and programs by providing referrals and/or introducing them to such programs. Social workers can also teach students with ASD about their rights under the Americans with Disabilities Act and teach them how to request appropriate work accommodations that will assist them in being successful at their worksites (Lee et al., 2012, p. 995). This may include helping the student with ASD consider the positives and negatives of discussing their disability with coworkers and supervisors. Special education teachers should also be required to attend the student’s IEP meeting. Special education teachers should be aware of the student’s cognitive abilities, and communication and social skills. The teachers should be able to provide valuable insight during the transition meeting. Supportive adults are an important part to the student’s success. Supportive adults not only provide valuable insight, but they also show that they care about the student, which is more powerful than providing insight.

**Interagency Collaboration**

Interagency collaboration is defined as “a coalition where interdependent and strategic actions are taken, but where purposes are narrow in scope and all actions occur within the participant organizations themselves or involve the sequential or simultaneous activity of the
participant organizations” (Mandell, 1999, p. 5). Involving community agencies that can support students with ASD during the transition process is consistently recognized as a fundamental practice for successful transition plans (Schall et al., 2014, p. 52). All parties involved in the transition planning process must accept the transition goals. In order to get buy in from as many stakeholders as possible, it is prudent that the stakeholders get invited to the IEP/transition meetings. Hart et al. (2010, pp. 141-142) recommend transition teams be composed of, but not limited to, representatives from the state vocational rehabilitation department, local or state education agency, developmental disabilities agency, workforce development, University Centers of Excellence and Disability, Medicaid waiver initiatives, business networks, and social security administrations. At the transition meeting, all parties should collaborate to identify education and employment related support services that can help the student with ASD achieve their post-high school goals. All involved agencies should state their role in helping the student with ASD achieve their goals, so that services are not duplicated. If none of the agencies in the transition meeting can meet a need of the student, then the members should refer the student and their family to relevant employment-related services in the community. This may include, but is not limited to, career assessments, career counseling, vocational assessments, benefits counseling, and transportation services (Chappel & Somers, 2010, p. 119). Per Schall et al. (2014, p. 55), “the key to a successful transition outcome is early involvement with these programs during the planning process.” Interagency collaboration is critical for the student’s success. All collaborating agencies should work closely to identify the best approaches to help the student obtain their goals.

All collaborating agencies need to establish their role in the process. If the school can meet some of the student’s needs at the school, then the school should take ownership of those
tasks. Likewise, if state or community agencies can meet certain needs of the student, then those agencies should offer those services. For example, schools can offer to teach students self-determination skills and independent living skills, while community organizations can help students locate jobs in the community and offer supported employment. Dispersing the duties of the transition process allows each agency to have more time to solely focus on their duties during the process.

Members from the state vocational rehabilitation agency (VR) should be included in the transition process. The 1992 amendments to the Rehabilitation Act (Public Law 102-569) encouraged VR members to serve secondary students. The Rehabilitation Act was amended and reauthorized in 1998 changing the name to The Workforce Investment Act of 1998. The Act required VR offices to collaborate with other agencies, including schools that were involved in the transition process. Also, it required state VR agencies to collaborate with the state education agency using a contract that delineates the transition process and delivery of transitional programs to disabled students (Chappel & Somers, 2010, p. 117). Notwithstanding the 1998 amendments to the Rehabilitation Act, members from the VR only attend IEP transition meetings 1% of the time (Powers et al., 2005, p. 56). Members from the VR should be included in the student’s IEP transition meeting, as they can discuss ways in which they can assist the student, school, and family during the transition process (Hart et al., 2010, p. 143). Chappel et al., (2010, p. 119) contend that VR personnel and other community agencies should be invited to transition meetings when the student is within 3 to 4 years away from graduation. This allows the student with ASD and their family to build a relationship with the VR counselor. Also, it allows them to become familiar with the agencies that will be involved in the youth’s life following high school. Schools can do a better job of inviting VR counselors and other agencies
to transition meetings by having a designated staff, e.g., school social worker, guidance counselor, or school principal, who is responsible for developing strong relationships with such agencies and ensuring they are invited to the transition meetings. This practice will likely ensure that the participation rates increase for VR staff and other community agency representatives at the transition meetings.

There are several school programs that include members from the local VR and community agencies during the transition process for students with ASD. One such program is the Real Employment Alternatives for Developmentally Disabled Youth (READDY). This program consists of a network of service providers, including school administrators, vocational special education teachers, state vocational rehabilitation counselors, and social workers, who collaborate together to provide individualized training to the student to meet their vocational and educational needs (Berkell, 1987, p. 16). One prominent achievement of the READDY program is that it opened collaboration efforts between a special education school and the local VR office. In the READDY program, the VR office provided extra support to graduates from the READDY program by helping the READDY staff locate appropriate worksites for students with ASD, and by providing services to the students for specified durations following graduation (Berkell, 1987, p. 19).

Another school program that includes the local VR agency during the transition process is the Youth Transition Program (YTP) in Oregon. The YTP includes three key personnel to assist students with ASD with gaining employment: a certified special education teacher, who is the Teacher Coordinator, a Transition Specialist, who is supervised by the Teacher Coordinator, and a Rehabilitation Counselor from the local VR office (Benz et al., 2000, p. 512). Students that are in the YTP receive “(a) transition planning centered around the youth’s post-school
goals and self-determination, which is coordinated with relevant adult agencies; (b) instruction in vocational, academic, personal-social content areas and independent living, and assistance to remain in school and obtain high school diploma; (c) paid vocational training while in the program, and help securing employment or entering post-secondary training upon completion of the program; and (d) up to 2 years of follow-up support services, as needed” (Benz et al., 2000, p. 512). The YTP uses student centered planning practices that allow the students to choose their goals. Students who have participated in YTP enjoyed the program because they created their goals and then the program was centered around their goals. Program staff gave extra support to students by providing one on one tutoring and encouraging the participants to challenge themselves. Students reported staff “never let up,” encouraged them to attend school every day, complete all their work, and then the staff assigned them more work (Benz et al., 2000, p. 520). The program gave the students the opportunity to explore career paths, learn goal setting skills, and it taught them self-confidence (Benz et al., 2000, p. 520). Findings from the YTP were positive. Students who participated in the YTP for a year or longer were almost twice as likely to graduate with a standard diploma, compared to the students who participated in the program less than a year. Also, students who held two or more work experiences while in the program were twice as likely to secure employment following the program (Benz et al., 2000, p. 215). Both the READDY and YTP programs had success because several agencies with supportive adults were involved in the process and were dedicated to helping the youth reach their goals.

According to Benz et al. (2000, p. 523), interagency collaboration for providing transition services to youth with disabilities should include written contracts that list the roles and responsibilities of each participating agency, and cross-agency professional development to compliment the collaborative activities of all agencies involved. This paper will discuss the
specific roles of community based organizations and state VR offices in greater detail in later sections of this chapter.

**Self-Determination**

Self-determination refers to a skill set that results from a person’s ability to make decisions and solve problems that are aligned with their life goals (Schall et al., 2014, p. 46). An individual is said to be self-determined when they can make their own choices, solve life-problems, establish goals, and develop action steps to achieve their goals (Schall et al., 2014, pp. 46-47). Teaching self-determination skills to students with ASD while they are in high school can significantly increase their odds of being successful in life. Benitez, Lattimore, and Wehmeyer (2005, p. 443) found that teaching self-determination skills in high school significantly improved post-school outcomes for students with disabilities. Additionally, Wehmeyer and Palmer (2003, p. 139) found that developing self-determination skills in high school was positively correlated to higher education and independent living success for students with disabilities. Mastery in self-determination requires the student with ASD to develop communication and social skills, so they can advocate for themselves and direct their own lives (Schall et al., 2014, p. 47). When teaching communication, educators should consider how to do this by teaching self-determination skills at the same time. Schall et al. (2014, p. 47) advise that this can be done by teaching the youth with ASD to converse the necessary purposes of behavior, rather than focusing on naming items. For example, educators should teach students with ASD how to appropriately ask for assistance, take breaks, and communicate their preferences. Even though self-determination is a necessary skill for students with any disability, only 6.5% of students with disabilities receive self-determination education in high school (Powers et al.,
2005, p. 51). Teaching self-determination skills to students with ASD will not only prepare them for employment, but will also prepare them to be successful in all environments.

Teaching students with ASD self-determination skills can be challenging. Hart et al. (2012, p. 143) advise that one way to improve a student’s self-determination skills is by having them actively participate in or facilitate their IEP transition plan meetings while they are still in high school. By leading their IEP transition meeting, the student learns how to advocate for themselves.

Achieving one’s goals is the most important component of self-determination. Educators can teach self-determination skills and help students reach their goals by using the “Take Action: Making Goals Happen” teaching module (German, Martin, Huber Marshall & Sale, 2000, p. 28). The Take Action lesson plan systematically teaches students a process to attain their own goals. The plan includes a student-oriented videotape, lesson plans that describe the activities, worksheets, and student competency checks (German et al., 2000, p. 29). Teachers can decide between two curriculums: long term goal attainment or daily goal attainment. The long-term goal attainment program is composed of eight lessons and normally takes between eight to ten hours of instruction. Students are taught how to break their long-term goals into smaller, achievable, specific, and short-term steps that can be achieved in a week. Then, the students answer six questions to create their plan: (1) “What will I be satisfied with? (2) How will I get feedback on my performance? (3) Why do I want to do this? (4) What methods will I use? (5) What help do I need? and (6) When will I do it?” (German et al., 2000, p. 29). At week’s end, the students evaluate their progress and make any needed alterations to their plans. The attaining daily goals plan requires teaching six to ten hours of instruction. During this plan, students choose goals that can be achieved daily and they answer the following questions: (1) “What
methods will I use? (2) What help do I need? and (3) When will I do it?” (German et al., 2000, p. 30). Students evaluate and alter their goals daily. One very unique component of this module, is that the students get daily goal cards that identify goals listed on their personal IEP. Some examples of goals in this module include: developing a plan to walk to the grocery store, and successfully completing specific tasks with 3 or fewer prompts. Educators will want to decide which plan is better suited for the student with ASD.

During the Take Action daily goal attainment module, students learn the following process: “plan, act, evaluate, and adjust” (Garman et al., 2000, p. 32). They will then watch a video, which shows students using the Take Action process to attain their goals. The teacher will teach the students about strategizing, scheduling, and supports. Next, students review sample plans, write practice plans, and create their own plans to achieve their goals. Also, students learn evaluation strategies to ascertain if their strategies, schedules, and supports helped them achieve their goals. If they do not achieve their goals, students learn how to adjust their plans to attain their goals.

At the beginning of each day, students pick three goals from their stack of cards, and then complete their plans. Teachers assist some students with reading and/or writing their plans, if needed. After students complete their plans, they are not provided with any instructions, prompts, or feedback on their goal-attainment performance throughout the day. At the end of the day, and after the students complete their evaluations and make any necessary adjustments, the teacher gives praises for goal attainment (Garman et al., 2000, p. 32).

German et al. (2000, p. 33) found that students who have participated in the Take Action process gradually increased their goal attainment skills over time. Within two days to a week,
students’ goal-attainment surpassed their base-line levels. By the 10th day, all students attained at least two of their goals, and 66% of the students achieved all three of their goals. Students even gave the following positive comments: “Boy, I really could have gotten this goal if I would have done this strategy,” and “I should have scheduled this goal during PE” (German et al., 2000, p. 35). If schools do not use the “Take Action” teaching module, then they should consider other modules that have showed success with teaching self-determination skills to students with ASD.

**Inclusion in Regular Education Classes**

Inclusion in regular education classes is defined as “a popular policy/practice in which all students with disabilities, regardless of the nature or the severity of the disability and need for related services, receive their total education within the regular education classroom in their home school” (Learning Disabilities Foundation of America, 2015). Inclusion in regular education classes is a moderate predictor of post-high school transition outcomes in the areas of employment, post-secondary education, and independent living for students with disabilities (Eisenman, Pell, Poudel & Pleet-Odle, 2015, p. 110). There are several benefits of inclusion in regular education classes for youth with ASD, including increasing opportunities for social interactions, peer role modeling to learn social and communication skills, and better preparation for future inclusive environments, such as employment and higher education settings (Keane, Aldridge, Costley & Clark, 2012, p. 1015). Since there are several benefits to including students with ASD in regular education classes, educators should determine the best approach to use with this population.

Inclusion in regular education classes is rare for students with ASD. Students with ASD only participate in general education classes about 33% of the time, while 62% of their time is spent in special education classes (Wehman et al., 2012b, p. 144). Being in general education
classes is a significant challenge for students with ASD since many have Full Scale IQs lower than 70, challenges with communication and socialization, and they may exhibit some repetitive behaviors. Such challenges may prevent them from understanding the material, limit their ability to ask questions or ask for help and it may create an environment that distracts their fellow classmates. Additionally, Keane et al. (2012, p. 1015) found that some students with ASD who participate in inclusion in regular education classes are the targets of bullying. Despite all these challenges, research has shown that youth with ASD can be successful in general education classes.

There are several practices that high schools can adopt to help students with ASD attend and succeed in general education classes. The student and school staff should be well prepared prior to the start of the transition process from special education classes to regular education classes. This preparation includes offering satellite classes that prepare students with ASD for regular education classes, trainings for staff on how to best work with students with ASD, having specialized curriculums integrated with regular education curriculums, having adaptive teaching methods and positive behavior support, and teaching in small groups with a focus on communication and social skills (Keane et al., 2012, p. 1005). Eisenman et al. (2015, 102) contend that successful inclusive schools have “structures in place to monitor student attendance and academic engagement and help students identify long-term goals, access the resources they need to attain their goals, and build relationship with caring adults.” If properly prepared, students with ASD can be successful in regular education classes.

A high school in the mid-Atlantic area was able to successfully include all students with any disability, including ASD in all general education classes. At this high school, all students with any disability were assigned to a learning support coach (LSC). The students met with their
LSC for 12 minutes every day to review their individual goals, organize their academic material, get feedback on their progress, and they received reminders of any upcoming projects or tests (Eisenman et al., 2015, p. 103). The LSC also met with students throughout the day to provide support or assistance as needed. One LSC was assigned to a specific grade level. If the student was struggling academically, the student could meet with their LSC or a general education teacher for after-school tutoring twice per week (Eisenman et al., 2015, p. 103). LSCs also worked with the general education teachers to create instructional alterations that were tailored for certain students. Some contributions of success included all teachers being involved in weekly professional development that focused on specific instructional methods, such as reading comprehension strategies and vocabulary that could be used in all classes (Eisenman et al., 2015, p. 110). Students attributed their success in general education to the measures that were put in place that ensured their needs for relationships, autonomy, and competence were being met with the help of supportive and caring adults (Eisenman et al., 2015, p. 108).

LSCs in this high school also taught the students self-determination skills. During the 9th grade, the LSCs met with the students to discuss the importance of attending their IEPs and the notion that they would progressively increase their role to speak during their IEP meeting each year, to include eventually leading the meeting. In 9th grade, the students had a script that covered the major elements of their IEP meeting and provided ways the students could introduce specific topics. With the help of the LSC, the student filled in the blanks on their script that identified their weaknesses, strengths, and goals. Then, the student read their script at their IEP meeting. Each year, components of the script were cut out, so by the time the student was in 12th grade, they only used an outline and discussed their goals without a script (Eisenman et al., 2015, p. 108). This process helped the students learn how to advocate for themselves.
While inclusion in regular education classes is challenging for students with ASD, it is not impossible. All schools should attempt to include youth with ASD in general education classes, as this has shown to improve their communication and socialization skills, and prepares them for future inclusive environments. However, if the youth with ASD is significantly struggling in a regular education class and not learning or progressing with the extra accommodations provided, then the school should place the student in an environment where they can be successful.

**Independent Living Skills**

Independent living skills can be defined as functional skills that allow individuals to actively participate in and adapt to their current and future environments (Wehman et al., 2012b, p. 6). Part of the transition process should include teaching independent living skills. This has historically been absent for youth with ASD. According to Bellamy (1978, p. 55), much of this neglect is due to a large percentage of the ASD population being institutionalized in the past. Regardless of the past, it is important for high school educators to teach youth with ASD skills that will prepare them for life after high school. According to Schall et al. (2014, p. 48), individuals with ASD frequently struggle with functional skills regardless of their intellectual abilities. Even though functional skills are challenging for youth with ASD, it is important for educators to teach students with ASD such skills.

There are a variety of ways educators can teach students with ASD functional skills. One way is by teaching the students how to navigate through different facilities in the community as independently as possible. This may include teaching students how to shop at department and grocery stores, use the public transit system, and eat at different restaurants, such as fast food and casual dining restaurants (Duran, 2001, p. 13). This process should also include teaching the
students with ASD about the community based organizations and state agencies that will provide services to help them gain employment and live independently following high school. Teachers can also use the daily attainment goal cards, as described earlier in the Take Action module to help students learn independent living skills. For example, a goal card could require the student to identify the bus route to their favorite restaurant or grocery store. Educators can also use pictures, photographs, and videos that illustrate how to do certain functional skills in the community, such as purchasing items at a store. Role playing the scenario after observing the illustration can further prepare the student. There are several ways that educators can teach students with ASD functional skills. Since every student learns differently, educators should try multiple ways of teaching the functional skills, until the best method is identified for a student.

Vocational Education and Training (VET)

Vocational education training activities are defined as “organized educational programs offering a sequence of courses which are directly related to the preparation of individuals in paid or unpaid employment in current or emerging occupations requiring other than a baccalaureate or advanced degree. Such programs shall include competency-based applied learning which contributes to an individual's academic knowledge, higher-order reasoning, and problem-solving skills, work attitudes, general employability skills, and the occupational-specific skills necessary for economic independence as a productive and contributing member of society. Such term also includes applied technology education” (U.S. Code of Education, 1997).

Early in life, children develop career awareness by observing their parents work and by role playing certain jobs, e.g., police officers and doctors. Career awareness evolves into career exploration for most middle and early high school students without disabilities, as they start doing chores and work odd jobs (Schall et al., 2014, p. 49). Most students start thinking about
what route they will pursue to prepare for their future by the time they are in their third year of high school. For example, they start contemplating going to college, joining the military, or doing vocational training. However, youth with ASD often lack “this developmental sequence from pretend play to exploration to career preparation” (Schall et al., 2014, p. 49). Since youth with ASD are behind on this sequence, high schools need to start incorporating vocational education programs as early as possible to this population.

There are numerous vocational education activities that schools can offer. Lee et al. (2012, p. 992) include career interest assessments, career or job counseling, career aptitude assessments, written career plans, tours of local businesses, job shadowing programs, college fairs, tours of technical schools or colleges, career exploration classes, resume writing classes, mock interviews, tech-prep programs, job fairs or career days, job resource centers, job placement services, and mentorship programs with local employers. Chiang, Cheung, Li, and Tsai (2012, p. 1836) found that youth with ASD that received career counseling in high school were more apt to gain employment. Additionally, Barer et al. (2003, p. 15) contend that the best practices for vocational activates for schools should include career fairs, job shadowing, resume writing, in-school jobs, informational interviews, and career exploration classes. As one can tell, there are many vocational education activities that schools can offer. Schools should provide as many VET programs as possible to help prepare the students.

Community agencies can also provide vocational education trainings that cannot be offered inside a school. Community vocational education activities should include job shadowing, on-the-job training, technical trainings, and tours of technical schools and colleges. Berkell (1987, pp. 14-15) contends that there are four salient reasons to have students with ASD perform vocational education trainings in the community. First, since the programs are in the
community, they provide multiple opportunities for the students to have social interactions. Second, since there are various worksites in most communities, there are more opportunities to match job tasks to the student’s characteristics and preferences, than what can be taught in a school setting. Third, on-site vocational education has been shown to increase the probability of skill generalization by offering the training in an actual business. Lastly, providing the vocational education in the community positively affects the attitudes and perceptions of the non-disabled population about the employment skills and potential of individuals with ASD. As discussed, providing vocational education trainings in the community has several benefits to both the student with ASD and society.

Duran (2001, p. 11) looked at three different vocational trainings for students who were severely autistic. In one vocational setting, the autistic student learned job skills that are prevalent in an office or clerical job, e.g., filing, sorting, and stapling. In the second vocational setting, the students learned grocery store tasks such as sweeping, mopping, stocking and shredding vegetables. The last vocational setting was in a cafeteria, where the students bused tables, sorted silverware, and loaded/unloaded the dishwasher. Duran (2001, p. 12) found that severely handicapped students with autism had significant challenges with tasks that had several steps or required multiple transitions. For example, the youth had challenges unloading the dishwasher and then putting away the clean dishware/silverware. This population also had difficulty mopping and sweeping. However, several students could complete clerical tasks (e.g., stapling, collating, and labeling envelops) anywhere from 80 to 90 percent independently or with minimal assistance (Duran, 2001, p. 12). Also, students with ASD did well with some cafeteria tasks, such as bussing tables and folding table cloths. It is important for vocational teachers to find out which employment settings students with ASD will be successful in.
The READDY program (previously discussed) provides vocational training in the community to students with ASD. The READDY curriculum teaches career development by focusing on job skills, interpersonal social skills and job related activities of daily living skills (Berkell, 1987, p. 15). The program prepares students who are dual diagnosed with ASD and intellectually disabled for either supported or competitive employment, depending on their ability level. As previously mentioned, the program consists of a network of services providers, including school administrators, vocational special education teachers, state vocational rehabilitation counselors, and social workers, who collaborate to provide individualized training to the student to meet their vocational and educational needs (Berkell, 1987, p. 16). Early in the career development process, a tremendous amount of effort is put forth to involve the student’s parents and family members to gain their support.

In the READDY program, the special education teachers teach job skills to the students with ASD during school hours at various community based worksites. During this time, the students learn academic and vocational skills, while working and earning a wage. The program established a positive relationship between the school and the local Office of Vocational Rehabilitation, which assists program staff in obtaining job placements for students who graduate from the program at worksites in their community (Berkell, 1987, p. 16).

The program starts with a comprehensive evaluation of the student’s strengths, needs, weaknesses, and preferences in vocational and job related skills. The evaluation helps to determine the best instructional methods and jobsites that the student will benefit from. According to Berkell (1987, p. 17), “on-the-job evaluation provides the most realistic work-oriented method for assessing students with autism.” Prior to the student starting at the jobsite, a job analysis is conducted to determine the specific types of job skills the student will need.
During this time, the analyzer will scan the environment to consider what accommodations, if any, are needed to assist the student with ASD. The READDY teacher spends at least one day performing the job at the worksite in order to identify any potential problems that may arise during the training and to rectify the problem prior to the student starting. During the training part of the program, the READDY teacher is present at all times to ensure the job is completed satisfactorily.

Some READDY students may require supported employment. In these cases, the student is able to perform work tasks for wages, but require continuous support to maintain their job. Supported employment may require a Job Coach to remain in close contact with the student to provide extra support. If the READDY student can be competitively employed, they may require some time-limited support until they become competent at the job and can work independently. Competitive employment should be a long-term goal for all students with ASD who are seeking employment. The READDY program should be considered a model for helping students with ASD gain employment.

**Work Internships/Paid Employment**

Work internships are defined as “a period of time spent receiving or completing training at a job as part of becoming qualified to do it” (Cambridge Dictionaries On-line, n.d.). Paid employment is defined as “work, especially for someone else, for which you are paid” (Cambridge Dictionaries On-line, n.d.). Several studies have found that students with ASD who are employed during high school have a higher probability of post-high school employment (Test et al., 2009; Baer et al., 2003). According to Schall et al. (2014, p. 49), one of the best ways to prepare students with ASD for employment is through internships. Internships provide opportunities for students to learn functional and social skills at a worksite, allows them to get
acclimated to a work schedule, and it allows them to become cognizant of their work interests. Some skills that students with ASD may learn at a worksite include, but are not limited to, learning how to do a job, how to ask for help, time management skills, and appropriate business etiquette. All schools should incorporate work internships into their transitional process for students with ASD.

Schools can also offer students with ASD unpaid internships at the school. Some examples include allowing the student to help cook and clean in the cafeteria, landscaping, and certain janitorial duties. Although, some of these may not sound prestigious, the student with ASD may feel a sense of empowerment by being able to learn and contribute back to the school.

Most students with ASD will require additional support at the worksites to help them succeed. Supports at worksites may include co-workers who train the student with ASD until they can master the necessary skills needed to perform the job, or they may require the help of a Job Coach. A Job Coach is a person who helps students with ASD throughout the entire employment process. Prior to the start of the job, the Job Coach will prepare the student for the job interview, meet with the employer to negotiate a job description that will help the student be successful, scan the work environment for any potential problems that will need to be addressed prior to the student starting the job, and recommend any accommodations that the student will need to be successful on the job. At the start of the job, the Job Coach will accompany the student to teach them the job and how to navigate their way through the work environment. The Job Coach will remain at the worksite until the student masters the skills necessary to perform the job satisfactorily. The Job Coach will teach the student how to interact with co-workers during breaks and ask for assistance. Once the student with ASD masters the skills necessary to perform their job, the Job Coach’s presence at the worksite fades out. However, the Job Coach
can provide follow-up support by remaining in close contact with the employer and student to address any future problems that may arise. Such supports can help the youth with ASD maintain employment longer.

Schools can help students with ASD gain work experience by networking with local businesses. One such successful program is Project Search. Project Search is a “business-led transition model where schools create collaborative partnerships with local large businesses such as hospitals, bank centers, or government centers” (Wehman et al., 2012b, p. 145). The program offers work experience in the community, training in independent living and employability skills, work placement assistance through collaboration with school personnel, local employers and the local VR (Wehman et al., 2012b, p. 145). In this business model, the student participates in a paid internship for their last year of high school. Instead of attending school, the student goes to the worksite every day. During the first hour, the student receives personal instruction in job skills, which may include lectures, discussions, role-playing, and practicing job tasks (Wehman et al., 2012b, p. 146). During the next 4 hours, the student is at the worksite performing the work tasks that they learned during the instructional hour. The student concludes the day with 45 minutes of deliberation about their day and the necessary skills (e.g., communication and social skills) they needed to be successful (Wehman et al., 2012b, p. 146). During the program, the student meets with their teacher and Job Coach weekly to review their performance in the areas of job skills, overall production rate, accuracy, communication, interaction with coworkers, appearance, and safety (Wehman et al., 2012b, p. 148). Students with ASD that participated in Project Search required additional help at the beginning of the program, which consisted of a 2 students to 1 staff ratio. By the end of the school year, the student to staff ratio was 2.5 students
to 1 staff. Project Search took a very hands-on approach, which proved to be successful with students with ASD.

Project Search had two case studies completed on students with ASD. One of the students, Aiden, needed help learning professional behaviors, such as not touching others, giving personal space, and using appropriate language. The Job Coach helped Aiden develop these skills. Aiden also struggled with hand writing and his job required him to write down dates. To accommodate Aiden with this challenge, his Job Coach gave him a rubber stamp. Aiden was also confronted by a customer who felt that Aiden was looking at him funny. The Job Coach taught Aiden how to apologize, walk away to avoid conflict, and to call the Job Coach during challenges.

Jason was another student with ASD who participated in Project Search. Jason enjoyed reading, but struggled with time-management and was often caught reading instead of working. Jason’s Job Coach gave Jason a daily schedule with his duties and he set a timer on Jason’s cell phone, so that Jason knew when to take breaks. Such on the job accommodations can significantly help a student with ASD be successful at a worksite.

Project Search was very successful. Over 75% of disabled students who participated in the program achieved competitive employment at prevailing wages (Wehman et al., 2012b, p. 146). One of the reasons for Project Search’s high success rate was the collaboration of a wide variety of partners, which included school personnel, students, their families, host business liaisons, developmental and/or intellectual disability agency members, RV staff, and employment services organization staff (Wehman et al., 2012b, 146). The use of multiple
agencies to help students with ASD gain work experience in the community is an effective way to assist this population with gaining employment following high school.

**State Level Process**

The *Rehabilitation Act of 1973* (Public Law 93-112) is the federal law that authorized certain state programs to be paid by federal grants to assist individuals with disabilities in obtaining and maintaining employment. The federal funds get channeled to state vocational rehabilitation (VR) agencies to provide employment services to individuals with ASD. State VR agencies can offer multiple employment services to individuals with ASD, such as career counseling, career assessments, career technology services, and supported employment, among others. In order to receive state services, the youth with ASD must apply and be eligible to receive services.

This section will discuss the state level process and the best-practice employment programs that state VR agencies can provide to youth with ASD. The initial state process is to determine eligibility. If determined eligible for VR services, the youth with ASD will be assigned to a Rehabilitation Counselor (RC). The RC will then provide or refer the youth to pre-employment services until the youth with ASD gains employment or the youth is not making any progress. Rehabilitation technology services and supported employment will be defined and discussed in detail, as both programs are successful in helping youth with ASD gain employment. State VR agencies also teach independent living skills and collaborate with other agencies to help youth with ASD gain employment and live independently.

**Eligibility Requirements**

An eligible youth is defined as someone who is at least age 14, but not older than age 21, and requires additional assistance to complete an educational program, or to secure and hold
employment (The Workforce Investment Act, 1998). According to McDonough et al. (2010, p. 93), in order to receive state services, the individual must have a “disability that is an impairment to employment” and there is an expectation that the VR services provided will result in the individual obtaining employment. An individual with a disability is defined by the *Americans with Disability Act of 1990* as, “(1) DISABILITY The term “disability” means, with respect to an individual (A) a physical or mental impairment that substantially limits one or more major life activities of such individual; (B) a record of such an impairment; or (C) being regarded as having such an impairment (as described in paragraph (3). (2) MAJOR LIFE ACTIVITIES (A) In general for purposes of paragraph (1), major life activities include, but are not limited to, caring for oneself, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. (B) Major bodily functions for purposes of paragraph (1), a major life activity also includes the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions. (3) REGARDED AS HAVING SUCH AN IMPAIRMENT for purposes of paragraph (1)(C): (A) An individual meets the requirement of “being regarded as having such an impairment” if the individual establishes that he or she has been subjected to an action prohibited under this chapter because of an actual or perceived physical or mental impairment whether or not the impairment limits or is perceived to limit a major life activity. (B) Paragraph (1)(C) shall not apply to impairments that are transitory and minor. A transitory impairment is an impairment with an actual or expected duration of 6 months or less.”
Most youth with ASD should be eligible for VR services. Most youth with ASD have records of having impairments (for longer than 6 months) in the major life activities of communication, caring for oneself, performing manual task, and working. If there are any questions about whether or not the youth with ASD has such impairments, the VR representative should speak with school and medical personnel, and also review school and medical records to affirm or deny eligibility. A best practice established by the Mississippi VR agency, is to determine eligibility and open eligible cases within a few days (Del Valle et al., 2014, p. 105).

To better assist the disabled individual, state VR agencies should have policies in place outlining the eligibility process, what documents are needed to determine eligibility, and the maximum number of days allotted for VR personnel to determine eligibility after an application is submitted for services. Such practices can help the youth with ASD receive state services efficiently.

**Rehabilitation Counselor**

A Rehabilitation Counselor is a state employee who “works collaboratively with the client to understand existing problems, barriers and potentials in order to facilitate the client's effective use of personal and environmental resources for career, personal, social and community adjustment following disability” (Chan, Chronister, Allen, Catalano, and Lee, 2004, p. 3). The 1997 amendments to the Rehabilitation Act required all new hires and currently employed Rehabilitation Counselors to have or procure a master's degree in rehabilitation counseling and/or be able to acquire the national Certified Rehabilitation Counselor (CRC) certificate (Chan et al., 2004, p. 2). Rehabilitative Counselors have an important role in helping youth with ASD gain employment. It is important that they have extensive education and receive continued education to better serve this population.
Rehabilitation Counselors have multifaceted roles. They must be willing to assist the youth with ASD in adapting to their environment, assist communities in accommodating the needs of the youth, and advocate for the full participation of the youth in all aspects of society, with a specific focus on employment and independent living (Chan et al., 2004, p. 3). A best practice implemented by a few VR agencies is to have Rehabilitation Counselors that have specialized caseloads specifically designed to serve transition-aged youth with ASD (Del Valle et al., 2014, p. 105). Rehabilitation Counselors with specialized ASD caseloads should receive extensive training on how to best serve this population. The Texas VR agency hired a behavior specialist to assist Rehabilitation Counselors working with individuals with ASD (Del Valle et al., 2014, p. 105). Another best practice implemented by the Texas VR agency is “SharePoint,” which is a software system that posts and shares ideas around the best practices that have worked with diverse populations, such as those with ASD (Del Valle et al., 2014, p. 104). This system allows Rehabilitation Counselors to brag about any innovative techniques they have used with specific populations that have worked, and it allows other Rehabilitation Counselors around the state to steal these ideas. Having specialized Rehabilitation Counselors and having technology that allows employers to share information on best practices can significantly increase the chances that a youth with ASD will gain employment.

Rehabilitation Counselors should be involved in the transition process early. VR personnel should attend school IEP transition meetings when the youth with ASD is within 3 to 4 years away from graduating (Chappel et al., 2010, p. 119). This allows the youth and the youth’s family to become familiar with the agency and the Rehabilitation Counselor while they are still in high school. Even though their attendance at IEP transition meetings is important, 48% of Rehabilitation Counselors said that school personnel never invited them to an IEP transition
meeting within a one-year timeframe (Agran, Cain, and Cavin, 2015, p. 150). If VR representatives are not invited to the school IEP transition meetings by school personnel, it is imperative that the state VR agency identifies ways of being included in said meetings. One-way state VR agencies can ensure that they know of and attend school IEP transition meetings, is by having one agency representative that networks with the high schools in a region. This state representative can call the schools prior to the start of the school year and once per month during the school year to discuss any upcoming transition meetings and ensure they have the necessary documents on the student prior to the transition meeting. The representative can either attend the transition meetings in their region or delegate the meetings to another Rehabilitation Counselor who will be assigned to the case. Ensuring that Rehabilitation Counselors attend the youth’s IEP transition meeting early on, should be a best practice adopted by all state VR agencies.

**Employment Services**

According to the *Rehabilitation Act of 1986*, employment services means “such services as will increase the independence, productivity or integration of a person with developmental disabilities in work settings, including such services as employment preparation and vocational training leading to supported employment, incentive programs for employers who hire persons with developmental disabilities, services to assist transition from special education to employment, and services to assist transition from sheltered work settings to supported employment settings or competitive employment.” Some examples of the employment services that VR agencies can offer include vocational training, assistance with resume writing, mock interviews, job readiness classes, and vocational counseling, among others. After a youth with ASD is deemed eligible for services and is assigned to a Rehabilitation Counselor, the Rehabilitation Counselor will administer vocational assessments that are used to identify the
youth with ASD’s strengths, weaknesses, interest, and preferences (McDonough et al., 2010, p. 91). State agencies will need to do thorough assessments, which should be similar to the way high schools do their initial assessments, i.e., they will want to include family members and use person-centered-planning (PCP) to encourage the youth with ASD to participate in the process. The initial assessments will lead to the creation of an Individual Plan for Employment (IPE), which will discuss the youth’s employment goals and the employment services and programs that the youth will participate in to achieve their goals (McDonough et al., 2010, p. 91). The youth with ASD and their family members should also participate in the creation of the IPE. Rehabilitation Counselors will then provide the necessary employment services until the youth with ASD maintains employment for 90 days in a position that is related to the employment goals identified in their IPE, or the person is not making progress towards gaining employment (McDonough & Grant, 2010, p. 91).

There are numerous employment services that Rehabilitation Counselors can offer to assist the youth with ASD gain employment. Schall et al. (2014, p. 56) advise that some employment services include vocational counseling, guidance, and referrals to other agencies in the community. McDonough et al. (2010, pp. 91-93) include training, counseling, transportation assistance, post-secondary education, and job placement. Del Valle et al. (2014, p. 108) include career exploration services that allow the youth with ASD to identify their abilities, job interests, and values. The Mississippi VR offers soft skills training that teaches communication skills, attendance and punctuality etiquette, appropriate hygiene and dress, time management, and interpersonal interaction skills (Del Valle et al., 2014, p. 109). There are numerous employment services that VR agencies can provide and pay for, if the youth with ASD is eligible for such services.
VR agencies should also provide incentive planning and benefit counseling. A concern that many individuals with disabilities have with working, is that they will lose some or all of their Supplemental Security Income (SSI) or Social Security Disability Income (SSDI). Work incentive planning and benefit counseling should assuage this trepidation in some individuals with ASD. During the work incentive planning and benefit counseling, the Rehabilitation Counselor should provide financial scenarios that will help the youth with ASD understand how much salary they will need to earn in order to lose their benefits, and that earning more salary can significantly enhance their lifestyle. Del Valle et al. (2014, p. 109) found that the VR case closure success rate for individuals that complete work incentive planning is 76.51% compared to 43.36% of those who do not complete the program. In Utah, work incentive planning increased the odds of having successful case closure by 15%, and those individuals that completed the program earned an average of “$451.59 more per month than those individuals who did not receive the service.” (Del Valle et al., 2014, p. 109). An extra $450 per month can significantly improve any individual’s lifestyle.

**Rehabilitation Technology Services**

Rehabilitation technology services is defined in the Reporting Manual for the Case Service Report (RSA-911, 2004, p. 27) as, “the systematic application of technologies, engineering methodologies, or scientific principles to meet the needs of, and address the barriers confronted by, individuals with disabilities in areas that include education, rehabilitation, employment, transportation, independent living, and recreation; includes rehabilitation engineering services, assistive technology devices, and assistive technology services.”

Individuals with ASD have monotropic attention systems, which means their “attention is tunneled, their interest is trapped and they perceive objects as isolated entities, out of their
context” (Tsiopela & Jimoyiannis, 2013, p. 217). Therefore, it is prudent to train youth with ASD in ways that will help capture their attention and allow them to stay focused. Rehabilitation technology services have been found as effective ways to capture this population’s attention and train them. Tsiopela et al. (2013, p. 217) advise that computers are suitable technology systems for youth with ASD, because computers by nature are monotropic, i.e., they are rule-governed, predictable, they offer very transparent boundary conditions, and they offer controlled stimuli for all sensory modalities. One way computers can help train youth with ASD is through video modeling. Video modeling normally “involves presenting a video recorded sample of models engaging in a specific series of scripted actions or verbalizations 2-3 times before the individual is directed to perform the scripted behaviors” (Allen, Wallace & Renes, 2010, p. 340). Per Strickland, Coles, and Southern (2013, p. 2473), video modeling has improved a wide variety of behaviors in people with ASD, including “complex social cognition skills.” Additionally, Allen et al. (2010, p. 340) found that video modeling has been used to enhance general purchasing skills, conversation skills, and daily living skills for individuals with ASD. The use of rehabilitative technology services can dramatically prepare a youth with ASD for employment and help them in other areas of their life.

Video modeling programs have been proven to be effective methods for training youth with ASD. JobTIPS is one such video modeling program that helps prepare youth with ASD for employment. JobTIPS uses a web-based interviewing model and virtual reality practice lessons to help youth with ASD understand and participate in social situations that prepares them for interviews (Strickland et al., 2013, p. 2473). JobTIPS helps individuals with ASD go through five employment steps: determining their career interest, finding a job, getting a job, keeping a job and other job topics, such as leaving a job (Strickland et al., 2013, p. 2473). In their study,
Strickland et al. (2013, p. 2475) found that 11 individuals with ASD who participated in video modeling did better during job interviews compared to the 11 individuals with ASD in the control group, who did not participate in video modeling. Another video modeling program conducted by Allen et al. (2010, p. 344), had four youth with ASD (ages 16, 17, 18, and 25) watch a video model of how to work inside an inflatable mascot. The results showed that after watching the video model several times, the youth could perform the job satisfactorily. Furthermore, all participants said the work was acceptable and they were comfortable in the mascot uniforms. According to Allen et al. (2010, p. 344), their study positively reinforced the literature that video modeling is an effective way to teach youth with ASD to perform job skills in social settings. These two studies suggest that video modeling is an effective rehabilitative technology that prepares youth with ASD for interviews and certain job tasks.

Covert Audio Coaching (CAC) is another innovative rehabilitative technology service that is being used to assist individuals with ASD gain and maintain employment. CAC involves “a teacher, paraprofessional, Job Coach, supervisor, or another individual (henceforth referred to as coach) delivering immediate feedback to a person performing a skill via a two-way radio or walkie-talkie and an earbud speaker” (Bennett, 2013, p. 60). CAC can be used to teach students job related skills, social skills, and academic skills on a jobsite or in a classroom. CAC is similar to supported employment since a coach is involved; however, the coach’s presence at the jobsite goes unnoticed. Once a youth with ASD gains employment, a Job Coach will assist the youth by providing immediate feedback through the two-way ear piece. The Job Coach will provide praise statements when the youth is performing job tasks well, prompts to help the youth stay on task and perform job tasks correctly, and correctional statements when the youth needs to fix errors (Bennett, 2013, p. 60). One major benefit of CAC is that it allows the youth with ASD to
receive the support they need on a jobsite through the help of a Job Coach without the presence of the Job Coach being noticed. Since many youths with ASD struggle socially and are often described as “odd,” the absence of the Job Coach will bring less attention to them. One downside of CAC is that not all youth with ASD will be able to wear the equipment, if they are hypersensitive to audio stimuli. However, if the equipment does not bother the youth, then state agencies should incorporate them.

Rehabilitative technology should also include different types of database systems. As previously mentioned, database systems should allow Rehabilitation Counselors to brag about creative ideas they have used that have worked with youth with ASD. Another idea is to have a database system that contains a list of employers that have previously hired youth with ASD. Keeping a database of employers that hire youth with ASD can be an effective and efficient way of assisting the youth with ASD gain employment. These employers will be knowledgeable of this population, and may be more likely to hire a youth with ASD again, if past experiences were positive.

**Supported Employment**

As stated in the *Developmental Disabilities Act of 1984* (Public Law 98-527), supported employment is defined as, “paid employment which (I) is for persons with developmental disabilities for whom competitive employment at or above the minimum wage is unlikely and who, because of their disabilities, need intensive ongoing support to perform in a work setting; "(II) is conducted in a variety of settings, particularly worksites in which persons without disabilities are employed; and ’ (III) is supported by any activity needed to sustain paid work by persons with disabilities, including supervision, training, and transportation.”
Supported employment was first introduced in the late 1970s and early 1980s to assist individuals with mental retardation to gain employment and earn competitive wages (Keel, Mesibov & Woods, 1987, p. 3). Supported employment is frequently cited as being a best practice for helping youth with ASD gain employment (Schall et al., 2014, p. 56; Del Valle et al., 2014, p. 100; McDonough et al., 2010, p. 92). Supported employment includes “work preparation, job finding (with focus on employment that is in alignment with the jobseeker’s intellectual abilities and educational background) and support in the workplace” (Wehman et al., 2012a, p. 161). Supported employment often uses the help of a Job Coach or Employment Specialist. A Job Coach is a person who helps an individual with a disability obtain and maintain employment. Per Wehman et al. (2012a, p. 161), Job Coaches have major and lasting impacts on the lives of those with ASD. An effective employment support program will have a Job Coach that provides services before employment, during employment, and follow-up services (Hillier, Campbell, Mastriani & Izzo, 2007, p. 36). Prior to the start of a job, Job Coaches will help the youth with ASD develop job search, social, impression management and interview skills, and write resumes (Lee et al., 2012, p. 997). Job Coaches should assist the youth with filling out job applications and they should do mock interviews that are recorded, so that the Job Coach can provide feedback later. Job Coaches should use rehabilitative technology services to help prepare the youth with ASD for job interviews, learn job skills, and assist them with on-the-job training. Job Coaches will continue teaching the youth with ASD any additional skills that will assist them in obtaining employment. Job Coaches may help the youth with ASD with job placement and they may attend job interviews to negotiate tailored job descriptions with potential employers, so that the youth with ASD can be successful on the job.
Once the youth with ASD secures employment, the Job Coach will work on the worksite with the youth to provide on-the-job training. The Job Coach assists the youth with getting acclimated to the work environment and teaches them their job duties, so that the duties can be completed to the satisfaction of the employer. The Job Coach will also ensure that the youth with ASD knows the work-place rules (e.g., shift, breaks, sick leave, vocation leave, and emergencies). The Job Coach will ensure that the youth knows how to get to and from the worksite. The Job Coach will also teach the youth with ASD how to greet co-workers and provide them with topics of discussion during breaks, so they can improve their communication and social skills. Besides the support Job Coaches provide to the youth with ASD, they also teach co-workers and employers about the youth’s disability and how to best work with the youth with ASD. The Job Coach will remain on the worksite until the youth with ASD can perform their job duties to the satisfaction of the employer without the assistance from the Job Coach. Job Coaches offer multiple supports to both the youth with ASD and the employer, and are critical to the success of any supported employment program.

Follow-up support is another vital component of a successful supported employment program (Hiller et al., 2007, p. 39). Follow-up support should be an on-going service that the Job Coach provides to the youth with ASD and their employer; however, most state VR agencies can only keep their cases open for 90 days after the youth with ASD gains employment. If this is the case, the state VR agency should refer the youth with ASD to a community based organization that can continue providing services to the youth after the state closes their case. Follow-up services include visits to the worksite, phone-calls/e-mails to the employer, weekly communication with the youth with ASD, and retraining the youth should any issues arise (Keel
et al., 1997, p. 7). Follow-up services are important, as they can significantly help the youth with ASD maintain their employment longer.

One of the first programs to offer supported employment to individuals with ASD was Treatment and Education of Autistic and Related Communication Handicapped Children and Adults (TEACCH) in 1989 (Keel et al., 1997, p. 4). TEACCH collaborated with the North Carolina VR Services and the Autism Society of North Carolina to use three different supported employment models. Within all of the models, the strengths and interests of the individual with ASD was emphasized in order to find appropriate employment for the individual and to provide the necessary supported services.

TEACCH used the individual placement model, which is the traditional supported employment model. This model has a Job Coach who works with the individual with ASD, helps them locate a local job, provides intensive on-the-job training at the worksite, and as the individual with ASD becomes more competent at the job, the Job Coach fades out of the worksite (Keel et al., 1997, p. 5).

The second model is the dispersed enclave model. This model is very similar to the individual placement model; however, one Job Coach is assigned to several individuals with ASD who all work for one business. In this model, the individuals with ASD are spread out throughout the business and they receive daily supervision, training, and support from the Job Coach (Keel et al., 1997, p. 5). Individuals with ASD that participate in this model are less independent than those in the independent placement model, as they require daily support in order to be successful at the worksite.

The final model is the mobile crew model. This model involves a Job Coach who works with 2-3 individuals with ASD to provide services to businesses in the community (Keel et al.,
For example, the mobile crew may provide housecleaning services to a local business. In this model, the Job Coach provides supervision to individuals with ASD who require more supervision and may have more challenging behavior. Individuals in the mobile crew may move to the enclave model after they have developed more independent working skills and no longer require direct supervision throughout the workday.

The TEACCH program was found to be successful in helping youth with ASD gain employment. The program had an 89% retention rate (Keel et al., 1997, p. 5). Keel et al. (1997, p. 5) found that the “predictability of the job” seemed to be the key factor for success for the individuals with ASD. They also found (1997, p. 6) that individuals with ASD were able to handle various tasks within their jobs, as long as there was a predictable routine or schedule to follow and that they were aware of their expectations throughout the workday. The TEACCH program proved that supported employment is an effective way for youth with ASD to gain employment.

Interagency Collaboration

As previously noted, interagency collaboration is defined as “a coalition where interdependent and strategic actions are taken, but where purposes are narrow in scope and all actions occur within the participant organizations themselves or involve the sequential or simultaneous activity of the participant organizations” (Mandell, 1999, p. 5). Interagency collaboration has been identified as a best practice for state VR agencies in order to assist youth with ASD gain employment (Del Valle et al., 2014, p. 100). Since Rehabilitation Counselors have multifaceted roles, it is virtually impossible for them to provide all of the necessary services for youth with ASD to gain employment. Therefore, most state VR agencies collaborate with other agencies in the community to provide the services that the state VR agency cannot offer.
Some VR agencies contract with local businesses to provide some of the front-end services. The front-end services can include assisting the disabled person with the application process, gathering all the necessary documentation, and administering the initial assessments (Del Valle et al., 2014, pp. 106-107). Contracting out these front-end services serves two purposes: 1. It expedites the eligibility determination process; and 2. it frees up the Rehabilitation Counselors’ time so they can complete their core job duties. Del Valle et al. (2014, p. 107) found that this practice has led to “an increase in service responsiveness, ability to work with business partners and increase in consumer satisfaction.” Contracting out some of the front-end services is practical and it can make the process more efficient.

Some state VR agencies have Embedded Training Programs (ETPs). ETPs are marketing programs used to obtain buy-in from employers to hire a disabled person (Del Valle et al., 2014, p. 107). ETPs consist of work accommodations that support the youth with ASD on the job until the productivity and work quality is achieved to the employer’s satisfaction. ETPs are similar to supported employment; however, the participants are not supported employment participants, but instead, they are placed in a work setting and trained with supportive services as warranted to assist the participant in becoming successful. After the training is completed, “successful participants are hired by the host company or are placed in employment within the same industry” (Del Valle et al., 2014, pp. 107-108). In order for ETPs to be successful, VR agencies need representatives to build strong relationships with the employers. This will require the representative to meet regularly with their business partner to discuss any problems that may have occurred, recommend solutions to the problems, discuss job openings, and potential candidates to fill vacant job openings. Once a state VR agency develops a relationship with a
potential employer, the state VR agency should keep the employer’s information in a database system for future reference and to ensure that regular contact is made with the employer.

Interagency collaboration allows each agency involved in the process to focus solely on their part. This can speed up the process of determining VR eligibility and help the youth with ASD gain employment. In order for the process to be effective, contracts should be negotiated that describe all agencies’ role in the process, regular communication should take place between the participating agencies, and cross-agency professional development should occur to compliment the collaborative activities of all agencies involved (Benz et al., 2000, p. 523). All collaborating agencies should be focused on helping the youth with ASD achieve their employment and life goals.

Community Level Process

The Workforce Investment Act of 1998 (Public Law 105-220) allowed individuals with disabilities to be served by various community based organizations and not solely dependent upon state VR agencies. The Act defines community based organization as, “a private nonprofit organization that is representative of a community or a significant segment of a community and that has demonstrated expertise and effectiveness in the field of workforce investment.” Community based organizations can offer a wide range of services, including but not limited to, career counseling, job search assistance, employment assessments, and supported employment services (Schall et al., 2014, p. 56). Community based organizations should do a thorough initial assessment of the youth with ASD’s strengths, weaknesses, preferences, and interests. Just like the school and the state agency, community based organizations should consult with family members during the initial assessment and use person-center-planning to encourage the youth with ASD to participate in the process. Many of the services that state agencies can provide,
community based organizations can also provide. This includes the aforementioned employment services, rehabilitative technology services, supported employment with Job Coaches, independent living skills, and interagency collaboration.

Community based organizations do differ from state agencies and high schools. First, community based organizations may provide specialized vocational training programs for youth with ASD that are not offered at the other two levels. Second, one stop career centers were specifically created through the *Workforce Investment Act* of 1998, to be prominent employment resources in communities. Lastly, community based organizations typically don’t have time-frames on how long they can provide services to youth with ASD. High schools can normally provide services to youth with ASD until the student graduates; while state agencies can only keep cases open up to 90 days after the youth with ASD gains employment in an area of interest identified on their IPE, or the youth with ASD is not making progress. This part of the chapter will take a deeper look into some of the services that community based organizations can offer that are not typically duplicated at the high school and state levels.

**Specialized Vocational Education and Training (VET)**

VET was previously defined and discussed under the high school level process in this chapter. While many schools offer VET, community based organizations may offer customized VET programs for youth with ASD. Community based VET programs often provide specialized vocational training programs that neither the school nor the state can provide. These programs may also pay the student while they learn the trade. Allowing the student with ASD to be trained and paid at the same time will provide extra motivation for the student to complete the training.

One VET program in the community is Exceptional Minds. Exceptional Minds is a nonprofit vocational school that was specifically designed to assist individuals with ASD gain
employment at competitive wages (Berg, 2015, p. 104). At Exceptional Minds, students with ASD are trained in visual effects. There are 10 instructors and 10 students. The students attend the program Monday through Friday from 10:00 A.M. to 4:00 P.M. Exceptional Minds provides contract work for movie producers, and the students get paid for their work. Once students graduate from the program, they are often able to find full-time employment in the movie industry. The program has had success since many individuals with ASD are detail orientated. VET programs such as Exceptional Minds allow the youth with ASD to get paid a living wage while learning, and it prepares them for a field in which they will receive a competitive wage. There are very few programs like Exceptional Minds in local communities, and programs like it are hard to get into. However, such programs can significantly prepare the youth with ASD for a career that will allow them to have a living wage.

**One Stop Career Centers**

According the *Workforce Investment Act* (WIA) of 1991 (Public Law 105-220), One Stop Career Centers are “community centers that provide training services, including “(i) occupational skills training, including training for nontraditional employment; (ii) on-the-job training; (iii) programs that combine workplace training with related instruction, which may include cooperative education programs; (iv) training programs operated by the private sector; (v) skill upgrading and retraining; (vi) entrepreneurial training; (vii) job readiness training; (viii) adult education and literacy activities provided in combination with services described in any of clauses (i) through (vii); and (ix) customized training conducted with a commitment by an employer or group of employers to employ an individual upon successful completion of the training.” One stop career centers were developed to offer all-inclusive services to all persons in a community. Most one stop career centers provide job search assistance, resume writing classes, and they have a computer database system that provides job leads and information on how to
apply for vacant jobs in the community. One stop career centers normally offer educational programs, such as GED and vocational training. In order to meet the needs of the disabled population within the community, section 188 of the Workforce Investment Act has specific language to ensure the needs of individuals with disabilities are met at such centers. The WIA states that these centers must (a) “take steps to ensure that communications with individuals with disabilities are as effective as communications with others, including providing auxiliary aids and services where necessary; (b) provide reasonable accommodations to qualified individuals with disabilities; (C) make reasonable modifications in policies, practices or procedures; (d) provide the most integrated setting appropriate to the needs of qualified individuals with disabilities; and (e) take appropriate steps, such as advertising and marketing, to ensure that they are providing universal access” (as cited by Jorgenson Smith, 2010, p. 31). One stop career centers are unique as they will often provide many of the services that youth with ASD need to gain employment in the community, and some centers offer later hours than what state agencies and high schools can provide to individuals with ASD.

There are some best practices that one stop career centers can do to ensure they are going above and beyond what WIA requires from them. First, they should ensure their location is easily accessible. If not, the center may want to provide satellite centers that are more convenient for the disabled populations in rural areas (Jorgensen Smith, 2013, p. 35). Many centers provide disabled individuals with bus tickets or tokens to use the public transportation system. Another best practice is to have partnerships with other organizations within the community (Jorgensen Smith, 2013, p. 35). Centers that develop partnerships can share resources in order to better serve individuals with ASD. Another best practice is to hire a youth with ASD at the one stop career center (Jorgensen Smith, 2013, p. 35). Centers that hire youth with ASD show the
community that they are willing to help this population, and it also provides hope for other youth with ASD who enter these centers.

One stop career centers often offer additional services (e.g., job placement) to specific populations that have difficulty obtaining employment, such as at-risk youth, veterans, individuals with criminal histories, and individuals with mental health diagnosis. It is preferable that one stop career centers have case managers specifically trained on how to best work with youth with ASD.

**Follow-up Support**

Follow-up support can be defined as any supportive activity that increases the duration of job retention. Follow-up support is critical for those with ASD to have long-term job retention (Hiller et al., 2007, 39). It is important for community based organizations to continue working with the youth with ASD and their employer after the youth gains employment and can perform the job to the satisfaction of the employer. Follow-up support includes meeting with the youth at the worksite and communicating with the employer via phone, e-mail, or in person (Hiller et al., 2007, p. 39). Follow-up support can be offered by a Job Coach or Case Manager at the community based organization. This person will want to visit with the youth with ASD to discuss how they are doing at their job and if they are still satisfied with their employment. This person will want to communicate with the employer to discuss any issues that may have surfaced with the youth with ASD, so that the Job Coach or Case Manager can help the youth with ASD rectify the issue. This may require retraining the youth.

Community based organizations should also provide follow-up support that will help the youth with ASD live independently. Such follow-up support can include providing housing
assistance, financial support, transportation assistance, and relationship guidance (Wehman et al., 2012a, p. 163). This extra support can significantly help the youth with ASD be successful in all aspects of their lives.

**Chapter Summary**

Youth with ASD often have deficits in key areas (e.g., communication and social interaction) that inhibit their ability to gain meaningful employment. Research has shown that youth with ASD can gain meaningful employment through the different levels of the transition process (i.e., the high school, state, and community levels) when the agencies involved in the process collaborate together and have specific roles that will assist the youth with ASD gain employment. Several programs have proven that interagency collaboration is a major factor in assisting this population gain employment. Programs such as Search, TEACCH and YTP all collaborate with varying agencies and have specific roles identified to help this population gain employment. Another key element for all agencies involved is completing a thorough assessment with the youth with ASD and their family members to know their interests, preferences, strengths, and weaknesses. It is recommended that the agencies involved use person-centered-planning (PCP) with this population to encourage their participation in and to possibly lead their transition meetings.

After the initial assessment, all collaborating agencies should discuss and agree upon their roles in the transition process. This will prevent services from being over-lapped by more than one agency involved. A detailed plan may entail the high school agreeing to teach the youth with ASD self-determination and social skills, provide the necessary services for the youth to be included in regular education classes, and providing career exploration activities. The state VR agency can agree to establish eligibility within a determined amount of time, offer benefit
counseling and career counseling based on the youth’s vocational assessments, and provide
referrals to the community based organizations. The community based organizations may
provide youth with ASD job search skills, vocational educational training, supported
employment services, and follow-up services to obtain and maintain employment in an area of
interest. If all agencies identified in the transitional process provide the recommended
transitional programs, youth with ASD can gain employment and have more fulfilling lives.
Chapter IV: Methodology

Chapter Purpose

This chapter discusses the methods that were used to gauge the transitional programs from high school to employment for youth with ASD residing in Georgetown, TX. In order to obtain the most comprehensive information on Georgetown’s efforts, a multi-method approach was undertaken to collect data for this study. The methods used include interviews, document analysis, surveys, and non-participant observations of public presentations. This chapter elaborates upon the research design, research procedures, methods, and alignment with the conceptual framework.

Case Study

The research design implemented for this project was a case study. According to Babbie (2010, p. 309), a case study’s focus is “a single instance of some social phenomenon.” This research focused on the transitional programs (from high school to employment) at all levels of the process (i.e., high school, state and community levels) for autistic youth (aged 16 to 21) residing in Georgetown, TX. Yin (2003, p. 2) said that the case study design allows researchers to preserve “the holistic and meaningful characteristics of real life events- such as individual life cycles, organizational and managerial processes, neighborhood changes, international relations, and the maturation of industries.” This study took a holistic approach of the autistic youth’s transition process by looking at each level of the process. Babbie (2010, p. 311) stated that one downfall of the case study approach “is the limited generalizability of what may be observed in a single instance of some phenomenon.” Since this research focused solely on the transitional programs for residence in Georgetown, TX, its findings are probably only applicable to cities of a similar profile. Yin (2003, p. 97) and Shields and Rangarajan (2013, p. 115) observed that one
Advantage of the case study approach was that data for the research can be collected through multiple means. This applied research incorporated a multi-method approach using interviews, surveys, document analysis, and non-participant observations of public presentations to gather data. The operationalization of the practical ideal type transitional programs for autistic youth is outlined in Table 4.1 below. According to Shields and Tajalli (2006, p. 160) a practical ideal type is a process used to organize a theory of what the best practices are for the case study. The practical ideal type consists of the best elements that the researcher could find by reviewing literature on the subject (Shields & Tajalli, 2006, p. 163). Also, the practical ideal type is a tool created to give purpose to an administrative process (Shields & Tajalli, 2006, p. 163). The strength of the practical ideal type is that, when the data is collected, researchers are able to “assess the strengths and weaknesses” and “make recommendations” to the units in the case study (Shields & Tajalli, 2006, p. 234). The practical ideal type also has external value, as it can be used to gauge similar programs in other organizations (Shields & Tajalli, 2006, p. 167).

Table 4.1: Operationalization of the Conceptual Framework

<table>
<thead>
<tr>
<th>Ideal Type Categories</th>
<th>Research Methods</th>
<th>Evidence</th>
<th>Sources</th>
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<tbody>
<tr>
<td>1. High School Level Process</td>
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<tr>
<td>1.1 Individual Education Programs IEP Transition Planning</td>
<td>•Document Analysis</td>
<td>•Existence of Policies •All major/required elements met or exceed state and federal laws. •Describe the current process and policy for the Individual</td>
<td>•School Policies and Procedures •School brochures</td>
</tr>
<tr>
<td>1.2 Family and other support systems</td>
<td>Document Analysis</td>
<td>• Who is invited/included to/in the IEP Transition Meeting? (Q.#8)</td>
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<td></td>
<td>• Interview</td>
<td>• How do you encourage family members and other support systems to attend and participate in the IEP transition meeting and process? (Q.#9)</td>
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<tr>
<td>1.3 Interagency Collaboration</td>
<td>Document Analysis</td>
<td>• Existence of polices regarding interagency collaboration.</td>
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<td></td>
<td>• Interview</td>
<td>• What agencies are invited to the IEP transition meeting? (Q. #10)</td>
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<td></td>
<td></td>
<td>• Do DARS representatives get invited to the IEP transition meeting? (Q. #11)</td>
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</tbody>
</table>
| 1.4 Self-Determination Skills | • Document Analysis  | • Existence of polices  
• How do you teach Self-Determination skills to ASD youth? (Q. #13)  
• Is there a specific curriculum that your ISD uses to teach self-determination skills? (Q. #14)  |
| --- | --- | ---
|  | • Interview  | • School Policies and Procedures  
• Other supporting documentation, e.g., brochures.  
• Special Education Staff at Georgetown ISD, Parent Liaison  |
| 1.5 Independent Living Skills | • Document Analysis  | • Does your agency teach Independent Living Skills to youth with ASD? (FI, Q. #15; S: Q. #39)  
• If so, What Independent Living Skills does your agency teach to youth with ASD and how are they taught (FI: Q. #16; S: Q. #40)  |
| --- | --- | ---
|  | • Interview  | • School Policies and Procedures  
• DARS’ policies and procedures  
• Other supporting documents  
• Special Education Staff at Georgetown ISD, Parent Liaison  
• DARS representative, Community-Based-Agency representatives  |
| 1.6 Inclusion in General Education | • Document Analysis  | • Existence of polices  
• What’s your ISD’s policy on inclusion in general education classes for youth with ASD? (Q. #17)  |
| --- | --- | ---
|  | • Interview  | • School Policies and Procedures  
• Special Education Staff at Georgetown ISD, Parent Liaison  |
| 1.7 Vocational Education Training (VET) | • Document Analysis | • Literature supporting the existence of such activities | • School Policies and Procedures  
• Brochures  
• Special Education Staff at Georgetown ISD, Parent Liaison |
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<tr>
<td>• Interview</td>
<td>• What types of vocational education classes does your ISD provide to youth with ASD? (Q. #20)</td>
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<td></td>
<td>• Are students with ASD allowed to attend offsite VETs during school hours? If so, what programs can they attend, and at what age and school grade level are these students allowed to participate in these VET programs? (Q. #21).</td>
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</table>
| 1.8 Work Internships/Paid Employment | • Document Analysis | • Literature supporting the existence of such activities | • School Policies and Procedures  
• Brochures  
• Special Education Staff at Georgetown ISD, Parent Liaison |
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<tbody>
<tr>
<td>• Interview</td>
<td>• Does your ISD help students with ASD gain work internships or paid employment when they are within 2 years of graduating? (Q. #22)</td>
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<td>• Does your ISD contract with any community agencies where the student can participate in work internships or paid employment during their last couple of years in school? (Q.#23)</td>
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<tr>
<td>2. State Level Process</td>
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<tr>
<td>2.1 Eligibility Requirements</td>
<td>• Document Analysis</td>
<td>• Existence of polices</td>
<td>• Texas VR Department’s</td>
</tr>
<tr>
<td>2.2 Rehabilitation Counselor</td>
<td>Document Analysis</td>
<td>Does your agency have specialized Rehabilitation Counselors or Case Managers to work with individuals with ASD? (Q.#16)</td>
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<td></td>
<td>Survey</td>
<td>If Q.#16 is Yes, How many specialized Rehabilitation Counselors or Case Managers does your agency have to work with youth with ASD? A) One, B) Two, C) Three, D) More than three (Q.#17)</td>
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<td></td>
<td>Public Presentation</td>
<td>Do your Rehabilitation Counselors or Case Managers receive special training on how to best work with individuals</td>
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<thead>
<tr>
<th>• Survey</th>
<th>• Does your agency provide transitional services to youth (between the ages of 16 and 21) with Autism Spectrum Disorder (ASD) A) Yes, B) No (Q.#3)</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Public Presentation</td>
<td>If Q. # 3 is Yes, At what age does your agency start providing employment transitional services to youth with Autism Spectrum Disorder (ASD)? A) Younger than 16, B) 16, C) 17, D) 18 or older (Q.#4)</td>
</tr>
<tr>
<td></td>
<td>If Q.#3 is Yes, Does your agency serve youth with ASD who reside in Georgetown, TX? A) Yes, B) No C) Maybe (Q.#5)</td>
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<td></td>
<td>Your agency’s current policy to determine eligibility for services is within: A) 2 weeks of application. B) 1 month of application, C) more than one month, D) There is no such policy (Q.#6)</td>
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<tr>
<th>Policy and Procedures</th>
<th>• State VR Administrators or Rehabilitation Counselors</th>
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<tbody>
<tr>
<td>• Administrators and Staff at Community-Based-O rganizations</td>
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<tr>
<td>• DARS’ Public Presentations</td>
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<tr>
<td>2.3 Employment Services</td>
<td>2.3 Employment Services</td>
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<td>with ASD? A) Yes, B) No (Q.#18)</td>
<td>• How often do Rehabilitation Counselors or agency representatives get invited to school IEP/Transition meetings at a Georgetown high school for youth with ASD? A) Never, B) Daily C) Weekly, D) Monthly, E) Quarterly, F) Every 6 months G) Yearly (Q. #19)</td>
</tr>
<tr>
<td>• How often do agency representatives attend school IEP Transition meetings for youth with ASD at a Georgetown High School? A) Never, B) Daily, C) Weekly D) Monthly, E) Quarterly F) Every 6 months, G) Yearly (S. 1, Q.#20)</td>
<td>• Does your agency have a representative that is assigned to attend IEP Transition Meetings for youth with ASD at a Georgetown high school? A) Yes, B) No (Q.#21)</td>
</tr>
<tr>
<td>• Does your agency use any assessments to determine the strengths of a youth with ASD? A) Yes, B) No (Q.#7)</td>
<td>• If Q. #7 is Yes, please list the assessments your agency uses to determine the strengths of a youth with ASD. (Open/Ended) (Q.#8)</td>
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<td>• Does your agency use any assessments to determine the preferences of a youth with ASD? A) Yes, B) No (Q.#9)</td>
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<td>Questions</td>
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<td>If Q. #9 is Yes, Please list the assessments your agency uses to determine the preferences of a youth with ASD. (Open/Ended) (Q.#10)</td>
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<td>Does your agency use any assessments to determine the interests of a youth with ASD? A) Yes, B) No (Q. #11)</td>
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<td>If Q. #11 is Yes, Please list the assessments your agency uses to determine the interests of a youth with ASD. (Open/Ended) (Q.#12)</td>
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<tr>
<td>Does your agency do employment/career planning with youth with ASD? A) Yes, B) No (Q.#13)</td>
<td></td>
</tr>
<tr>
<td>If Q. #13 is Yes, Does your agency use Person Centered Planning (PCP) to encourage the youth with ASD to lead and/or participate in their plan for employment? A) Yes, B) No (Q.#14)</td>
<td></td>
</tr>
<tr>
<td>If Q.#13 is Yes, Check all individuals who are allowed to participate in the youth with ASD’s employment plan: A) The youth with ASD, B) parents/guardians, C) School personnel, D) Other supportive adults  (Q.#15)</td>
<td></td>
</tr>
<tr>
<td>Does your agency offer pre-employment services to youth with ASD? A) Yes, B) No (Q.#22)</td>
<td></td>
</tr>
<tr>
<td>If Q. #22 is Yes, List all pre-employment services your agency offers</td>
<td></td>
</tr>
<tr>
<td>2.4 Rehabilitation technology services</td>
<td>• Document Analysis</td>
</tr>
<tr>
<td></td>
<td>• Survey</td>
</tr>
<tr>
<td></td>
<td>• Public Presentation</td>
</tr>
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<td></td>
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</tbody>
</table>

agency offers to youth with ASD. (Open-ended) (Q.#23)

• Does your agency offer vocational training programs to individuals with ASD? A) Yes, B) No (Q. #37)

• If Q. #37 is Yes, List any vocational training program your agency offers to youth with ASD and indicate if the training is a specialized vocational program that has proven to be successful at assisting youth with ASD gain competitive employment. (Open-ended) (Q.#38)
| 2.5 Supported Employment | Does your agency use Rehabilitative Technology to help youth with ASD gain and/or maintain employment? A) Yes, B) No (Q.#32)  
If Q.#32 is Yes, List any rehabilitative technology that your agency uses to assist individuals with ASD gain and/or maintain employment. (Open-ended) (Q.#33) | Does your agency offer supported employment to individuals with ASD? A) Yes, B) No (Q.#34)  
Does your agency have Job Coaches or Employment Specialists to assist youth with ASD gain and/or maintain employment? A) Yes, B) No (Q.#35)  
If Q.#34 is Yes, List all services that are provided through your supported employment program (Open-ended) (Q.#36) | Texas VR Department’s Policy and Procedures  
Texas VR Brochures  
State VR Administrators or Rehabilitation Counselors  
Administrators and Staff at Community-Based Organizations  
DARS’ Public Presentations |
|---|---|---|---|
| 2.6 Interagency Collaboration | Does your agency have a data base that lists the employers who have previously employed youth with ASD? A) Yes, B) No (Q.#31)  
Does your agency offer Embedded Training Programs? A) Yes, B) No (Q.#24)  
If Q.#24 is Yes, List all Embedded Training Programs | Texas VR Department’s Policy and Procedures  
State VR Administrators or Rehabilitation Counselors  
Administrators and Staff at |
<table>
<thead>
<tr>
<th>Public Presentation</th>
<th>your agency offers (Open/Ended) (Q.#25)</th>
<th>Community-Based-Organizations</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Does your agency collaborate with other agencies to provide transitional services to youth with ASD? A) Yes, B) No (Q.#44)</td>
<td>• Does your agency have contracts with these agencies? A) Yes, B) No, (Q.#46)</td>
<td>• DARS’ Public Presentations</td>
</tr>
<tr>
<td>• If Q. #44 is Yes, List all agencies your organization collaborates with to provide transitional services to youth with ASD. (Open-ended) (Q.#45)</td>
<td>• If Q. #44 is Yes, Does your organization do any cross-agency professional development with these agencies? A) Yes, B) No (Q. #47)</td>
<td></td>
</tr>
<tr>
<td>3. Community Level Process</td>
<td>3.1 Specialized Vocational Education and Training (VET)</td>
<td>Administrators and Staff at the Community-Based-Organizations</td>
</tr>
<tr>
<td>• Survey</td>
<td>• Does your agency offer any vocational training to youth with ASD? A) Yes, B) No (Q. #37)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• If Q. #37 is Yes, List all vocational training fields that your agency offers to youth with ASD and indicate if the training is a specialized vocational program that has proven to be successful at assisting youth with ASD gain employment: (open-ended) (Q. #38)</td>
<td></td>
</tr>
<tr>
<td>3.2 One-stop-career center</td>
<td>• Survey</td>
<td>Administrators and Staff at Community-Based-Organizations</td>
</tr>
<tr>
<td>• Is your agency considered a one-stop-career center? A) Yes, B) No (Q. #41)</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>3.3 Follow-up support</strong></td>
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<td>---</td>
</tr>
</tbody>
</table>
| **Survey** | **Does your agency network with community employers to help individuals with ASD gain employment?** A) Yes, B) No (Q. #42)  
**Does your agency have a database that lists all employment opportunities in the community?** A) Yes, B) No (Q. #43)  
**Does your agency network with community employers to help individuals with ASD gain employment?** A) Yes, B) No (Q. #42)  
**Does your agency have a database that lists all employment opportunities in the community?** A) Yes, B) No (Q. #43) | **Based-O rganizations** |  |
| **Survey** | **After a youth with ASD gains employment in a field identified on their individual employment plan, does your agency provide follow-up services?** A) Yes, B) No (Q. #48)  
**If Q. #48 is Yes, How long can your agency offer follow-up services?** A) Less than one month, B) 1 Month, C) 1 to 3 months, D) 3 to 6 months, E) 6 to 12 months, F) Over 1 year (Q. #49)  
**If Q. #48 is Yes, What types of follow-up services does your agency provide to youth with ASD?** (open-ended) (Q. #50)  
**If Q. #48 is Yes, What types of follow-up services does your agency offer to the employers of youth with ASD?** (open-ended) (Q. #51) | **Administrators and Staff at Community-Based-O rganizations**  
**State VR Administrators or Rehabilitation Counselors** |  |

**Interviews**

To understand the efforts undertaken at the high school level to help youth transition into meaningful employment, interviews were conducted to gather information. Since there were only three high schools in the Georgetown Independent School District (GISD), face-to-face interviews were preferred over mail-in interviews and surveys. Yin (2003, p. 89) said that
interviews are a salient way of collecting information for a case study. When done properly, the interviewer can develop a rapport with the respondent, so that the respondent feels at ease and will be more likely to answer questions openly and honestly. Babbie (2010, p. 274) identified four benefits of interviews: they usually “attain higher response rates;” increase the percentage of questions answered; the interviewer has the opportunity to clarify questions; and the “interviewer can observe the respondent.” Yin (2003, p. 86) reported that the weaknesses of interviews include: the respondent saying what they believe the interviewer wants to hear, and the interviewer inaccurately recording the respondent’s answers. Notwithstanding these weaknesses, interviews provide excellent opportunities for researchers to gather detailed information for their case studies.

For this case study, interview questions were developed from the information discussed in the literature review. Several questions were created for each element listed under the high school level process in the conceptual framework to determine whether or not the Georgetown high schools have adopted and implemented what was discussed for that element in the literature. For example, Individual Education Programs (IEP)/Transition Planning, was the first element identified in the high school level process; for this element, the interviewer asked six questions to understand GISD’s policies on that element and determine if GISD has incorporated the best practices for that element. A copy of the interview questions can be found in Appendix A.

**Interview Sample**

The interview sample for the High School Level Process consisted of five staff members, which included special education administrators, special education teachers, and other special education staff members from GISD. Quota sampling was used to ensure that different staff
members in GISD’s Special Education Department were interviewed. Babbie (2010) defined quota sampling as “a type of nonprobability sampling in which units are selected into a sample on the basis of prespecified characteristics, so that the total sample will have the same distribution of characteristics assumed to exist in the population being studied” (p. 192). At least one representative from each high school within the GISD was interviewed, with the exception of Richarte High School since it is an alternative school of choice and does not have a special education department. The sample selected represented the characteristics of the professionals that would work with youth with ASD attending a high school within the district. All five interviews were recorded. The longest interview lasted 94 minutes, while the shortest interview lasted 35 minutes.

**Document Analysis**

Document analysis was another method used to collect data for the high school level process. Documents were analyzed to ascertain that what interview respondents reported in their interview was also documented in GISD’s policies, brochures, or other documents. Yin (2003, p. 86) claimed that strengths of document analysis include that they are discreet, precise, consistent, and cover a broad range for specific topics. Also, Yin (2003) reported that weaknesses of document analysis are reporting bias and accessibility.

Document analysis for the high school level process was used to verify whether or not GISD’s policies meet or exceed the federal and state laws. Also, it was used to determine whether or not the district acknowledges and implements the elements listed under the high school level process in the conceptual framework. Table 4.2 below lists the documents that were accessed and reviewed to gauge the high school level process.
<table>
<thead>
<tr>
<th>ELEMENTS</th>
<th>DOCUMENTS</th>
</tr>
</thead>
</table>
| 1.1 Individual Education Programs IEP Transition Planning | • GISD’s Policies and Procedures  
• GISD’s Transition Planning Flyer  
• GISD’s Decision-Making Matrix  
• GISD’s ARD Committee Meeting Brochure  
• GISD’s Transition Webpage  
• Career Cruising webpage |
| 1.2 Family and other support systems | • GISD’s Policies and Procedures  
• GISD’s Transition Planning Flyer  
• GISD’s ARD Committee Meeting Brochure  
• GISD’s Transition Webpage  
• GISD’s Special Education Parent Liaison Brochure |
| 1.3 Interagency Collaboration | • GISD’s Policies and Procedures  
• GISD’s Transition Planning Flyer  
• GISD’s ARD Committee Meeting Brochure  
• GISD’s Special Education Transition Website |
| 1.4 Self-Determination Skills | • GISD’s Policies and Procedures  
• GISD’s Special Education Transition Website  
• GISD’s Household Chores Developmental List  
• GISD’s Transition 101 Flyer  
• GISD’s ARD Committee Meeting Brochure  
• GISD’s Bridges Brochure  
• GISD’s Transition Decision-Making Matrix |
| 1.5 Independent Living Skills | • GISD’s Policies and Procedures  
• GISD’s Special Education Transition Website  
• GISD’s Bridges Brochure  
• GISD’s Transition Decision-Making Matrix |
| 1.6 Inclusion in General Education | • GISD’s Policies and Procedures  
• GISD’s Instructional Settings web-site |
| 1.7 Vocational Education Training (VET) | • GISD’s Policies and Procedures  
• GISD’s Special Education Webpage  
• GISD’s Bridges Brochure |
| 1.8 Work Internships/Paid Employment | • GISD’s Policies and Procedures  
• GISD’s Transition Webpage  
• GISD’s Bridges Brochure |
Document analysis was also used to collect information on the state level process. Table 4.3 below provides the documents that were accessed and reviewed to gauge the state level process.

**Table 4.3: Documents linked to the elements under the State Level Process**

<table>
<thead>
<tr>
<th>ELEMENTS</th>
<th>DOCUMENTS</th>
</tr>
</thead>
</table>
| 2.1 Eligibility Requirements      | • Department of Assistive and Rehabilitative Services’ (DARS) Policies and Procedures  
• DARS’ Power Point Presentation printout from 2/27/16  
• DARS’ Pamphlet, “A Guide For Applicants”               |
| 2.2 Rehabilitation Counselor     | • DARS’ Policies and Procedures  
• DARS’ Power Point Presentation printout from 2/27/16.  
• DARS’ Pamphlet, “A Guide For Applicants”  
• DARS’ Brochure, “School Transition Program”            |
| 2.3 Employment Services           | • DARS’ Policies and Procedures  
• DARS’ Power Point Presentation  
• DARS’ Pamphlet, “A Guide For Applicants”  
• DARS’ Brochure, “School Transition Program.”  
• DARS’ Supported Employment Assessment                |
| 2.4 Rehabilitation Technology Services | • DARS’ Policies and Procedures  
• DARS’ Power Point Presentation  
• DARS’ Pamphlet, “A Guide For Applicants”  
• DARS’ Brochure, “School Transition Program”            |
| 2.5 Supported Employment          | • DARS’ Policies and Procedures  
• DARS’ Power Point Presentation  
• DARS’ Pamphlet, “A Guide For Applicants”  
• DARS’ Brochure, “School Transition Program”            |
| 2.6 Interagency Collaboration     | • DARS’ Policies and Procedures  
• DARS’ Power Point Presentation  
• DARS’ Pamphlet, “A Guide For Applicants”                |
Survey

Internet survey was the third research method tool used to gather information for this case study. Surveys have been found to be useful tools to collect data from multiple people, or for the purpose of this study, multiple organizations in a community. There are two main reasons internet surveys were preferred over mail-in surveys and face to face interviews: they were cost and time effective (Babbie, 2010). Some faults identified with surveys include their response rates tend to be lower than interviews, and a respondent may not understand the context of a question, if the question is poorly written (Babbie, 2010, p. 274). When designed properly, surveys have been found to be an effective way of gathering information from multiple respondents.

Survey Sample

For this study, internet surveys were sent to four representatives from the state agency, Texas Department of Assistive and Rehabilitative Services (DARS), and all community based organizations that would provide transitional services to individuals residing in Williamson County. Initially, surveys were only going to be sent to DARS and the community based organizations in Georgetown. However, at that time, there was only one community based organization in Georgetown that provided transitional programs to youth with ASD. Also, since GISD collaborated with a community based organization in Round Rock, all community based organizations that would provide transitional programs to individuals residing in Williamson County were sent surveys. This was done since there was a likelihood that the cities in close proximity to Georgetown would provide services to a youth with ASD residing in Georgetown.
Also, at the time of the study, it was not uncommon for Georgetown residents to commute to Austin and other nearby cities to work or receive services. The researcher attended a Georgetown ISD Employment/Transition Meeting and a Round Rock ISD Transition Fair to identify community based organizations that would provide transitional services to Williamson County residents. Then, the researcher asked the community based organizations that were identified at these meetings, if they knew of any other agencies that provided such transitional services. Also, the researcher did an internet search. There were 16 community based organizations that were identified that would provide transitional programs to residents living in Williamson County. Table 4.4 below provides the community based organizations that were identified and their locations.

Table 4.4: Community Based Organizations and their Locations

<table>
<thead>
<tr>
<th>Organization</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td>Goodwill Industries</td>
<td>Austin</td>
</tr>
<tr>
<td>Brookwood In Georgetown (BIG)</td>
<td>Georgetown</td>
</tr>
<tr>
<td>Independent Living Experience</td>
<td>Austin</td>
</tr>
<tr>
<td>Bluebonnet Trails MHMR</td>
<td>Round Rock</td>
</tr>
<tr>
<td>Arcil</td>
<td>Round Rock</td>
</tr>
<tr>
<td>Easter Seals Central Texas</td>
<td>Austin</td>
</tr>
<tr>
<td>Texas Workforce Commission</td>
<td>Round Rock</td>
</tr>
<tr>
<td>ACC, Office of Students with Disabilities</td>
<td>Round Rock</td>
</tr>
<tr>
<td>Texas State Technical College</td>
<td>Hutto</td>
</tr>
<tr>
<td>Austin Task, Inc.</td>
<td>Austin</td>
</tr>
<tr>
<td>D &amp; S Community Services</td>
<td>Austin</td>
</tr>
</tbody>
</table>
The researcher either met with agency representatives in person or called them on the phone to discuss the study. Key representatives were identified at each agency that would be able to answer the survey questions. For the majority of the agencies, directors of specific departments (e.g., transition departments, employment departments, special education departments) agreed to complete the survey. Initial surveys were sent out via e-mail that included the survey link, closure date, and a description of the study that discussed the purpose of the research and advised that their answers to the survey questions would remain anonymous. A copy of an example e-mail is provided in Appendix C. Initial response rates were low; therefore, follow-up calls and e-mails were made to the agency representatives requesting they complete the survey.

The survey was created using Qualtrics. Initially, the researcher was going to create two separate surveys, one for DARS and one for the community based organizations; however, Qualtrics only allowed Texas State University students to have one survey active at a time. For the purpose of saving time, one interchangeable survey was created for DARS and the community based organizations to complete. The first question on the survey asked respondents to identify if their organization was: A) DARS, B) a community based organization, or C) other. If the respondent answered that their organization was “other,” a follow-up question asked them
what type of agency they were considered to be. This was done so the researcher could ascertain if the agency was DARS, a community based organization, or another type of agency. Since DARS and community based organizations offer many similar transitional programs to youth with ASD, the survey was made relevant to all agencies.

The survey asked both closed-ended questions and open-ended questions. Closed-ended questions were asked to determine if the organization offered a transitional service or program that was identified in the literature and linked to the conceptual framework. Open-ended questions were asked as follow-up questions, so that the respondent could provide additional information on the transitional services or programs that their agency offered. Also, the last question on the survey gave the respondent an opportunity to provide any additional information that they wanted the researcher to know about their agency. A copy of the survey is provided in Appendix B.

Non-Participant Observations of Public Presentations

The researcher also observed two DARS public presentations to collect information for this case study. At both presentations, this researcher did not participate, remained quiet, observed, and took notes on the presentations, speakers, and audience. Babbie (2010, p. 299) said this type of research raises an ethical concern, i.e., “is it ethical to deceive the people you’re studying in the hope that they will confide in you as they will not confide in an identified researcher?” Also, Babbie (2010, p. 299) found that this type of research is often completed “on the belief that the data will be more valid and reliable.” Babbie (2010, p. 299) identified three benefits of non-participation observation: it allows the researcher to observe the person or group being observed to collect data; the person or group being studied might modify their speech or behaviors, if they are aware of the researcher’s presence; and the social process is less likely to
be changed if the participant does not participate. Babbie (2010, p. 299) said that one negative to this approach is “anything the participant-observer does or does not do will have some effect on what’s being observed; it simply inevitable.” At the first DARS public presentation, the researcher only introduced himself to the speaker at the end of the presentation and requested their participation in the survey. At that time, the researcher learned that DARS has strict rules on any agency representative participating in interviews and surveys. Also, DARS representatives have to be granted administrator’s permission to participate in such activities. At the second DARS public presentation, one of the speakers recognized this researcher in the audience, said “Hello,” and was aware that this researcher was there for the purpose of learning about DARS’ transitional programs for this case study. The researcher found attending the public presentations to be very beneficial for collecting data for several reasons. First, it allowed the researcher an opportunity to introduce himself to the regional Rehabilitation Counselor and discuss the research topic and survey. Second, the public presentations provided both a general overview and some specific information related to the state level process that were all pertinent to the study. Third, the researcher heard both compliments and complaints from members in the audience. The researcher was able to take notes on the comments made by members in the audience that had previously used DARS or were in the process of attempting to access their services. Also, the researcher was able to listen to and observe how the DARS representatives responded to those comments. Weaknesses of observing the public presentations included the presenter may have said what he/she believed the audience wanted to hear and since one of the speakers recognized this researcher at the second public presentation, he/she may have changed their tone to come across as more pleasant. However, this speaker was pleasant at both public presentations.
Respondent Protection

All respondents were provided with information about the study and assured that their answers would remain confidential. Respondents were provided with information about their rights, how to contact the researcher, and that their participation in the study was voluntary. The research plan was reviewed by Texas State University’s Institutional Review Board (IRB), who determined that the study was exempt (IRB exemption # EXP2016N816921V). A copy of the IRB exemption e-mail is provided in Appendix D. This research did not present any physical or psychological harm to any agency representative that participated in the study.

Chapter Summary

This chapter discussed the methods used for this research. A case study approach was undertaken using multi-methods of collecting data: interviews, document analysis, surveys, and non-participation observations of public presentations. Chapter five provides the results of this case study.
Chapter V: Results

Chapter Purpose

This chapter discusses the data collected to analyze the transitional programs from high school to employment for youth with ASD residing in Georgetown, TX. Four methods were used to collect data: interviews, surveys, document analysis, and non-participation observations of public presentations. To evaluate efforts at the high school level process, the researcher conducted five interviews and reviewed several documents to analyze Georgetown Independent School Districts’ (GISD) transitional process and programs. To assess the state level process, a survey was sent to four representatives from the Department of Assistive and Rehabilitative Services (DARS), documents were reviewed, and the researcher attended two non-participation observations of public presentations. The community level process, was assessed via a survey that was sent to the 16 community based organizations that would provide transitional programs to youth with ASD residing in Williamson County.

High School Level Process

The first component identified of an ideal transitional program for youth with ASD is the high school level process. The Individuals with Disabilities Education Act (IDEA) of 1990 (Public Law 108-446) required “public schools to develop a transition plan for students with individual education programs (IEPs) aged 16 or older, or younger if appropriate.” The IDEA was amended in 1997, which required by age 14, "a statement of transition services had to support the student’s high school course of study.” Since schools are required to provide transitional programs to youth with disabilities and the plan must be documented in the disabled student’s individual education plan (IEP), the researcher asked GISD Special Education Department staff members to, “Describe the current process and policy for the Individual
The interviews revealed that GISD starts the transition planning process as soon as a student is identified as being eligible for special education services. Also, by the time a disabled student turns 14, GISD respondents said the process would be documented in the student’s Admission, Review, and Dismissal (ARD). Texas is the only state that calls such meetings ARDs, as all other states calls them IEPs, said one interview respondent. Respondents said that prior to age 14, GISD discusses transition planning with the family members of the disabled student to get them acclimated to the term. Also, GISD refers the families to community based organizations to start receiving services from these organizations and to get their child on the DARS’ interest list (waiting list) to receive transitional services. One respondent said about Texas, “We have the longest waiting lists out of all states.” Respondents said that GISD uses a Transition Decision-Making Matrix for all disabled students (as earlier as age three and who are enrolled in one of GISD’s preschool programs for children with disabilities (PPCD)). The matrix assesses where a student’s current level of functioning is on a specific life domain. For example, if a student is in the 2nd grade, one area on the matrix will assess how the student sets goals. For setting goals, the student will be assessed by determining whether “A) Sets goals in self-improvement in all environments and follows through on goals set; B) Adult assistance in setting goals for self-improvement, but usually needs some support to follow through; C) Participates in goal setting process, but not sure how to set goals without support; or D) Adult sets goals.”

Respondents said the goal of the matrix is to determine where a student is on a specific area during a grade level and to assist the student to become more independent in that area. The researcher previously believed that high schools could only provide transitional programs to
disabled students up until graduation; however, this was found to be not true. Interview respondents said that federal laws allow schools to continue providing services to a disabled student, if the student still has ARD goals that the school believes the school can meet. If that is the case, then the school can continue working with the disabled student up until their 22nd birthday. The interviews provided strong evidence to support that GISD follows the federal and state laws regarding when schools are required to start the IEP/transition planning process.

GISD documents were also analyzed to ensure that the GISD transition process meets or exceeds federal and state laws. The following documents were reviewed: GISD’s policies and procedures on transition planning, GISD’s Transition Planning flyer, GISD’s Decision-Making Matrix, GISD’s ARD Committee Meeting brochure, and GISD’s special education transition webpage. GISD’ policies read that “no later than when a student reaches 14” the student’s IEP must address the student’s transition to include “life outside the public school system;” “appropriate parental involvement in the student’s transition,” if they are younger than 18; “any postsecondary education options; a functional vocational evaluation; employment goals and objectives; independent living goals and objectives; and appropriate circumstances for referring a student or the student’s parents to a governmental agency for services.” The GISD Transition Planning flyer lists everything that a student will be doing during each grade level during the transition planning process. The ARD Committee Meeting brochure discusses what an ARD is, who attends these meetings, what transpires at these meetings, and the importance of these meetings. The GISD transition webpage discusses what transitional services are, provides some examples of transitional services, presents questions that parents should ask themselves about their child to get the parents to start contemplating the transition process, and it provides outside community agencies’ contact information. The GISD’s Transition Decision-Making Matrix was
reviewed as previously discussed. The documents provided strong evidence to support that GISD meets or exceeds both the federal and state laws regarding IEPs and the transition planning process for students with disabilities.

Federal laws also require schools to take into consideration a disabled student’s strengths, interests, and preferences at the IEP/transition meetings. Interview question 3 asked respondents, “Does your agency use any assessments to determine the youth with ASD’s strengths, preferences, and interests?” Respondents said GISD uses both informal and formal assessments. One assessment tool that was previously discussed is the GISD’s Transition Decision-Making Matrix that the school district uses for all grade levels. Respondents also said the school district uses interest inventories that the students can access on-line. One such assessment tool mentioned is “Career Cruising.” For students who cannot read, respondents said they will walk them through the Career Cruising assessment. Respondents said the school district also uses a picture inventory that allows students to point to pictures that illustrates their interests and preferences for employment and other areas in their lives. The interviews provided strong evidence to support that GISD uses assessments to determine a youth with ASD’s strengths, interests, and preferences.

Documents were also analyzed to research the assessment tools that GISD uses to determine a student with ASD’s strengths, interests, and preferences. GISD’s policy states that a student’s transition services must be “based on the individual child’s needs, taking into account the child’s strengths, preferences, and interests.” However, the researcher could not find any GISD policy that described the assessments GISD uses to determine a student’s strengths, preferences, and interests. The GISD Transition Planning flyer reads, “Every 8th grader will complete Career Cruising and a Visual Transition Plan or Written Transition Plan,” which will
then be attached to their ARD document. The Career Cruiser assessment was accessed on-line by doing a Google search; however, the site requires a username and password. The site indicates that students who have access to Career Cruiser will have a personalized portfolio that contains the assessment results, career matches, educational options, an individual learning plan, and scholarship applications. On the GISD’s transition website, anyone can access the GISD Transition Decision-Making Matrix. The ARD Committee Meeting brochure states that the ARD committee will “Review the assessment information. This may include test scores.” The ARD brochure also states that at the ARD, parents can “discuss your child’s strengths, preferences and interests.” Overall, a review of the documents indicated that GISD will take into consideration a child’s strengths, preferences, and interests at their ARD transition meeting. There was also evidence supporting that GISD uses their Transition Decision-Making Matrix for all students with disabilities, and that all 8th graders will complete the Career Cruiser assessment.

Person centered planning (PCP) is frequently mentioned as a best practice for schools to use during the IEP transition planning process for students with ASD. To determine if GISD uses PCP, the interviewer asked GISD Special Education staff, “Do you use Person Centered Planning (PCP) to encourage the youth with ASD to participate in and/or lead their IEP?” Respondents said GISD does use PCP. A couple of the respondents indicated that they have been trained in PCP and use it at ARD meetings regularly. One respondent said it is one of their favorite things to do stating, “It’s an amazing process. It’s very scientifically based about how you go about asking the questions and in the order that you do.” Two respondents said that parents really enjoy the process. One respondent advised they have actually gone to a student’s home to facilitate an ARD transition meeting using PCP. However, respondents reported GISD typically has the disabled student leave class late in the afternoon and go to a warm and
welcoming room, where there is a big chart board to take notes. The facilitator tells the student it is all about them and that even their parents cannot speak unless they give their parents consent. One respondent said, “You walk them through this process that they come up with all on their own, about buying in as to why they are doing what they are doing, and we can typically stir things so it’s a realistic goal.” A couple of respondents provided examples of how using PCP allowed students to come up with their own plan on how they were going to graduate from high school to achieve their goals. Another respondent stated, “The whole process is, you’re just a facilitator and you’re really just trained to write down what they say; and you talk about fears and about things that they think they’re good at. You put all this down in front of them; and it’s a tremendous process, and by the end you got this is where I want to go, this is what I’m doing today to get there, and here are some action plans for the next few months that are real short term that I’m going to work on.” Another respondent whose child attended GISD stated, “My son, who is very nonverbal, ran his IEP. He was up there with a pointer telling members his interests, and my husband and I were so amazed.” When asked if GISD has a PCP curriculum they use, respondents said there is no such curriculum they use, but teachers get trained to be PCP facilitators. One respondent said that GISD tweaked PCP a little bit, so that it is accommodating to their families and to what they do in the district. The interviews provided strong evidence (by providing detailed examples) that GISD uses PCP to help students with ASD participate in and/or lead their ARD transition meetings.

Documents were also analyzed to learn more about how GISD uses PCP. The researcher reviewed GISD’s policies and procedures, GISD’s Special Education Transition website and connected sites, the ARD Committee Meeting brochure, and the Transition Planning flyer. The researcher only found the phrase “Person Centered Plans” mentioned in the GISD Transition
flyer. This flyer indicated that the students lead their ARDs. The flyer did not provide any additional information on PCP. Since most respondents said PCP is an amazing process and parents enjoy it, GISD should discuss the process in more detail. Also, GISD should have a policy mandating ARD facilitators to use PCP.

**Family and Other Support Systems**

Family and other support systems are often involved in a youth with ASD’s transition planning process. The researcher asked respondents, “Who is invited/included to/in the IEP Transition Meeting?” Respondents said there is a legal list that make such meeting a duly constituted ARD meeting. Respondents reported the following individuals get invited to ARDS: the school Principal, Assistant Principal or other administrators, General Education Teacher, if the student is in general education classes, Special Education Teacher, assessor, if the student is getting assessed for special education services, Occupational Therapist, Physical Therapist, Speech Therapist, and any other individual that will provide a service to the student or anyone that the family invites. Respondents discussed a GISD parent liaison, who will sometimes attend ARD meetings and provide support and information to the families of students with disabilities. Also, three respondents prided GISD for having 50 support service staff, which is a relatively large number for the size of the school district. Interview respondents provided strong evidence to support that all required individuals get invited to the students’ ARD meetings.

Interview respondents provided similar responses when asked, “How do you encourage family members and other support systems to attend and participate in the IEP transition meeting and process?” The majority of respondents indicated that all parents get invited to their child’s ARD transition meeting. One Respondent said that some parents “get it,” while others are not prepared for the process. This respondent advised that when parents start the special education
process, when their child is young, it can be very overwhelming. During that time, it is typically a new and stressful process for the parents. Parents are having to get their child assessed by doctors, school personnel, and other outside agencies. Most parents get “exhausted” during this time, with trying to keep up with all their child’s appointments, their work schedules, and other life demands. This initial stress starts wearing off as the parents get acclimated to the process and the school starts providing the majority of services to their children. One respondent said, parents start to “hit a plateau,” as they get comfortable with allowing the school to do its job, but when the parents hear the word “transition,” it starts bringing up trepidation about starting a whole new overwhelming process. One respondent described the process as, “it’s like if someone had cancer and they’re cancer free for some time. They go back to the doctor and find out they have cancer again.” Another respondent used the term “rollercoaster” to describe the process for parents. This respondent said some parents are proactive and never get off that rollercoaster, while others are not ready to get back on that rollercoaster. In order to get parents prepared for the transition planning process, respondents said that GISD provides transition information in the ARDs when the disabled student is young. One respondent said they attend ARDs when the disabled students are young to influence the parents not to get too comfortable and to start preparing them for their child’s life after high school. This respondent said they try to make parents understand that there is support and GISD staff members are willing to walk them through the process. Another respondent said there is a lot of “psychology involved” stating, “The kids are easy to teach, it’s teaching the parents. Ninety percent of what I do is working with parents and trying to figure out how I can get the family to do this.” One respondent said GISD offers trainings to parents on the transition planning process, and GISD co-hosts transition fairs with other school districts and agencies in the community. This
researcher was able to attend an employment planning meeting with GISD and a transition fair that was hosted in a Round Rock high school. Attending the GISD’s employment meeting and the Round Rock transition fair were both very beneficial for this researcher, as they both provided a wealth of information on the transitional programs available in schools and in the community. The interviews provided strong evidence to support that GISD’s special education staff members are aware that parents are a big part of the transition planning process and that GISD staff members attempt to get parents prepared for the transition process prior to their children attending high school.

Document analysis was also done to identify the individuals who are invited to transition planning meetings and how GISD encourages parents to participate in the process. GISD’s ARD policy states that the district shall ensure that each ARD committee meeting includes “the parent, at least one regular education teacher of the student, at least one special education teacher of the student, a representative from the district who: a) is qualified to provide or supervise the provision of specially designed instruction to meet the unique needs of students with disabilities; b) is knowledgeable about the general education curriculum; and c) is knowledgeable about the availability of resources of the district; other individuals who have knowledge or specific expertise regarding the student; the student if appropriate; a representative who is likely to provide transition services to the student; when considering initial or continued placement of a student in a career and technical education program, a representative from career and technical education, preferably the teacher;” and other personnel who provide special services to the student such as Occupational or Speech Therapists. GISD also has several policies related to “encouraging parents” to support their child’s participation in several school activities. The ARD Committee Meeting brochure provides information on who can attend ARD meetings and
the importance of the parent attending the ARD. The GISD’s Special Education Parent Liaison brochure provides information about the roles of a parent liaison and how they can support the parents of the disabled student. The GISD Transition Planning flyer has the phrase “get on the List now” for parents of students who are in early elementary grade levels. The GISD transition website has a wealth of information for parents about the entire process, and it includes outside resources for parents such as the Texas Transition Guide for parents in both English and Spanish. Overall, document analysis provided strong evidence to support that GISD provides information about who gets invited to IEP/transition meetings, individuals that support both the parents and disabled students, and that GISD is dedicated to encouraging parents to participate in the transition process.

**Interagency Collaboration**

Interagency collaboration is an important piece to the transition process. If a school district cannot provide a service that a youth with ASD needs, then it is imperative that the school district collaborates with another agency that can provide the service. In order to determine if GISD collaborates with other agencies to provide transitional services to youth with ASD, the interviewer asked GISD special education staff several questions to understand GISD’s procedures on the matter. Question ten asked respondents, “What agencies are invited to the IEP transition meeting?” One respondent stated, “Outside agencies rarely attend ARDs.” In order for an outside agency to attend an ARD, they must have “parental consent,” said one respondent. Respondents indicated that each student’s ARD is confidential, so without parental consent, GISD will not invite an outside agency. One respondent said that they have the time to contact outside agencies and request they attend ARD transition meetings, but this is only because they have a small student to teacher ratio. This respondent advised that not all teachers have a small
student to teacher ratio. Another respondent stated, “It’s gaining the parent’s trust. Parents sometimes do not trust teachers. Staff can help set it up, but parents have to trust the staff first.” One respondent said they have offered to take a student to an outside agency, but the parents did not provide consent. Another respondent said, “ARDs are like signing for a home. That is not the place to bring in these outside agencies. That is not the place to have long detailed conversations about things. That’s the place to dot the I’s and cross the T’s.” This respondent further stated “having parent meetings and conferences are the places where the parents need to be making these connections to outside agencies. ARDs should be a lot of preparation beforehand and finalizing at the meetings.” This respondent advised that GISD holds the parent trainings and co-hosts transition fairs, so parents will know about the external resources available to them.

Interview question 11 asked respondents, “Do DARS representatives get invited to the IEP transition meetings?” One respondent reported that GISD has a special education staff member that is responsible for inviting the regional DARS representative to the transition meetings for the entire school district. Respondents indicated that there is only one regional DARS representative and this representative has approximately 200 students on his/her caseload, so it is impossible for this person to attend all ARD transition meetings. One respondent stated, “All we are required to do is give them the information and contact them, but we can’t stop the ARD if they are not able to attend.” Another respondent said that in some cases, GISD has already spoken with the DARS regional representative prior to the ARD meeting. If the student has an open case with DARS and the DARS representative is unable to attend the ARD meeting, then GISD will document at the ARD that the student has an open case with DARS and they will state the frequency of how often the student meets with the DARS representative. One respondent advised they have often introduced the DARS regional representative to parents and
students. Then, they will schedule a DARS intake at the student’s high school campus. There was evidence to support that GISD invites the regional DARS representative to the ARD transition meetings, but due to the size of this representative’s caseload, it is unlikely for them to attend all of the ARD transition meetings.

Question 12 asked respondents, “What agencies do you collaborate with to assist the student in achieving their transition goals?” Respondents said depending on the severity of the student’s disability, DARS or Bluebonnet Trails MHMR might be involved and may offer services that GISD does not offer, as long as it did not cross with what the school is doing. One respondent said they have referred a student to the Williamson County Health District due to the nature of their disability. Another respondent advised that even though they refer some students to outside agencies for additional assistance, some parents do not want outside agencies inside their homes. The interviews revealed that there are two main agencies, DARS and Bluebonnet Trails MHMR, that GISD collaborates with.

Documents were reviewed to locate additional information that discussed GISD’s policies on interagency collaboration. The following documents were analyzed: GISD’s policies and procedures, GISD’s Transition Planning Flyer, GISD’s ARD Committee Meeting brochure, and GISD’s special education transition website. GISD’s policy states that the school district can contract with another local government to “provide a governmental function or service that each party to the contract is authorized to perform individually.” This policy proves that GISD is allowed to contract with other government agencies to provide services to students. Also, the GISD’s transition policy states that when a disabled student reaches the age 14, the student’s ARD must address “appropriate circumstances for referring a student or student’s parents to a government agency for services.” Therefore, GISD cannot refer a student with ASD to an outside
government agency for extra services, unless there is an appropriate circumstance. The Transition Planning flyer mentions that by the 8th grade, students are required to complete the Career Cruising assessment. Since this assessment requires a log-in, it is safe to assume that GISD has a contract with the makers of Career Cruising. The GISD special education website mentions the following outside agencies: Bluebonnet Trails MHMR and ACC, and it provides a link to their websites. The ARD Committee Meeting brochure, indicates that parents are allowed to invite any person to the ARD meeting that they want there, and it provides external resources for parents to access. Overall, document analysis revealed that GISD can only refer students with ASD to outside agencies if there is an appropriate circumstance requiring GISD to contact the agency. Also, the documents provided evidence to support that GISD furnishes contact information for outside agencies, and parents are free to invite outside agencies to their child’s ARD meeting.

**Self-Determination**

Self-determination is frequently mentioned in the literature as a best practice for high schools to teach students with ASD. Respondents from GISD were asked two questions to determine if and how the school teaches self-determination skills to students with ASD. Question 13 asked respondents, “How do you teach self-determination skills to ASD youth?” Question 14 asked, “Is there a specific curriculum that GISD uses to teach self-determination skills?” Respondents said that there is no such curriculum that GISD uses, but self-determination skills are embedded and taught throughout the school day. One respondent said it could be “as basic as giving younger students choices and encouraging them that they have chores at home.” This respondent said that teachers attend trainings on how to incorporate self-determination throughout the school day. This respondent advised that they visit teachers to preach the
importance of integrating these skills into the daily lesson plans. Another respondent stated, “We make sure they attend their ARDs, and then they start participating in their ARD, and then by the time they’re in high school they can lead their ARD, and what better way to teach self-determination.” This respondent indicated that GISD uses scripts to help students participate in and/or lead their ARD transition meetings. One respondent said that it is hard to implement teaching such skills during the day stating, “Unless it’s during lunch time, before, or after school, the best way to do it, is to integrate it during the lesson. It becomes a balancing act for teachers to teach their classes and get in self-determination.” Another respondent, who has worked for other school districts said, “Other schools have incorporated a 20-minute time period to discuss self-determination skills that the students will work on. If the teacher follows the format, then it can be effective. However, some teachers don’t use the time wisely. They may be doing other things during this time period, such as lesson planning.” This respondent further said an outside agency, Spectrum, started a self-determination program because another school district could not fit the curriculum into the school day. As discussed, GISD uses the Transition Decision-Making Matrix to assess where a student is on a functional skill, and then the teachers help that student to become more independent in that skill. Overall, the interviews provided some evidence to suggest that GISD teachers receive training on how to teach self-determination skills throughout the day and are encouraged to do so, but the interviews did not provide strong evidence to support that GISD teachers actually teach these skills.

Document were also reviewed to gather more information on how GISD teaches self-determination skills to students with ASD. The following documents were reviewed: GISD’s policies and procedures, GISD’s special education web-site, GISD’s Transition 101 flyer, GISD’s Bridges brochure, and GISD Teachable Moments flyer. A search for the term “self-
determination” in GISD’s policies and procedures came up empty. As previously mentioned, the GISD Transition Decision-Making Matrix is designed to assess where a student’s level of functioning is on a life skill. The goal of the Matrix is to help the student become more independent in that life domain. The matrix does not mention the term self-determination, but it is a good measuring tool to use to gauge whether a student is learning such skills over time. The GISD’s special education transition website has a self-determination link. This link provides a household chores development list for parents to use to gauge whether their child is able to complete certain chores at each developmental milestone. The GISD Transition 101 flyer provides evidence that students will be expected to participate in their ARDs at specific grade levels, which helps students gain self-determination skills. However, the flyer does not provide any evidence indicating that students are encouraged to lead their ARD by the time they reach high school. The GISD ARD Committee Meeting brochure says that students need to attend their ARD meetings, and they need to “learn how to self-advocate for themselves,” which is what self-determination is all about. The Bridges brochure does not discuss self-determination, but it provides statements indicating that program participants will participate in activities that will help them advocate for themselves, such as having independent living and paid employment. None of the documents provide evidence that students are allowed to use scripts in their ARD meetings. A review of the documents indicated that GISD subtly mentions how students will learn self-determination skills. If one were to only look for the term, self-determination, they would miss all the tools that GISD uses to gauge where a student is on learning self-determination skills, and the things that students and parents can both do to help the students learn such skills.
Independent Living Skills

Independent living skills are necessary for all students with ASD to learn while in high school. To determine if GISD teaches independent living skills to students with ASD the following questions were asked during the interviews: “Does your agency teach independent living skills to youth with ASD?” and “If so, what independent living skills are taught to youth with ASD and how are they taught?” Interview respondents advised, GISD attempts to teach disabled students independent living skills at an early age. One respondent said they start telling parents to start considering living arrangements for their disabled children at a young age. This respondent said they ask parents what their plan is for their disabled child after high school. If the parent says they will have their child live with them for the rest of their life, then the respondent will attempt to influence the parent to consider other living arrangements for their child. This respondent said they do this so the disabled student can get to know other individuals and get acclimated to other living arrangements before their parents’ death. Interviews indicated that while students are in middle school, GISD offers an after school program, ASAP, that teaches students both social and cooking skills. One respondent said, they do not cook easy things, but instead they cook things like “Thai and Chinese food.” The interviews revealed that as GISD disabled students get older, GISD starts shifting away from academics and starts focusing on more vocational education. Respondents said GISD offers community based vocational instruction (CBVI) at both high schools. These programs teach students the functional skills that they will need to succeed at a community employer. Also, GISD offers home based programs. These programs send specialists to the student’s home to help the student and their parents get a system in place that will help the student become more independent. This researcher recently requested home based services for his autistic daughter at an ARD meeting on 03/08/16, to which, GISD said they will first have to evaluate his daughter to determine if she
is eligible to receive such services. Respondents mentioned that the district offers home economics to special education students and money management is offered during the students’ core classes. One respondent stated, “Life skills and functional skills are problems for all students and not just students with disabilities.” This respondent said classes such as auto tech and home economics teach these skills, but some students go through high school and never take a class that teaches life or functional skills. This respondent said that some students graduate from high school and then go to college, where they get lost because along the way, they have never learned these vital skills. Respondents discussed a GISD program called “Bridges,” which is for students who are aged 18 to 21 and have graduated from high school. In order to qualify for the program, GISD must believe that the school district can still meet some of the student’s transitional goals through Bridges. Apparently, all school districts have a Bridges program, but the program is not identical in every district. Respondents mentioned that GISD’s Bridges program serves a total of 20 students who all participate in person center planning. Each student receives independent living skills based on their individual needs. Some examples of the independent living skills that students are taught in the program include finding a home and learning the costs associated with living in a home, creating their own budgets, buying their own groceries, cooking, volunteering at local businesses, and participating in paid employment. The interviews provided strong evidence to support that GISD teaches independent living skills to students with ASD.

Document analysis was also done to review GISD’s practices on teaching independent livings skills to students with disabilities. The following documents were reviewed: GISD’s policies and procedures, GISD’s special education transition website, GISD’s Bridges brochure, and GISD’s Transition Decision-Making Matrix. GISD’s policy on transition services requires
teachers to teach disabled students independent living skills, as indicated on the student’s ARD. The GISD special education transition website provides a synopsis on some of the programs that provide independent living or “functional” skills, such as the CBVI and Bridges programs. The Bridges brochure indicates that the program teaches independent skills in the areas of employment, adult living, life-long learning, and social and leisure time. Again, the Transition Decision-Making Matrix assess where a student’s current level of functioning is in a specific life domain. A review of the documents provided strong evidence to support that GISD teaches independent living skills to all students with disabilities.

**Inclusion in General Education Classes**

Including students with ASD in general education classes is cited as a way to help the youth with ASD gain social skills that will help them later in life. It is also a very controversial topic. Some people strongly encourage students with ASD to be included in all general education classes, while others believe that students with ASD should only be in the general education classes that they can succeed in. To learn about GISD’s views on the topic, GISD staff members were asked a few questions. Question 17 asked respondents, “What’s your ISD’s policy on inclusion in general education classes for youth with ASD?” Respondents said general education is always considered first. One respondent said, GISD determines it “case by case and class by class.” Respondents mentioned that if GISD believes a general education class is appropriate for a student, then that student will be placed in that class. All respondents indicated they try to include special education students in as many general educational classes as possible. For example, one respondent said students with ASD can typically participate in music, lunch, and library time with the general education population, but other students with ASD can participate in more general education classes, such as art, English, PE, and math. Another
respondent said it becomes a “balancing act” for teachers. This respondent provided an example of a middle school student who was in all general education classes, but this student was lonely because he was not really included during classroom discussions. This teacher stated, “Teachers have to learn how to teach the subject matter and also include the disabled student, which can be very challenging.” Another example provided, was about a student, whose parents wanted them to be in all general education classes. This student was skipping classes to be with her friends, who were also kids in special education classes. This respondent stated, “You have to look at the individual and what their needs are, and sometimes it doesn’t fit the definition. You have to consider, are you doing more harm than good.” This respondent said placing this child in all general education classes was doing more harm than good to the child. One respondent stated, “We have IEPs, individual education programs that will be specific for that individual.” Another respondent discussed afterschool programs that the district offers to elementary and middle school students. This respondent said these are “enrichment programs,” that allow disabled students an opportunity to interact with their peers in regular education classes. This respondent said they do activities together such as dance and cook. Another respondent discussed how GISD has school clubs that allow disabled students in high school to interact with their peers in general education classes. All respondents made it clear that GISD determines whether a student with ASD will be included in a general education class, is on a case by case and class by class basis.

Question 18 asked respondents, “Does your ISD train regular education teachers on how to best teach this population? Respondents said if a student with a disability is in a general education class, then that classroom is paired with both special education and general education teachers. These teachers attend a two-day training called “co-ed training,” which was described
as being “great” by one respondent. One respondent said you have to be careful on how you pair teachers stating, “If you have two types of teachers, two alpha dog teachers in the same room, there’s going to be problems.” Another respondent said it is the job of all staff members “to know they are there for the students.” This respondent said both teachers have to buy in to co-ed teaching and have great communication between each other to discuss what is working and what is not working.

Another respondent discussed blended learning, which is where several students are in the same classroom, but they are all doing different work. For example, students will be in a computer lab, where one student is working on material that is on a 1st grade level, while another student is working on college age material. In blended learning, “teachers are more of facilitators and not lectures,” the respondent said. The teacher walks around the classroom and helps each student. This respondent said blended learning is unique because, “every student has an IEP.” These types of classrooms require students with disabilities to ask for help. Therefore, disabled students will also learn self-determination skills in such classrooms. Overall, there was evidence indicating that students with ASD receive extra support in a general education classroom by having both general education and special education teachers in the classroom. Also, there was evidence that both the general education and special education teachers receive extra training on how to make this approach work. However, the interviews failed to provide any evidence indicating that general education teachers receive specialized training on how to best work with this population.

Document analysis was also conducted to understand GISD’s policies and procedures on how the district includes disabled students in general education classes. The following documents were reviewed: GISD’s policies and procedures and GISD’s Instructional Settings.
website. The Instructional Settings website provides information that disabled students can be placed in different settings based on the needs of the student, as identified in the student’s ARD. The site indicates that GISD has a “No Instructional Setting,” which is for students who need special education services, such as speech therapy, but the student is not in a special education environment. Students can be placed in “Mainstream,” which is for students who need special education support, and this support is provided in the general education classrooms. There is a “Resource Room” for “students who need special education and related services in a setting other than regular education for less than 50% of the student’s day.” There is a “Self-Contained Classroom” that is “for students who need special education instruction and related services for 50% or more of the student’s school day on the regular school campus.” There is a “Vocational Adjustment Class” (VAC) that places special education students on a job, where they are supervised by a special education teacher. This includes both part-time and full-time job training and employment, “as indicated on the student’s IEP.” The site discusses “Homebound,” which is for disabled students who qualify for services at home or at hospital beds. Homebound is only for students that are “expected to be confined for a minimum of four consecutive weeks as documented by medical personnel.” There is a “Hospital Class” setting that is for students who are placed in a hospital facility or other approved residential care treatment facility that is not run by GISD. GISD students can also be served in a “State School for Persons with Intellectual & Developmental Disabilities (IDD).” Lastly, the site indicates that GISD serves students in “Residential Care and Treatment Facilities” that are within the school’s district boundaries, but whose parents reside outside the school district. GISD’s policies and procedures state it is the responsibility of the ARD committee and district to be in “compliance with the least restrictive environment standard.” GISD’s least restrictive environment policy mirrors what is stated in
both the Texas Code of Federal Regulations (34 C.F.R. 300.13, .17, .36) and the Individual with Disability Education Act of 2004 (20 U.S.C. 1401 (9)). Both laws state, “A district shall ensure that, to the maximum extent appropriate, children with disabilities, including children in public or private institutions or other care facilities, shall be educated with children who are not disabled. Special classes, separate schooling, or other removal of children with disabilities from the general educational environment shall occur only when the nature or severity of the disability is such that education in regular classes with the use of supplementary aids and services cannot be achieved satisfactorily.” This law clarifies that a student with a disability can be placed in a regular education class, if the student can perform satisfactory in the class with the use of supplementary aids and services. However, this law fails to consider that placing a student in a general education class may do more harm than good to the student. GISD’s policy states that the “school district is required to provide training if an educator does not possess the knowledge and skills necessary to implement the IEP” of a student. The training must be “based on scientifically based research, that relates to the instruction of students with disabilities and is designed for the educators who work primarily outside the area of special education” (GISD Education Code 21.451(d) (d), (e)-(f)). A search in GISD’s polices for both teacher trainings for students with ASD and the term “co-ed training” both turned up empty. Overall, there was evidence to support that GISD has policies in place to include students with ASD in general education classes, if the student can perform satisfactory in the class. Also, a review of the documents provided evidence that general education teachers are required to receive training, if they lack the knowledge and skills necessary to implement the student’s ARD. However, there was no evidence indicating that general education teachers receive training on how to best work with students with ASD.
Vocational Education Training

Vocational education training is vital for all youth with ASD in order to prepare them for the workforce. Interview respondents were asked, “What types of vocational education classes does your ISD provide to youth with ASD?” Interview respondents discussed a Community Based Vocational Instruction (CBVI) program, which is for students who are at least 16 years of age. This program allows students to sample different jobs in the community every 9 weeks, and learn work rules, appropriate behaviors, and social skills. CBVI has a Job Coach that takes four students out at a time to sample the various jobs. One respondent said, “It gives them an idea of what they are good at and what they enjoy, and it gives us a chance to observe them and give them feedback on what we see are their strengths and what they enjoy doing.” GISD has vocational programs for special education students that includes allowing juniors to attend school half-day and then go to work either part-time or full-time. In order for a student to participate in these half-day vocational programs, they must be current on all of their required school credits. While they are in the program, they will earn academic credits for work experience. When asked if GISD has any career preparation classes, answers from respondents included they teach disabled students how to “fill out applications,” they “do mock interviews,” they bus disabled students around to community employers to learn about differing jobs, they teach job maintenance skills, have pre-employment and employment skills training, and they teach job etiquette skills. As previously discussed GISD has a Bridges program. Bridges teaches post-high school graduates any skills they will need to help them gain employment, maintain employment, and live independently. Participants in Bridges may volunteer at local businesses or have paid employment. The goal of Bridges is “paid employment” for participants, said one respondent. Respondents also said that special education students have the opportunity to enroll in “career and technical education classes” if identified on the student’s ARD. The interviews provided
strong evidence to support that GISD provides vocational trainings to prepare students with ASD for a job, help them learn about differing jobs in the community, and encourages them to work in the community. Learning about employment in the community, is probably one of the best ways to teach students with ASD about what the job will be like and what skills they will need to be successful on the job.

Document analysis was also done to review GISD’s policies and descriptions on the vocational education classes that GISD offers. The following documents were reviewed: GISD’s policies and procedures, GISD’s Special Education website, and GISD’s Bridges brochure. GISD’s policy says if indicated on the disabled student’s ARD, special education services shall include vocational adjustment classes and programs. This includes paid and unpaid employment with regular scheduled direct involvement by special education personnel. GISD’s policy also reads that special education students can participate in career and technical training that will lead to postsecondary education. If identified on the student’s ARD, then “The ARD committee shall include a representative from career and technical education, preferably the teacher, when considering initial or continued placement of a student in” that program. GISD’s policy also states that planning for the student should be “coordinated among the career and technical education, special education, and state rehabilitation agencies and should include a coherent sequence of courses.” The Bridges brochure discusses helping the participants to find a job in the community and helping them keep the job. GISD’s Special Education website provides a synopsis of the following vocational education programs that are offered at both high schools: Occupational Investigation, Vocational Experience, Occupational Preparation, Community Based Vocational Instruction (CBVI), Bridges, Project Search and Career, and Technical Training (CTE). Most of these vocational programs were discussed during the interviews.
Occupational Investigation includes all of the aforementioned pre-employment programs that GISD offers, and provides some additional teachings that were not discussed in the interviews. For example, work habits, employment information, employer expectations, work simulations, attendance, work related vocabulary, cooperation with co-workers, completing working related documents, manual dexterity, and any other skills that will help the student be successful during employment are mentioned. A review of the documents provided strong evidence to support that GISD teaches as many skills as possible to disabled students that will prepare them for a job, gain knowledge of varying careers, do volunteer/work experience in the community, and give them the skills they will need to maintain employment.

**Work Internships/Paid Employment**

The last element of the high school level process is work internships and paid employment. Research has shown that providing work internships and/or paid employment to students with ASD while they are in high school, significantly increases their chances of being employed following high school. Question 22 asked respondents, “Does your ISD help students with ASD gain work internships or paid employment when they are within 2 years of graduating?” Respondents discussed the CBVI program and the vocational program that allows juniors to attend half days of school to work full-time or part-time while earning high school credits. Another respondent went into greater detail about the Bridges program. GISD’s Bridges program is very unique. As mentioned, the program allows post-high school graduates to volunteer at local businesses, teaches participants to create their own budget, search for a home, purchase their own groceries and helps them gain and maintain employment, among other things. One thing that was not previously mentioned about Bridges, is that participants are paired with a Job Coach, if needed, to help them find a job, gain employment, train them on the job, keep the
job, and provide follow-up services, as needed. Also, the Bridges program has identified employers in the community that are willing to hire disabled students. Bridges staff members develop strong relationships with these community employers. This allows the staff to discuss the needs of the businesses and identify program participants that can be trained to fill the vacancies in the businesses. This researcher found two negatives of the program: 1) due to lack of resources, the program can only accept 20 participants at a time; and 2) the program cannot work with participants once they reach the age of 22. Hopefully, by that time, the participant has a full-time job and is living independently. Respondents said the program started 10 years ago, and there are alumni participants that began when the program commenced that are still employed full-time. The interviews provided strong evidence to support that GISD has programs in place that allow students with ASD to do work internships and paid employment.

Documents were also reviewed to learn more about GISD’s policies and practices on the subject. The following documents were reviewed: GISD’s policy and procedures, GISD’s special education website, and the Bridges brochure. As previously mentioned, GISD’s special education website, provides a synopsis of the following work internships and paid employment programs: Vocational Experience, Community Based Vocational Instruction, Bridges, and Project Search. Project Search is another program for GISD students who have earned all of their high school credits. Per the website, Project Search is a “nine-month internship for young adults that takes place at Seton Healthcare Facility.” Participants learn skills they will need to succeed in the workforce. Even though the program was not discussed during the interviews with GISD staff members, this researcher met Project Search staff at the Transition Fair that was held in Round Rock, TX. The Project Search staff verified that the program is offered to GISD’s students. The Bridges brochure provides further evidence that the program offers a Job Coach to
help participants gain employment and learn the job, if needed. The brochure also states, “Our main goal for the student is to have independent paid employment.” This researcher searched for the terms “paid employment,” “student jobs,” and “work internships” in GISD’s policies and procedures, unfortunately the terms did not come up within the context of assisting students with disabilities gain employment. GISD’s polices do discuss various vocational trainings, which indicates that the school district considers work internships and paid employment to be an extension of vocational trainings. A review of the documents provided strong evidence to support that GISD offers internships and paid employment programs to students with disabilities.

**State Level Process**

The *Rehabilitation Act of 1973* (Public Law 93-112) was the federal law that authorized certain state programs be paid by federal grants to assist individuals with disabilities in obtaining and maintaining employment. In Texas, the Department of Assisted and Rehabilitative Services (DARS) is the agency that provides such services to individuals with disabilities. To gauge DARS’ transitional programs for youth with ASD residing in Georgetown, the researcher attended two non-participation observations of public presentations, surveys were sent to four DARS representatives, and documents were analyzed. DARS has stern rules regarding employees participating in interviews and completing surveys for any item that may be made available to the public; therefore, none of the DARS representatives completed the survey. All the data were gathered from the non-participation observations of public presentations and reviewing DARS’ documents.

**Eligibility Requirements**

In order for youth with ASD to be eligible for transitional services provided by DARS, the youth must qualify for such services. Youth with ASD are not entitled to receive transitional
services provided by DARS, as they were entitled to such services during high school. In order
to receive transitional services through DARS, the youth with ASD must do several things prior
to receiving these services. To collect data on how DARS determines eligibility for youth with
ASD in Georgetown, this researcher attended two non-participation observations of public
presentations. A DARS speaker reported that in order to determine eligibility for DARS’
transitional services, the youth with ASD will either have to contact the local DARS office,
which is located in Round Rock, TX, or their high school can contact the DARS representative
for GISD with permission from the youth and their parents. After initial contact is made, the
youth with ASD will have to complete an application, which according to the speaker, takes
about an hour. This speaker said that the DARS representative for GISD will go to the student’s
high school to help them complete the application. This was also reported during the interviews
with GISD special education staff. The application asks the youth with ASD for their goals in
life, work history, volunteer activities, strengths, interests, and limitations. During the
application process, the youth will sign any consent forms, so DARS can contact the youth’s
doctors and any other professional that can verify the youth’s disability. To be eligible for
services through DARS, a person must “have a physical or mental impairment; the impairment
must constitute a substantial impediment to employment; the individual must require VR
services to prepare for, enter, engage in or retain gainful employment consistent with the
individual’s strengths, resources, priorities, concerns, abilities, capabilities, interests and
informed choice; and the individual must be capable of achieving an employment goal”
(PowerPoint presentation from 02/27/16). If a youth is receiving social security benefits for a
disability, there is “presumed eligibility” that they will qualify for DARS. A DARS speaker
advised that the individual must be willing to work in competitive employment. DARS also tries
to get services in place prior to the individual graduating from high school. One public audience attendee asked the speaker, “At what age can my child start receiving services from DARS, if they are eligible?” The DARS speaker advised DARS can open up a case with a disabled youth at any age, if the youth has a need that the child’s school district cannot meet. The speaker advised DARS has 60 days from application to determine if the individual is eligible for services or longer, if there are extenuating circumstances that delay determining eligibility. If a youth with ASD does not meet the criteria to be eligible for DARS’ transitional services, DARS will “help get them connected with other agencies,” said the speaker. The public presentations provided sufficient evidence to support that the DARS eligibility process follows what is discussed in the literature; however, in this researcher’s opinion, having 60 days to determine eligibility for services is an inefficient way to serve this population. In order to better serve individuals with any disability, the duration to determine eligibility for services should be shortened.

Documents were also analyzed to gather more data on the DARS’ eligibility process. The following documents were reviewed: DARS’ policies and procedures, DARS’ pamphlet, A Guide for Applications, and as previously mentioned the DARS’ PowerPoint Presentation from 02/27/16. DARS’ policies and procedures provide an in-depth description of both the initial contact at the application meeting and the eligibility determination process. During the application process, a Rehabilitation Counselor (RC) will conduct a Diagnostic Interview to gather as much information from the applicant, which includes “a thorough examination of the consumer’s work history, information to determine eligibility, and information that may be used later during assessment to develop the IPE for eligible consumers” (Rehabilitation Policy Manuel (RPM), 2.5). This policy provides everything that was discussed at the public presentations and
more. RPM 3.1 requires RCs to not only speak with the applicant, applicant’s doctor, and other professionals, but to also speak with the applicant’s family members to determine eligibility. If a case takes longer than 60 days to determine eligibility, the RC must inform the applicant of the “exceptional and unforeseen circumstances (beyond DARS control) that are delaying eligibility determination, obtain agreement from the consumer that the extension of time is necessary, document the reasons for the extension of time,” and complete the appropriate paperwork (RPM, 3.3.2). To determine eligibility, the RC must also determine if the supporting documentation to determine eligibility is current (RPM, 3.3.4). DARS’ policies also list specific disabilities, such as having HIV, being deaf, and having specific mental health diagnosis. Then, what the RC needs to consider in order to determine if they are eligible for services based on the consumer’s specific disability. DARS has a policy (Comprehensive Rehabilitation Services (CRS) Manuel 33.1) to determine eligibility for individuals with ASD. This policy requires the RC to “select the impairment category table that best identifies the disability: sensory-communicative, physical or mental.” DARS’s policies provide extensive information on what RCs are required to do in order to determine eligibility for a disabled person. The DARS’ pamphlet, A Guide for Applications, advises readers what vocational rehabilitation is, how individuals apply for services, what to expect and need to bring to the application meeting, and information that not all applicants will be determined eligible for services, among other things. Document analysis provided strong evidence to support that DARS provides an in-depth description of the entire application process to determine eligibility for transitional programs for individuals with disabilities.
Rehabilitation Counselor

After an individual is determined eligible for transitional programs provided by DARS, they will be called consumers and assigned to a Rehabilitation Counselor. Since representatives from DARS could not complete the survey, the researcher took notes while attending two non-participation observations of public presentations to see if the survey questions would be answered at the presentations. Through the interviews with GISD special education staff, the researcher had learned that DARS has one RC that is assigned to both the Georgetown and Cedar Park school districts and this RC has approximately 200 individuals on his/her caseload. The researcher also learned through the interviews that this DARS representative does get invited to the Georgetown students’ ARD meetings; however, it is impossible for this RC to attend all ARD transition meetings due to the size of his/her caseload. The public presentations did not answer survey question 16, which asked, “Does your agency have specialized Rehabilitation Counselors or Case Managers to work with individuals with ASD?” Also, the public presentations did not answer survey question 20, which asked, “How often do agency representatives attend school IEP transition meetings for youth with ASD at a Georgetown High School?” However, the public presentations did support what was learned at the interviews, i.e., DARS has one representative that is assigned to attend the ARD transition meetings of disabled students in a Georgetown high school. Overall, attending the public presentations did not provide any evidence to support that DARS has RCs that have specialized caseloads or receive specialized training to work with individuals with ASD. There was not enough evidence to support that the DARS representative for GISD can actually attend the students’ ARD transition meetings. In order to better serve this population, there should be at least another DARS representative for GISD that has received specialized training on how to best work with individuals with ASD.
Documents were also analyzed to assess DARS’ policies on RCs having specialized caseloads and attending specialized training to work with individuals with ASD. Also, documents were reviewed to determine the RC’s requirements for attending the ARD transition meetings. The following documents were reviewed: DARS’ policies and procedures, DARS’ PowerPoint presentation printout from 2/27/16, DARS’ pamphlet, A Guide for Applicants, and the DARS’ brochure, School Transition Program. RPM 7.4 specifically discusses what support DARS can provide to individuals with ASD. This policy provides a definition of what ASD is according to the DSM-V, discusses the ARD Committee and Applied Behavior Analysis (ABA) therapy, and the support and other services that DARS can provide to individuals with ASD. This policy does not indicate that DARS is required to have RCs that either have specialized caseloads or receive specialized training to work with individuals with ASD. However, RPM 7.4.5 indicates that DARS can collaborate with other professionals that can provide extra support to individuals with ASD while they are working with DARS. This policy allows RCs to collaborate with the following professionals to provide extra support to this population: “Certified Special Education Teacher, Licensed Specialist in School Psychology (LSSP), Community Rehabilitation Provider (CRP) with a verified Autism Specialization from the University of North Texas, Registered Behavior Technician, Autism Specialization Certificate from the University of North Texas through Relias Learning, and School Speech Language Pathologist” (RPM, 7.4.5). RPM 10.4, states that RCs “must work with students, parents, schools, and community partners to: provide transition services during high school and throughout the period of transitioning after high school to post-secondary services, including education, vocational training and employment; and attend Admission, Review and Dismissal (ARD) meetings, when invited.” The PowerPoint presentation print-out from 2/27/16 and the
DARS’ pamphlet, A Guide for Applicants, both fail to provide any information on the trainings that RCs receive to work with individuals with ASD. Also, these documents did not provide any information on whether RCs attend ARD transition meetings. The DARS brochure, School Transition Program, also fails to provide information on whether RCs receive specialized training on how to best work with youth with ASD. This brochure does state that DARS can “attend your Admission, Review and Dismissal (ARD) if you want us to.” Document analysis provided no evidence to support that DARS RCs have specialized caseloads or receive specialized training to work with individuals with ASD. DARS’ policies do provide evidence that DARS can collaborate with other professionals who have specialized training to work with this population. Lastly, RCs must attend the ARD transition meetings, if invited; however, there was little evidence supporting that this actually happens due to the size of the DARS regional RC’s caseload.

**Employment Services**

There are numerous employment services that DARS can offer to youth with ASD to help them gain employment. The two non-participation observations of public presentations that the researcher attended provided strong evidence to support that DARS has a plethora of employment services they can offer to youth with ASD to help them gain employment. The following documents were also analyzed to determine the employment services that DARS provides: DARS’ policies and procedures, DARS’ PowerPoint Presentation printout from 2/27/16, DARS’ pamphlet, A Guide for Applicants, and the DARS’ brochure, School Transition Program. Table 5.1 below provides the survey questions and how they were answered based on the differing sources.
Table 5.1: DARS’ Employment Services and Sources

<table>
<thead>
<tr>
<th>Question</th>
<th>Source</th>
<th>Answer</th>
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<tbody>
<tr>
<td><strong>Assessment Questions:</strong> Q. #7: Does your agency use any assessments to determine the strengths of a youth with ASD?</td>
<td>🔄 Public Presentation</td>
<td>🔄 DARS uses assessments. The assessments are free and determine the person’s strengths, interests, preferences and limitations. The speaker only mentioned neuropsychological assessments.</td>
</tr>
<tr>
<td></td>
<td>🔄 PowerPoint Preservation printout from 2/27/16</td>
<td>🔄 Advises that consumers receive assessments. Also states, “The individual must require VR services to prepare for, enter, engage in or retain gainful employment consistent with the individual’s strengths, resources, priorities, concerns, abilities, capabilities and informed choice.”</td>
</tr>
<tr>
<td>Q. #8: If Q. #7 is Yes, please list the assessments your agency uses to determine the strengths of a youth with ASD.</td>
<td>🔄 Policy: RPM 2.5</td>
<td>🔄 Says a good diagnostic interview includes information that may be used later during assessment to develop the IPE for eligible consumer, but does not say the assessments will be based on person’s strengths, interest or preferences.</td>
</tr>
<tr>
<td></td>
<td>🔄 Policy: RPM 4.4.3</td>
<td>🔄 States assessments will be used to determine eligibility and VR needs. Does not provide information that assessments are based off of the person’s strengths.</td>
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<tr>
<td>Q. #9: Does your agency use any assessments to determine the preferences of a youth with ASD?</td>
<td>🔄 Pamphlet: A Guide For Applicants</td>
<td>🔄 Does not mention assessments.</td>
</tr>
<tr>
<td>Q. #10: If Q. #9 is Yes, Please list the assessments your agency uses to determine the preferences of a youth with ASD.</td>
<td>🔄 Brochure: School Transition Program.</td>
<td>🔄 States, “DARS will need to know: what you can and can’t do; what you would like to do; and what your future plans might be.” This statement provides some evidence that assessments are based off of the consumer’s interests and preferences.</td>
</tr>
<tr>
<td>Q. #11: Does your agency use any assessments to determine the interests of a youth with ASD?</td>
<td>🔄 Supported Employment Assessment</td>
<td>🔄 Is the assessment that DARS uses to determine if a consumer will</td>
</tr>
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</table>
The assessment asks consumers questions such as: “List five activities you like; List your strengths, skills and talents; What are your current dreams and goals related to life and work; and What preferences do you have when it comes to a job?”

<table>
<thead>
<tr>
<th>Q. #13: Does your agency do employment/career planning with youth with ASD?</th>
<th>Yes, DARS does Individual Plans for Employment (IPE) for all eligible consumers. DARS has 90 days to complete the IPE after a person is determined eligible for services.</th>
<th>Discusses employment planning</th>
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<tbody>
<tr>
<td></td>
<td>Public Presentation</td>
<td>These polices discuss the IPE process in detail, including the 90-day development rule, who is a part of the process, identifying barriers to employment, identifying ways to overcome those barriers, measuring progress towards goals, and the activities the consumer will do to achieve their IPE’s goals.</td>
</tr>
<tr>
<td></td>
<td>PowerPoint Preservation printout from 2/27/16</td>
<td>Provides minimal information on the employment planning process</td>
</tr>
<tr>
<td></td>
<td>Policies: RPM 4.4.0 through RPM 4.4.7</td>
<td>Discusses employment planning, what employment planning is, and it provides a list that contains the 8 components of an IPE.</td>
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<td></td>
<td>Brochure: School Transition Program.</td>
<td></td>
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<tr>
<td></td>
<td>Pamphlet: A Guide For Applicants</td>
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<tr>
<th>Q. #14: If Q. #13 is Yes, Does your agency use Person Centered Planning (PCP) to encourage the youth with ASD to lead and/or participate in their plan for employment?</th>
<th>Did not provide any evidence indicating DARS uses PCP. DARS uses diagnostic interviews that helps lead to the development of the person’s IPE, but diagnostic interviews do not resemble PCP.</th>
<th></th>
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<tbody>
<tr>
<td></td>
<td>Public Presentations</td>
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137
<table>
<thead>
<tr>
<th>Source</th>
<th>Evidence or Policy Reference</th>
</tr>
</thead>
<tbody>
<tr>
<td>PowerPoint Preservation printout from 2/27/16</td>
<td>Did not provide any evidence indicating that DARS uses PCP. Says that employment services are “counselor directed,” which is the polar opposite of PCP.</td>
</tr>
<tr>
<td>DARS’ policy: RPM 9.10.6</td>
<td>This is the only policy the researcher could find that states, “DARS recommends that the person-centered planning process be used when collecting information for the SEA” (Supported Employment Assessment).</td>
</tr>
<tr>
<td>Brochure: School Transition Program.</td>
<td>Provides small evidence that DARS uses PCP, by stating, “You and your DARS counselor will develop a plan to meet your specific needs. To assist you with the plan, DARS will need to know: what you can and can’t do; what you would like to do; and what your future plans might be.”</td>
</tr>
<tr>
<td>Pamphlet: A Guide For Applicants</td>
<td>Provides small evidence that DARS uses PCP, by stating, “You will also be actively involved in developing your IPE.”</td>
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Q. #15: If Q. #13 is Yes, Check all individuals who are allowed to participate in the youth with ASD’s employment plan: A) The youth with ASD, B) parents/guardians, C) School personnel, D) Other supportive adults

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<thead>
<tr>
<th>Source</th>
<th>Evidence or Policy Reference</th>
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<tbody>
<tr>
<td>PowerPoint Preservation printout from 2/27/16</td>
<td>Presentations did not mention who could participate in the youth with ASD’s employment plan.</td>
</tr>
<tr>
<td>Policy: RPM 4.4.1</td>
<td>Only mentions the consumer as a person who can participate in their employment plan.</td>
</tr>
<tr>
<td>Brochure: School Transition Program.</td>
<td>States, “The consumer may get help to develop their IPE from friends, family members, private counselors, disability advocacy organizations, or other interested in the consumer’s progress toward work.”</td>
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<tr>
<td></td>
<td>States that DARS counselor and consumer develop the IPE. Does not mention anyone else.</td>
</tr>
<tr>
<td>Pamphlet: A Guide For Applicants</td>
<td>Says “your DARS DRS Counselor will help you complete your IPE.” Also states, you have the option of working: “with your DRS counselor, qualified vocational rehabilitation counselor not employed by DARS and with another resource outside of DARS.”</td>
</tr>
<tr>
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<tr>
<td>Q. #22: Does your agency offer pre-employment services to youth with ASD?</td>
<td>Yes, the speaker discussed all pre-employment services that were identified on the PowerPoint presentation, which includes counseling and guidance, training to learn job skills and appropriate work behaviors, postsecondary education and training, treatment and or therapy to lessen or remove the disability as related to employment, personal social adjustment training, work readiness services, vocational evaluations, work experience services, job placement and teaching self-advocacy. These policies provide numerous pre-employment services that were mentioned in the public presentations. Also, they provide additional details and services, such as interview trainings, resume writing, applying for jobs and completing job applications, strategies for addressing employment gaps and barriers, signing up with the Texas Workforce, providing job leads, assisting with job clubs, pre-employment testing, and salary and position negotiation, among others.</td>
</tr>
<tr>
<td>Q. # 23: If Q. #22 is Yes, List all pre-employment services your agency offers to youth with ASD.</td>
<td>Mentions the following services: vocational testing, counseling, guidance in preparation for working within the community after high school graduation, job placement, internships, job readiness training, and vocational training.</td>
</tr>
</tbody>
</table>
Table 5.1 above provides the data that was collected on the employment services that DARS offers. The table shows that there was evidence to support that DARS uses assessments to determine the youth with ASD’s strengths, interests, and preferences. This was mostly proven by examining the DARS’ Supported Employment Assessment (SEA), which asks questions related
to the consumer’s strengths, interests, and preferences. This assessment also asks consumers about their limitations, fears, and other barriers to employment. Documents provided strong evidence to support that DARS does employment/career planning through the process of developing the consumer’s Individual Plan for Employment (IPE). However, even though RCs complete IPEs, there was little to no evidence indicating that DARS uses PCP to help the youth with ASD lead and/or participate in the development of their IPE. The fact that the PowerPoint Presentation from 2/27/16 states, that employment services are “counselor directed” and not consumer directed, indicates that DARS does not use PCP. DARS has one policy that encourages staff to use PCP when administering the Supported Employment Assessment (SEA); however, the staff are not required to use PCP for this assessment. There was some evidence to support that DARS allows family members and other supportive adults to participate in the youth with ASD’s IPE, if the youth invites them. There was strong evidence to support that DARS offers a wide range of employment services to youth with ASD. There was some evidence to support that DARS may provide vocational training to youth with ASD, but it appears that DARS will pay other institutions such as colleges and technical schools for the youth to receive such trainings. Overall, a review of the documents indicated that DARS provides many of the employment services discussed in the literature. However, there was little evidence indicating that DARS uses PCP to help the youth with ASD lead and/or participate in their IPE.

Rehabilitation Technology Services

Rehabilitative technology services have been found to help youth with ASD gain and/or maintain employment. To determine whether DARS uses any rehabilitative technology services, the researcher took notes during the two public presentations and analyzed several documents.
Table 5.2 below provides the survey questions and how the researcher answered the questions based off of the listed source.

**Table 5.2: DARS’ Rehabilitative Technology Services and Source**

<table>
<thead>
<tr>
<th>Survey Question</th>
<th>Source</th>
<th>Answer</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q. #26. Does your agency use technology to share innovative ideas that have helped individuals with ASD gain employment?</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16 ◆ Policies: RPM 11.1.1 through RPM 11.1.6 ◆ Brochure: School Transition Program ◆ Pamphlet: A Guide For Applicants</td>
<td>◆ Neither the public presentations nor the documents reviewed provided any information to support that DARS uses technology to share innovative ideas that have helped individuals with ASD gain employment.</td>
</tr>
<tr>
<td>Q. #27: Does your agency use video modeling to train youth with ASD?</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16 ◆ Policies: RPM 11.1.1 through RPM 11.1.6 ◆ Brochure: School Transition Program ◆ Pamphlet: A Guide For Applicants</td>
<td>◆ Video modeling was not mentioned at the public presentations, nor was it mentioned in any of the documents.</td>
</tr>
<tr>
<td>Q. #28: If Q. #27 is Yes, List the ways your agency uses video modeling to help train youth with ASD.</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16 ◆ Policies: RPM 11.1.1 through RPM 11.1.6 ◆ Brochure: School Transition Program ◆ Pamphlet: A Guide For Applicants</td>
<td></td>
</tr>
<tr>
<td>Q. #29: Does your agency use Covert Audio Coaching to assist youth with ASD on the job?</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16 ◆ Policies: RPM 11.1.1 through RPM 11.1.6 ◆ Brochure: School Transition Program ◆ Pamphlet: A Guide For Applicants</td>
<td>◆ Covert Audio Coaching was not mentioned at the public presentations, nor was it mentioned in any of the documents.</td>
</tr>
<tr>
<td>Q. #30: If Q. #29 is Yes, List the ways your agency has used Covert Audio Coaching to assist youth with ASD on the job. (Open/Ended) (Q.#30)</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16 ◆ Policies: RPM 11.1.1 through RPM 11.1.6 ◆ Brochure: School Transition Program ◆ Pamphlet: A Guide For Applicants</td>
<td></td>
</tr>
<tr>
<td>Q. #32: Does your agency use Rehabilitative Technology to help youth with ASD gain and or maintain employment?</td>
<td>◆ Public Presentations ◆ PowerPoint Preservation printout from 2/27/16</td>
<td>◆ Yes, PowerPoint Presentation printout states that DARS uses, “Assistive technology to improve job functioning.” The speaker provided the following examples of such technology DARS uses: hearing aids and computer applications.</td>
</tr>
<tr>
<td>Q. #33: If Q. #32 is Yes, List any rehabilitative technology</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
that your agency uses to assist individuals with ASD gain and/or maintain employment.

◆ Policies: RPM 11.1.1 through RPM 11.1.6

◆ Brochure: School Transition Program

◆ Pamphlet: A Guide For Applicants

◆ These policies define what Rehabilitation Technology Devices and Services are. States that “You may use rehabilitation technology services at any time during the case, as necessary, to achieve the consumer’s planned goal.” The consumer may have to pay for some of the costs associated with the technology.

◆ Says the consumer may receive services such as assistive devices to help them reach their vocational goals. Does not provide any examples.

◆ Mentions that hearing aids are available. Does not provide any other examples of rehabilitative technology services that DARS uses.

Table 5.2 above provides the evidence that was collected on the rehabilitative technology services that DARS offers. As shown in the table, there were only two examples of rehabilitative technology (i.e., hearing aids and computer applications) that the researcher was able to identify. There was no evidence to support that DARS uses video modeling or covert audio coaching. Nor was there any evidence to support that DARS uses technology to share innovative ideas that have helped individuals with ASD gain employment.

Supported Employment

Supported employment has been identified as one of the best practices to help youth with ASD gain and maintain employment. To determine if DARS uses supported employment to help this population, the researcher attended two non-participation observations of public presentations and analyzed the following documents: DARS’ policies and procedures, DARS’
PowerPoint Presentation from 2/27/16, DARS’ pamphlet, A Guide for Applicants, and DARS’ brochure, School Transition Program. All sources provided evidence that DARS has a supported employment program. Both of the public presentations discussed supported employment through the use of a Job Coach. One speaker said Job Coaches can help consumers gain employment, train them on the job, provide “hand on hand” training, provide any necessary accommodations to support the consumer on the job, and eventually the Job Coach “fades out,” as the consumer becomes more adept in their position. The PowerPoint Presentation printout provided an outline for the supported employment model that DARS uses. The printout read that a Job Coach is paid hourly and the hours worked are limited by DARS’ policies. DARS’ polices, RPM 9.10.1 through RPM 9.10.6, discuss DARS’ supported employment services in detail. This includes the criteria for determining if consumers are eligible for such services (i.e., they must have 3 or more limited functional capacities, and require extended services to maintain successful employment), the roles and responsibilities of the supported employment specialist, assessment and referral process for supported employment, DARS’ procedures and standards for consumers to receive supported employment, some of the services that DARS offers through supported employment, and benchmarks that are established to track the consumer’s progress while they participate in supported employment. DARS’ policies, RPM 9.11.1 through RPM 9.11.2, discuss the roles of a Job Coach, under what conditions DARS will pay for a Job Coach, certain outcomes that are required in order to pay for a Job Coach, qualifications of a traditional Job Coach, and the process of working with a Job Coach that is considered a non-traditional provider. The DARS’ brochure, School Transition Program, mentions “job placement,” which is a function of a supported employment program. The DARS’ pamphlet, A Guide for Applicants, mentions “on-the-job supports and help finding a job,” which are two roles of a Job Coach. A
review of all the data collected provides strong evidence to support that DARS has a supported employment program, which includes the use of a Job Coach.

**Independent Living Skills**

Independent living skills (ILS) are vital for youth with ASD to learn, so they can reach their full potential. ILS were not mentioned in the literature as ways to help a youth with ASD gain employment; however, these services are listed as a best practice for high schools to teach youth with ASD and the researcher learned that DARS also provides such transitional services. Some of the ILS that were discussed in the public presentations and DARS’ PowerPoint Presentation printout from 2/27/16, include money management and public transportation training. Chapter 14 of DARS’ RPM provides in-depth information on the entire process for consumers to receive ILS through DARS. This includes developing goals related to the consumers living arrangements, social and community engagements, transportation, self-advocacy, and education related to independent living, among other things. ILS are vital for the success of youth with ASD. There was strong evidence to support that DARS provides ILS to youth with ASD.

**Interagency Collaboration**

The last element for the state level process is interagency collaboration. To determine if DARS collaborates with other agencies to provide transitional programs to youth with ASD, the researcher attended two non-participation observations of public presentations and analyzed the following documents: DARS’ policies and procedures, DARS’ PowerPoint Presentation printout from 2/27/16, DARS’ pamphlet, A Guide for Applicants, and DARS’ brochure, School Transition Planning. By attending the public presentations, the researcher learned that DARS collaborates with the local high schools. This includes attending ARD transition meetings, if
invited; collaborating with the school, if the school district cannot provide a service that a student needs; and RCs will go to the student’s high schools to help the youth with ASD apply for DARS. The presentation printout advises that the youth’s school can facilitate the process for a student to apply for DARS. The DARS’ brochure, School Transition Program, states, “DARS has developed a partnership with your school. This allows DARS to attend your Admissions, Review and Dismissal (ARD), if you want us to. DARS works with the school to help you make a smooth transition after school ends.” The pamphlet, A Guide for Applicants, did not provide any evidence that DARS collaborates with other agencies to help youth with ASD obtain employment. DARS’ policies and procedures provide the best evidence that DARS collaborates with other agencies to help youth with ASD gain employment. DARS policies, RPM 9.12.1 through 9.12.2, advise that DARS and Employment Networks (ENs) “partner to provide a seamless system of service delivery that supports a consumer’s efforts toward achieving and maintaining self-supported employment.” These policies also say that DARS can provide vocational rehabilitative services, including Job Placement or Supported Employment, and after DARS closes the case, an EN can provide ongoing support and services to ensure the consumer maintains employment. These policies encourage Community Rehabilitation Programs (CRPs) to become ENs, and under certain circumstances “the CRP-EN may be eligible to receive up to two advancement payments when it provides job placement or supported employment services as part of the VR case; is assigned the Ticket and provides ongoing support services after VR case closure; and provides services after VR case closure that help the consumer to advance in employment and reach the Substantial Gainful Activity (SGA) level.” These policies indicate that DARS collaborates with community based organization while a consumer is receiving services from DARS. They also indicate that DARS will provide financial resources to the
agencies once DARS closes the consumer’s case. RMP 9.12.3 is the policy that discusses how ENS get paid for the services they provide to the DARS consumers. DARS’ policies, 12.2.1 through 12.2.4, discuss the roles of the DARS Business Relations Coordinators (BRCs), which includes networking and marketing activities, conducting business contact meetings and disability awareness presentations, presenting and interacting with businesses at symposium and expositions, coordinating, facilitating and participating in job, career, and hiring fairs, and collaborating with other agency stakeholders, among many other duties. These policies indicate that DARS has embedded training programs. RPM 12.2.3 discusses regional Outreach Service Coordinator (OSC) teams that have the primary task of developing business partnerships with local and regional businesses to assist consumers in obtaining and maintaining employment. OSC teams are another example of an embedded training program. RMP 12.2.4 discusses the Business Tracking Tool that DARS uses. The Business Tracking Tool serves two purposes: “staff members have an opportunity to research the person and the business whose contact information has been obtained. In addition, staff members with access to the business tracking tool can stay informed about the names of the businesses and the contacts within the business with whom a face-to-face contact is being planned so that duplicate contacts can be avoided.” RPM 8.7 discusses Project SEARCH, which says the program “develops partnerships between employers, school districts, VR agencies and other disability originations to help consumers gain work internships at a community employer.” Then, the consumer can either gain employment at the community employer or another employer in the community. As previously discussed, DARS can collaborate with the following professionals to provide extra support to individuals with ASD: “Certified Special Education Teacher, Licensed Specialist in School Psychology (LSSP), Community Rehabilitation Provider (CRP) with a verified Autism Specialization from
the University of North Texas, Registered Behavior Technician, Autism Specialization Certificate from the University of North Texas through Relias Learning, and School Speech Language Pathologist” (RPM, 7.4.5). Overall, a review of DARS’ policies and procedures provided strong evidence to support that DARS collaborates with other agencies to help consumers gain and maintain employment. Also, there was strong evidence indicating that DARS has embedded marketing programs through the use of DARS Business Relations Coordinators (BRCs) and Outreach Service Coordinator (OSC) teams. Also, there was strong evidence to support that DARS has a database system to track employers that they have developed relationships with. There was evidence to support that DARS has contracts with ENs. However, there was no evidence to support that DARS does any cross-agency professional development with any of the agencies they collaborate with.

**Community Level Process**

At the community level process, a survey was sent to all community based organizations that said their agency provides transitional programs to youth with ASD who reside in Williamson County. The researcher located 16 community based organizations that advised they provide transitional programs to individuals who reside in Williamson County. Out of the 16 agencies that the survey was sent to, 12 agencies participated in the survey and only 8 completed the entire survey. Table 5.3 below provides descriptive statistics of the sample study.

**Table 5.3: Survey Sample and participation rate**

<table>
<thead>
<tr>
<th>Agency Type</th>
<th>Sample Size (n=20)</th>
<th>Responses (n=12)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>DARS</td>
<td>Sent to 4 representatives</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Community-Based-Organization</td>
<td>Sent to 16 agencies</td>
<td>9</td>
<td>75%</td>
</tr>
</tbody>
</table>
As indicated in the table above, nine agencies that started the survey identified their agency as a community based organization. Three agencies reported other and only two of the three provided a description of what “other” entailed. One respondent identified their agency as a center for independent living, nonprofit, federally funded program providing services to all people with disabilities of any age. Another respondent identified their agency as a technical school. Both of these organizations are in the community and provide transitional programs.

**Eligibility**

Determining eligibility for services is a requirement for DARS; however, it may not be a requirement for some community based organizations. Since some of the community based organizations answered this question, this researcher examined the data. Survey question 3 was asked to determine if the agencies provide transitional programs to youth with ASD. Table 5.4 below provides the responses to question three.

**Table 5.4: Transitional Services to Autistic Youth**

<table>
<thead>
<tr>
<th>Answer</th>
<th>Responses (n=11)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Yes</td>
<td>7</td>
<td>64%</td>
</tr>
<tr>
<td>Maybe</td>
<td>2</td>
<td>18%</td>
</tr>
<tr>
<td>No</td>
<td>2</td>
<td>18%</td>
</tr>
</tbody>
</table>
As illustrated in table 5.4 above, 64% of the agencies that answered question 3 reported that their agency provides transitional services to youth with ASD. While two agencies (18%) answered “maybe.” The researcher reviewed the two surveys that indicated they do not provide any transitional services to this population and learned that they both offer transitional services. Therefore, since they provide transitional services and agencies cannot discriminate on the basis of a person’s disability, their surveys were not omitted from the study. If survey respondents indicated that they do, or maybe provide transitional services to youth with ASD, a follow-up question was asked to determine at what age their agency starts providing transitional services. The responses to this question are provided in table 5.5 below.

Table 5.5: Age that the agencies start providing transitional services

<table>
<thead>
<tr>
<th>Answer</th>
<th>Responses (n=9)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Younger than 16</td>
<td>4</td>
<td>44%</td>
</tr>
<tr>
<td>16</td>
<td>1</td>
<td>11%</td>
</tr>
<tr>
<td>17</td>
<td>1</td>
<td>11%</td>
</tr>
<tr>
<td>18 or older</td>
<td>3</td>
<td>33%</td>
</tr>
</tbody>
</table>

Table 5.5 above shows that 44% of the agencies start providing transitional services to youth with ASD prior to the youth’s 16th birthday. One agency reported they start providing such services when the youth turns 16, while another agency reported providing services at age 17. Three out of eight agencies (33%) reported that the youth had to be 18 or older before they will start providing transitional services to this population. A follow-up question asked respondents if their agency served youth with ASD who reside in Georgetown TX. Six out of
nine agencies (67%) responded that they do; while two agencies (22%) answered maybe; and one agency answered “no.” The researcher examined the survey that answered “no” and learned that it is a technical training school that is located within Williamson County. Since technical schools cannot discriminate on the basis of a person’s disability, there is a possibility that this agency provides technical training to a youth with ASD residing in Georgetown and the survey respondent should have answered the question “maybe” instead of “no.”

If the agency advised that they do, or may provide transitional services to youth with ASD in Georgetown, a follow-up question was asked to determine if the agency has a timeframe to determine eligibility. Answers to this question are provided in table 5.6 below.

Table 5.6: Timeline to determine eligibility for services

<table>
<thead>
<tr>
<th>Answer</th>
<th>Responses (n=10)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>2 weeks from application</td>
<td>4</td>
<td>40%</td>
</tr>
<tr>
<td>1 month from application</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Greater than 1 month, but less than 3 months</td>
<td>1</td>
<td>10%</td>
</tr>
<tr>
<td>Longer than 3 months</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>There is no such policy</td>
<td>5</td>
<td>50%</td>
</tr>
</tbody>
</table>

A total of 10 agencies answered survey question # 5. Half of the respondents (50%) advised that their agency has no policy to determine if a person is eligible for services. Depending on the type of agency, there may not be an eligibility policy, as the agency may be required to provide some services to every individual who walks through the door. The majority of agencies that do have an eligibility policy are required to determine eligibility within 2 weeks.
from application. One agency said they have greater than 1 month, but less than 3 months to
determine eligibility, which is decent. Overall, half of the agencies have policies in place to
determine if a person is eligible for services through their agency. Also, the agencies that do
have timeframes to determine eligibility for services have efficient policies in place.

Case Manager

Community based organizations are more likely to use the title Case Manager (CM) over
Rehabilitation Counselors when referring to the professionals that will work with the agency’s
clients. Survey questions sixteen through twenty-one were asked to gather data on the types of
CMs these agencies have and their roles. Table 5.7 below provides the questions, respondents’
answers to the questions, and percentage rates for the data.

Table 5.7: Survey Questions Regarding Case Managers

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
</table>
| 16. Does your agency have specialized Rehabilitation Counselors or Case Managers to work with individuals with ASD? | n=11
Yes: 5
No: 6 | Yes: 45%
No: 55% |
| 17. If Q. #16 is Yes, How many specialized Rehabilitation Counselors or Case Managers (CM) does your agency have to work with youth with ASD? | Answer | Response
n=5 | Percentage
1 CM | 0
2 CMs | 2
3 CMs | 1
>Than 3 | 2 | 0%
40%
20%
40%
| 18. Does your Rehabilitation Counselors or Case Managers receive special training on how to best work with individuals with ASD? | (n=9)
Yes: 4
No: 5 | Yes: 44%
No: 56% |
| 19. How often do Rehabilitation Counselors or agency representatives get | Answer | Response
n=7 | Percentages |
invited to school IEP/Transition meetings at a Georgetown high school for youth with ASD?

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Count</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>6</td>
<td>86%</td>
</tr>
<tr>
<td>Daily</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Weekly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Monthly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Quarterly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Every 6 months</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Yearly</td>
<td>1</td>
<td>14%</td>
</tr>
</tbody>
</table>

20. How often do agency representatives attend school IEP Transition meetings for youth with ASD at a Georgetown High School?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Response</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Never</td>
<td>6</td>
<td>86%</td>
</tr>
<tr>
<td>Daily</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Weekly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Monthly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Quarterly</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Every 6 months</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Yearly</td>
<td>1</td>
<td>14%</td>
</tr>
</tbody>
</table>

21. Does your agency have a representative that is assigned to attend IEP Transition Meetings for youth with ASD at a Georgetown high school?

<table>
<thead>
<tr>
<th>n=8</th>
<th>Yes: 1</th>
<th>Yes: 13%</th>
</tr>
</thead>
<tbody>
<tr>
<td>No: 7</td>
<td></td>
<td>No: 88%</td>
</tr>
</tbody>
</table>

Table 5.7 above provides descriptive statistics on whether the community based organizations have CMs that have specialized caseloads to work with youth with ASD. Eleven agencies answered question 16. Nearly half of the agencies (45%) reported that they do have specialized CMs to work with youth with ASD. Question 17 was a follow-up question to determine how many specialized CMs these agencies have. Out of the 5 agencies that reported
having specialized CMs to work with youth with ASD, two agencies have two specialized CMs, one agency has three specialized CMs, and 2 agencies have more than 3 specialized CMs. It is wonderful that these five agencies have identified the need to have specialized CMs to work with this population. Nine agencies answered question 18 on whether or not CMs receive specialized training on how to best work with individuals with ASD. As shown in table 5.7, 44% of the agencies reported that their CMs do receive specialized training to work with this population. Since 7 agencies indicated that they serve this population and 2 agencies said they might serve this population, all 9 of these agencies’ CMs should receive training on how to serve this population. Questions 19 and 20 were asked to determine whether the agency gets invited to ARD meetings at a Georgetown high school and if agency representatives attend these meetings. As indicated in table 5.7, six out of seven agencies (86%) reported in question 19 that their agency never gets invited to a Georgetown high school ARD transition meeting for youth with ASD. Only 1 agency said they do get invited to ARD transition meetings on a yearly basis. Respondents answered question 20 the exact same way they answered question 19. Question 21 asked if the agencies “have a representative that is assigned to attend the ARD transition meetings for youth with ASD at a Georgetown high school.” Only one out of eight agencies (13%) that answered this question said “Yes.” The answers provided by respondents in questions 19 through 21 are worrisome. The data suggests that outside agencies rarely getting invited to a youth with ASD transition meeting. If a youth with ASD has a CM at one of these agencies, then one would hope that the CM is attending the youth’s ARD transition meetings.

**Employment Services**

Assessments are the initial step to do before determining the appropriate transitional programs for a youth with ASD. Questions 7 through 12 asked agency respondents if they use
any assessments to determine the youth with ASD’s strengths, interests, and preferences. If the respondent answered “Yes,” then follow-up questions asked respondents to list the assessments their agency use. Table 5.8 below provides the respondents answers to questions 7 through 12 on the survey.

**Table 5.8: Assessments that Agencies utilize**

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>7. Does your agency use any assessments to determine the strengths of a youth with Autism Spectrum Disorder (ASD)?</td>
<td>n=10</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes: 6</td>
<td>Yes = 60%</td>
</tr>
<tr>
<td></td>
<td>No: 4</td>
<td>No = 40%</td>
</tr>
</tbody>
</table>
| 8. If Q. #7 is “Yes,” please list the assessments your agency uses to determine the strengths of a youth with ASD: | “Vocational Assessments such as the COPS System, Quality of Life Indicator, AIR Self-Determination Scale, Barkley Deficits in Executive Functioning Scale.”
|                                                                            | “We follow the DARS standards for providers manual. If a youth with ASD is referred for Supported Employment Services then a Supported Employment Assessment is used. Otherwise we do not have specific assessments used for youth with ASD.”
|                                                                            | “Vocational Evaluations”                                                                                                                  | N/A               |
|                                                                            | “On-line assessments that they can access from home or our center.”                                                                      |                   |
| 9. Does your agency use any assessments to determine the preferences of a youth with ASD? | n=11                                                                                                                                       |                   |
|                                                                            | Yes: 8                                                                                                                                     | Yes: 73%          |
|                                                                            | No: 3                                                                                                                                     | No: 27%           |
| 10. If Q. #9 is “Yes,” Please list the assessments your agency uses to determine the preferences of a youth with ASD: | “COPS System and QOLI”
|                                                                            | “Interview”                                                                                                                               | N/A               |
|                                                                            | “The personal interaction and observation by our job supervisors in addition to input from parents”
|                                                                            | “We follow the DARS standards for providers manual. If a youth with ASD is referred for Supported Employment Services then a Supported Employment Assessment is used. Otherwise, we do not have specific assessments used for youth with ASD.” |                   |
11. Does your agency use any assessments to determine the interests of a youth with ASD?

<table>
<thead>
<tr>
<th></th>
<th>Yes: 9</th>
<th>No: 2</th>
<th>Yes: 82%</th>
<th>No: 18%</th>
</tr>
</thead>
</table>

12. If Q. #11 is “Yes,” Please list the assessments your agency uses to determine the interests of a youth with ASD:

- “COPS System and QOLI”
- “Interview”
- “The personal interaction and observation by our job supervisors in addition to input from parents.”
- “We follow the DARS standards for providers manual. If a youth with ASD is referred for Supported Employment Services then a Supported Employment Assessment is used. Otherwise we do not have specific assessments used for youth with ASD.”
- “A variety of assessment procedures during our new client intake process (depending on the specific services the client is interested in receiving).”
- “On-line assessments that they can access from home or our center.”

Table 5.8 above, provides descriptive statistics regarding whether or not agencies provide assessments based on the individual’s strengths, interests, and preferences. The table also provides the types of assessments the agencies reported using. As shown, 60% of the respondents reported that their agency uses assessments to determine the strengths of a youth with ASD. A larger percentage of agencies indicated that they use assessments to determine the preferences and interests of a youth with ASD, 73% and 82% respectively. Overall, the data collected indicates that the majority of agencies use assessments to determine the youth with ASD’s strengths, preferences, and interests. These assessments are important, as they will help create the youth with ASD’s employment plan and identify the trainings that will help them reach their employment and other life goals.
Survey question 13 asked respondents if their agency does any “employment/career planning with a youth with ASD.” If the respondent reported that their agency does employment/career planning with the youth, then question 14 was a follow-up question to determine whether the agency uses person centered planning (PCP) to encourage the youth with ASD to participate in and/or lead the development of their employment plan. Chart 5.1 below reflects the percentage of agencies that reported doing employment planning with youth with ASD. Chart 5.2 below shows the percentage of agencies that use PCP while developing an employment plan with the youth with ASD.

**Chart 5.1: Agencies & Employment Plans Chart 5.2: Agencies and PCP**

A total of ten agency representatives answered question 13 on the survey. As shown in Chart 5.1 above, 50% of the agencies do employment planning with youth with ASD. The five agencies that reported doing employment planning also answered question 14. As indicated in Chart 5.2 above, four out of the five agencies (80%) advised that they do use PCP, while only 1 agency (20%) said they do not use PCP.
Survey question 15, was asked to identify the individuals who are allowed to participate in the youth with ASD’s employment plan. Only the five agencies that reported doing employment plans were allowed to answer this question. Table 5.9 below provides the respondents’ answers and related percentages to the question.

**Table 5.9: Individuals who can participate in the youth with ASD employment plan.**

<table>
<thead>
<tr>
<th>Answers</th>
<th>Responses (n=5)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>The youth with ASD</td>
<td>4</td>
<td>80%</td>
</tr>
<tr>
<td>Parents/Guardians</td>
<td>4</td>
<td>80%</td>
</tr>
<tr>
<td>School Personnel</td>
<td>5</td>
<td>100%</td>
</tr>
<tr>
<td>Other Supportive Adults</td>
<td>4</td>
<td>80%</td>
</tr>
</tbody>
</table>

As shown in table 5.9 above, 80% of the agencies allow the youth with ASD, parents or guardians, and other supportive adults to participate in the employment planning process. All five agencies (100%) allow school personnel to participate in the employment planning process. The fact that there is an agency that does not allow the youth with ASD to participate in their employment plan is disturbing. The youth with ASD should be the primary person providing input into their employment plan, while their parents should be the secondary source of information. Overall, the data collected indicates that the majority of agencies allow the youth and all other supportive adults in their life to participate in the employment planning process.

Survey questions 22 and 23 were asked to determine whether or not the community based agencies provide pre-employment services and if so, what types of services. Table 5.10 below
provides the questions, respondents’ answers to the questions, and the percentage of agencies that provide such services.

Table 5.10: Pre-Employment Services that Community Agencies Provide

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
</table>
| 22. Does your agency offer pre-employment services to youth with ASD (e.g., mock interviews, help with resumes, job placement and job readiness classes)? | n=10  
    Yes: 7  
    No: 3                                                                 | Yes: 70%  
    No: 30%                                                               |              |
| 23. If Q.#22 is Yes, List all pre-employment services your agency offers to youth with ASD | • “All of the previous mentioned services include resume development, interview practice, job searching, functional skills training, social skills training.”  
    • “Focus 2 career software Student Success courses w/ career component.”  
    • “Interviewing, development of skills and abilities, advocacy, job search, interest inventory, job skills as  
      technology, communication, relationships.”  
    • “We offer a variety of Job Readiness training to all of our clients. This is not limited to the following:  
      Resumes, mock interviews, communication, time management, social skills, attitude and dependability.”  
    • “Employment services, person center planning, supported employment, short term case management  
      vocational evaluations.”  
    • Job search techniques, resume writing and cover letters, salary negotiation.” | N/A          |

As indicated above, 70% of the agencies advised that their agency do provide some type of pre-employment service to youth with ASD. Due to the needs of the youth with ASD, some community based organizations may not be able to provide all of the transitional services that a youth with ASD needs, but they may collaborate with other organizations to provide services that their agency does not specialize in.
Specialized Vocational Training

Community based organizations can sometimes provide specialized vocational trainings that neither DARS nor school districts can. Survey questions 37 and 38 were asked to determine if any of the community based organizations provide regular and/or specialized trainings to this population. Table 5.11 below provides the respondents’ answers and related percentage rates.

Table 5.11: Vocational Training Programs and Specialized Programs at Agencies

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses (n=8)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>37. Does your agency offer any vocational training to youth with ASD?</td>
<td>Yes: 2</td>
<td>Yes: 25%</td>
</tr>
<tr>
<td></td>
<td>No: 6</td>
<td>No: 75%</td>
</tr>
<tr>
<td>38. If Q. # 37 is Yes, list all vocational training fields that your agency offers to youth with ASD and indicate if the training is a specialized vocational program that has proven to be successful at assisting youth with ASD gain employment (e.g., visual effects for movie production).</td>
<td>• “CTE certificate/degree programs- not specialized vocational programs.”</td>
<td>N/A</td>
</tr>
</tbody>
</table>

As indicated in the table above, there are only two agencies that provide vocational training programs to youth with ASD. Neither of these agencies indicated that they provide a specialized vocational program for youth with ASD. Since there was such a low response rate to the survey, some agencies that provide vocational trainings and/or specialized vocational trainings may not have completed the survey.

Rehabilitation Technology

Rehabilitative technology can significantly help a youth with ASD gain and maintain employment. Survey questions 26 through 33 (except question 31), were asked to identify the types of technology that agencies use to help youth with ASD gain and/or maintain employment.
Table 5.12 below provides the survey questions, the respondents' answers to the questions, and related percentages.

### Table 5.12: Rehabilitative Technologies that Community Agencies use

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>26. Does your agency use technology to share innovative ideas that have helped individuals with ASD gain employment?</td>
<td>n=10</td>
<td>Yes: 30% No: 70%</td>
</tr>
<tr>
<td></td>
<td>Yes: 3</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No: 7</td>
<td></td>
</tr>
<tr>
<td>27. Does your agency use video modeling to train youth with ASD?</td>
<td>n=10</td>
<td>Yes: 40% No: 60%</td>
</tr>
<tr>
<td></td>
<td>Yes: 4</td>
<td></td>
</tr>
<tr>
<td></td>
<td>No: 6</td>
<td></td>
</tr>
</tbody>
</table>
| 28. If Q. #27 is Yes, list the ways your agency uses video modeling to help train youth with ASD. | • “We currently use it for self-modeling to teach social and vocational skills.”
• “Transition coordinator will demonstrate through the use of video interviewing styles, proper language and appropriate dress.”
• “In interview prep.” | N/A                             |
| 29. Does your agency use Covert Audio Coaching to assist youth with ASD on the job? | n=9                              | Yes: 0% No: 100%         |
|                                                                           | Yes: 0                           |                           |
|                                                                           | No: 9                            |                           |
| 30. If Q. #29 is Yes, list the ways your agency has used Covert Audio Coaching to assist youth with ASD on the job. | Since all respondents answered “No” on question 29, none of the respondents viewed this question. | N/A                             |
| 32. Does your agency use Rehabilitative Technology to help youth with ASD gain and/or maintain employment? | n= 11                            | Yes: 27% No: 73%         |
|                                                                           | Yes: 3                           |                           |
|                                                                           | No: 8                            |                           |
| 33. If Q. #32 is Yes, list any rehabilitative technology that your agency uses to assist individuals with ASD gain and/or maintain employment. | • “This is a case by case basis for individuals that need accommodations in the workplace. We reach out to their DARS VRC to coordinate the set-up of technology in the workplace, if necessary.”
• “It depends on the client.” | N/A                             |
As indicated in Table 5.12 above, a small percentage of community agencies provide some type of technology that will help the youth with ASD gain and/or maintain employment. Only 30% of the agencies use technology to share innovative ideas that have helped youth with ASD gain employment. 40% of the agencies reported using video modeling; while none of the agencies use covert audio coaching. Video modeling was found to be a very effective tool to teach youth with ASD various things, such as interview skills and purchasing items at a grocery store. Covert audio coaching was found to be an effective way to train a youth with ASD on the job, if the youth is not hyper-sensitive to audio stimuli. Only 27% of the agencies reported using some type of rehabilitative technology to help youth with ASD gain and/or maintain employment. The agencies that reported using rehabilitation technology, indicated that such technology is used on a case by case basis. One of the agencies indicated that they do not provide such technologies, but they do collaborate with DARS to provide the equipment.

**Supported Employment**

Supported employment is one of the best ways community based agencies can help a youth with ASD gain and maintain employment. Survey questions 34 and 35 were designed to determine how many community agencies provide supported employment and Job Coaches. Survey question 36 was a follow-up question for the agencies that indicated they provide supported employment to allow them to provide additional details about their supported employment program. Table 5.13 below provides the supported employment questions, respondents’ answers to the questions and related percentages.
Table 5.13: Agencies and Supported Employment Programs

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>34. Does your agency offer supported employment to individuals with ASD?</td>
<td>n=9</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes: 4</td>
<td>Yes: 44%</td>
</tr>
<tr>
<td></td>
<td>No: 5</td>
<td>No: 56%</td>
</tr>
<tr>
<td>35. Does your agency have Job Coaches or Employment Specialist to assist youth with ASD gain and/or maintain employment?</td>
<td>n=9</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Yes: 4</td>
<td>Yes: 44%</td>
</tr>
<tr>
<td></td>
<td>No: 5</td>
<td>No: 56%</td>
</tr>
</tbody>
</table>
| 36. If Q. #34 is Yes, list all services that are provided through your supported employment program | • “Full SE process from assessment through closure and any long term support needs.”
                                                                                   | • “We are a vocational day program for post high school adults with special needs. They engage in numerous enterprises within our program, but we are not training them for outside employment.”
                                                                                   | • “Evaluation, pre-employment training, and assistance finding work and job coaching.” | N/A |

As show in table 5.13 above, 44% of the agencies provide supported employment and Job Coaches. Since this can be an intensive, time consuming, and costly program, 44% is actually a decent percentage. However, since many youths with ASD will need this service to gain employment, more community agencies should provide such services.

**Independent Living Skills**

Independent living skills (ILS) are a vital part of the transition process for youth with ASD. ILS were listed for the high school level process as a best practice transitional program for youth with ASD. Some community based organizations also provide ILS to this population. Questions 39 and 40 were asked to determine whether any of the community based organizations provide such trainings. Table 5.14 below provides the questions, respondents’ answers, and related percentages.
### Table 5.14: Independent Living Skills taught by Community Organizations

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses (n=8)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>39. Does your agency teach Independent Living Skills to youth with ASD?</td>
<td>Yes: 4</td>
<td>Yes: 50%</td>
</tr>
<tr>
<td></td>
<td>No: 4</td>
<td>No: 50%</td>
</tr>
</tbody>
</table>
| 40. If Q. # 38 is “Yes,” What Independent Living Skills does your agency teach youth with ASD and how are they taught? | • “Money management, home maintenance, personal hygiene, sexual education, access to transportation, and IL skills based on the client’s needs, interests and ability.”  
  • “Communication, employment readiness, healthy relationships, advocacy/self-advocacy, technology and public speaking.” | N/A                          |

As shown in table 5.14 above, 50% of the agencies that provide transitional services to youth with ASD teach them ILS. This low percentage might be due to the fact that not all agencies can provide all of the necessary services to meet the holistic needs of a youth with ASD. However, these skills are still vital to the success and happiness of a youth with ASD, thus more organizations should provide such skills training.

**One Stop Career Centers**

One stop career centers were identified in the literature as a community based organization that provides all-inclusive services to residents in the community. One stop career centers should provide occupational skills training, on-the-job training, educational programs, skill upgrading programs, and job readiness programs, among other things. One stop centers are also required to serve all populations with any disability and provide any reasonable accommodations to help the disabled person be successful on the job. Survey question 41 asked respondents if their agency was considered a one stop career center. Two out of eight agencies answered “Yes.” To determine what services the one stop centers provide, the researcher analyzed their surveys individually. One of the agencies may have answered question 41 in error.
This agency advised that their agency does not provide many of the services that one stop centers should offer, such as career planning, rehabilitative technology, or vocational training. The agency did advise that they provide supported employment with a Job Coach, but they do not complete any employment planning with the individual. It does not appear that this agency is a one stop career center. The other agency does appear to be a one-stop center. This agency indicated that they provide the following services: assessments, pre-employment services, embedded training programs, rehabilitation technologies, independent living skills, networks with community employers, and they have database that provides employment opportunities in the community. Having only one of these centers in Williamson County is acceptable due to the size of the County.

**Interagency Collaboration**

Interagency collaboration is frequently referenced as being a best practice to ensure all of the unique needs of a youth with ASD are met. Agencies have to work together in order to meet the holistic needs of a youth with ASD. Survey questions 24, 25, 31, and 44 through 47 ask questions to determine if community agencies collaborate with other agencies to better serve youth with ASD. Table 5.15 below, provides the questions, the respondents’ answers, and related percentages.

**Table 5.15: Interagency Collaboration between Agencies**

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>24. Does your agency offer Embedded Training Programs (e.g., marketing programs used to get buy-in from employers to hire disabled people)?</td>
<td>n= 10&lt;br&gt;Yes: 2&lt;br&gt;No: 8</td>
<td>Yes: 20%&lt;br&gt;No: 80%</td>
</tr>
</tbody>
</table>
25. If Q. #24 is Yes, list all Embedded Training Programs your agency offers. | “Market employers by providing job coaching, employer support, job carving, as needed.” | N/A |

31. Does your agency have a database that lists the employers who have previously employed youth with ASD? | n=10 | Yes: 2  No: 8 | Yes: 20%  No: 80% |

44. Does your agency collaborate with other agencies to provide transitional services to youth with ASD? | n=8 | Yes: 3  No: 5 | Yes: 38%  No: 63% |

45. If Q. #44 is Yes, list all agencies your organization collaborates with to provide transitional services to youth with ASD. | • “DARS, Workforce Solutions, Region Service Center, School District, Staffing Agencies.”  
• “DARS, DARS B, Workforce Commission, Goodwill Industries.”  
• “DARS” | N/A |

46. If Q. #44 is Yes, does your agency have contracts with these agencies? | n=3 | Yes: 3  No: 0 | Yes: 100%  No: 0% |

47. If Q. #44 is Yes, does your organization do any cross-agency professional development with these agencies? | n=3 | Yes: 1  No: 2 | Yes: 33%  No: 67% |

Table 5.15 above provides descriptive statistics showing how many community agencies collaborate with other agencies. Only 20% of the agencies offer Embedded Training Programs. These programs are specifically designed for agencies to network with local businesses to help disabled individuals gain employment. Only 20% of the agencies have a database system that lists the employers that have previously employed a youth with ASD. Three out of eight agencies (38%) reported that they do collaborate with other agencies to provide transitional services to youth with ASD. All three of these agencies advised that they collaborate with DARS. Two of these agencies contract with other community agencies. All three of these organizations indicated that they have contracts with the agencies they collaborate with.
However, only one out of the three agencies (33%) reported doing any cross-agency professional development with the organizations they collaborate with. Overall, the data suggested that a low percentage of agencies actually collaborate with other agencies to help a youth with ASD achieve their transitional goals. This is very worrisome. Since not all agencies can provide all of the transitional services that a youth with ASD may need, then some of their needs may not be met if these agencies are not working together to help the youth.

**Follow-up Services**

Follow-up services are often necessary for a youth with ASD to maintain their employment after gaining employment. DARS can only provide follow-up services to a youth with ASD up until the youth has been employed for 90 days in an area identified on their employment plan. High schools can only provide transitional services after a student graduates and up until their 22nd birthday, only if there is a goal on the student’s ARD transition document that the school district believes they can meet. Therefore, it is up to the community based organizations to provide these follow-up services to ensure the youth with ASD are able to maintain their employment. Survey questions 48 through 51 asked respondents about their follow-up policies and services that their agencies can provide. Table 5.16 below provides the survey questions, the respondents’ answers, and related percentages.

**Table 5.16: Follow-up Services Provided by Community Agencies**

<table>
<thead>
<tr>
<th>Questions</th>
<th>Responses (n=4)</th>
<th>Percentages</th>
</tr>
</thead>
<tbody>
<tr>
<td>48. After a youth with ASD gains employment in a field identified on their individual employment plan, does your agency provide follow-up services?</td>
<td>Yes: 3</td>
<td>Yes: 75%</td>
</tr>
<tr>
<td></td>
<td>No: 1</td>
<td>No: 25%</td>
</tr>
</tbody>
</table>
49. If Q. #48 is Yes, how long can your agency offer follow-up services?

<table>
<thead>
<tr>
<th>Answer</th>
<th>Response (n=3)</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 Month</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>1 Month</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>1 to 3 Months</td>
<td>1</td>
<td>33%</td>
</tr>
<tr>
<td>3 to 6 Months</td>
<td>1</td>
<td>33%</td>
</tr>
<tr>
<td>6 to 12 Months</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Over 1 Year</td>
<td>1</td>
<td>33%</td>
</tr>
</tbody>
</table>

50. If Q. #48 is Yes, what types of follow-up services does your agency provide to youth with ASD?
- “Any long term support, including job coaching, skills training and IL support.”
- “Communication with consumer as to what kinds of services does she/he need at that time.”
- “Services related to maintaining employment.”

51. If Q. #48 is Yes, what types of follow-up services does your agency offer to the employers of youth with ASD?
- “Any needed by the employer at their request or clients.”
- “If the employer contacts our agency with consumer permission, information on the accommodation process can be provided. Ideas of accommodations can be provided.”
- “Long term follow-up if issues arise on the job.”

Four of the agencies were able to answer question 48 as they advised that they do employment plans with youth with ASD. As shown in table 5.16 above, three out of the four agencies (75%) provide follow-up support after a youth with ASD gains employment in a field identified on their employment plan. One organization indicated that they can provide follow-up services to youth with ASD for 1 to 3 months after a youth gains employment. Another agency reported they can provide follow-up services from 3 to 6 months. The third agency can provide follow-up services for over one year. Table 5.16 also provides the details of the follow-up services these agencies can provide to the youth with ASD and their employers. Overall, it is discouraging that only two out of the four agencies can provide follow-up service for longer than...
3 months after the youth with ASD gains employment in an area identified on their employment plan.

Chapter Summary

This chapter provided the data that were collected from interviews, document analysis, surveys, and non-participation observations of public presentations. In the high school level process, GISD does an exceptional job of providing the transitional programs that were identified in the literature. One area of concern is teaching self-determination skills. Since the school district does not use a curriculum and the teachers are encouraged to teach such skills during the day, there is a concern that the teachers may not actually have the time to teach self-determination skills. Also, there is a concern that general education teachers who teach students with ASD, may not receive specialized training on how to best serve this population. Federal and state legislatures should revisit the “lease restrictive environment standard” law, and consider amending the law with a statement indicating that if the lease restrictive environment is doing more harm than good to the student, then school officials shall meet with the student and their family to discuss alternatives.

At the state level process, the non-participation observations of public presentations and documents analyzed indicated that DARS does well with the majority of the elements listed in the conceptual framework. However, the researcher has some concerns that some programs under specific elements listed in the conceptual framework might not be provided by DARS. There is concern that DARS does not use PCP to encourage the youth with ASD to participate in and/or lead their individual plan for employment (IPE). There is a concern that DARS RCs do not receive any specialized trainings on how to work with youth with ASD. DARS has 60 days to determine if the consumer is eligible for services, and then DARS has another 90 days to
complete the consumer’s IPE. These policies do not sound very efficient. Another concern is that the DARS representative for GISD has approximately 200 consumers on his/her caseload. How effective can one person be when they have 200 clients on their caseload? The last concern for DARS is the limited information on the types of rehabilitation technology that the agency uses, as discussed in their documents. The researcher found no evidence indicating that DARS uses video modeling or covert audio coaching to help this population. Both of which, have been proven to help this population gain and/or maintain employment.

At the community level process, most of the agencies only provide a few of the transitional programs that were identified in the literature. There is a concern that only a few of the agencies have case managers that receive specialized training on how to best serve this population. Only one of the agencies that participated in the survey indicated that they have a representative assigned to serve GISD students. Very few agencies indicated that they use video modeling to assist this population. None of the agencies use covert audio coaching to help this population on the job. Less than half of the agencies offer supported employment. Only two community based organizations reported providing vocational trainings and none reported providing any specialized vocational trainings to this population. Only 38% of the organizations collaborate with other agencies to assist this population. The majority of the agencies that collaborate with other organizations said they collaborate with DARS and they have contracts. However, only one out of the three agencies reported doing cross-agency professional development with the organizations that they collaborate with. Chapter 6 will provide the concluding remarks and recommendations for each level identified in the Conceptual Framework.
Chapter VI: Conclusion and Recommendations

Chapter Purpose

This concluding chapter provides a synopsis of the research study, makes recommendations to the transitional programs for autistic youth in Georgetown, discusses the limitations to this study, and provides suggestions for future research. The recommendations made will be based off of a comparison between the practical ideal type model and the data collected through the multiple-methods.

Summary of Research

The purpose of this research project was to first, describe the ideal components of an effective transitional program for youth with ASD transitioning from high school to employment in a community. Second, assess the transitional programs from high school to employment for youth with ASD who reside in Georgetown, TX. Third, provide recommendations for improving the transitional programs for youth with ASD who reside in Georgetown, TX.

Recommendations

The model assessment tool for this case study consists of three main components for effective transitional programs for autistic youth. The three main components include the high school level process, state level process, and community level process. Each level of the process includes several elements that were identified in the literature as best practices for transitional programs for autistic youth. Table 6.1 below identifies the three levels of the process, relevant elements within each level, whether or not the data supports each element, and recommendations.
<table>
<thead>
<tr>
<th>High School Level Process</th>
<th>Evidence</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>◆ IEP/Transition Planning</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue meeting and exceeding state and federal laws.</td>
</tr>
<tr>
<td>◆ Assessments</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue improving assessments and researching for improved assessments.</td>
</tr>
<tr>
<td>◆ Person Centered Planning (PCP)</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue using PCP. Provide a description about the process in documents. Have a policy requiring staff who facilitate transition meetings be trained to use PCP.</td>
</tr>
<tr>
<td>◆ Family and Other Support Systems</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue complying with state and federal laws by inviting required ARD committee members and family members to such meetings. Increase pressure on parents to participate in the transition process, if they become complacent.</td>
</tr>
<tr>
<td>◆ Interagency Collaboration</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue complying with state and federal laws about who gets invited to the student’s ARD meeting. Continue holding parent transition meetings and co-hosting transition fairs to introduce families to agencies in the community. Provide a list of such community agencies and the services they provide on your website.</td>
</tr>
<tr>
<td>◆ Self Determination</td>
<td>◆ Adequate Evidence</td>
<td>◆ Continue using the Decision-Making Matrix and Household Chores Developmental list. Document that GISD uses scripts to help students participate in their ARD meetings. Have a plan on how each teacher can teach self-determination each day, for example, using the Take Action method.</td>
</tr>
<tr>
<td>◆ Independent Living Skills</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue providing such trainings through the CBVI and Bridges program.</td>
</tr>
<tr>
<td>◆ Inclusion in General Education</td>
<td>◆ Strong Evidence</td>
<td>◆ Continue determining placing a youth with ASD in general education classes on a case by case and class by class basis. The co-ed teachers should have frequent communication about whether a student with ASD is actually benefitting from the general ed. class. Federal and state</td>
</tr>
</tbody>
</table>
legislatures should have a statement in the lease restrictive environment standard, advising that if the general education class is doing more harm than good to the disabled student, then other arrangements should be made.

| **Vocational Education Training (VET)** | **Strong Evidence** | Continue providing VET in the community, as this is the best way for a youth with ASD to learn what they like/dislike and what skills they will need to learn to work in a career they enjoy.

| **Work Internships/Paid Employment** | **Strong Evidence** | Continue providing the Vocational experience, CBVI and Bridges Programs and Project Search to students. Since the school district has limited funds for some of these programs, GISD may want to search for federal and/or local grants that may allow such programs to expand.

2. State Level Process

<table>
<thead>
<tr>
<th>Components/Elements</th>
<th>Evidence</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Eligibility Requirements</strong></td>
<td><strong>Strong Evidence</strong></td>
<td>Shorten the amount of time RCs have to determine if an applicant is eligible for services, such as 30 days.</td>
</tr>
<tr>
<td><strong>Rehabilitation Counselors (RCs)</strong></td>
<td><strong>Strong Evidence</strong></td>
<td>There is 1 RC for GISD and Leander ISD. Have a policy that limits the number of consumers a RC can have on their caseload. 200 consumers to 1 RC is an ineffective way to serve the consumers.</td>
</tr>
<tr>
<td>Specialized RCs with youth with ASD.</td>
<td><strong>No Evidence</strong></td>
<td>Train an RC to have a specialized caseload to work with youth with ASD.</td>
</tr>
<tr>
<td>Specialized Training for RCs to work with this population.</td>
<td><strong>No Evidence</strong></td>
<td>Provide trainings to RCs on how to best serve this population.</td>
</tr>
<tr>
<td>RCs attending ARD Transition meetings</td>
<td><strong>Insufficient Evidence</strong></td>
<td>Have a policy in place requiring RCs to attend a consumer’s ARD transition meeting, if the consumer is on their caseload. Or at least have a policy that requires the RC to discuss with the appropriate school personnel what they are working on with the consumer prior to the consumer’s ARD transition meeting.</td>
</tr>
</tbody>
</table>
| Employment Services | **Adequate Evidence** | Provide more information on the types of assessments DARS uses to determine a
<table>
<thead>
<tr>
<th>Service Area</th>
<th>Evidence Level</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Employment/Career Planning</td>
<td>Strong Evidence</td>
<td>Shorten the time frame a RC has to develop a consumer’s IPE from 90 days to 60 days from the time a consumer is determined eligible for services.</td>
</tr>
<tr>
<td>Person Center Planning (PCP)</td>
<td>Inadequate Evidence</td>
<td>Change the policy to ensure the planning of a consumer’s IPE is “consumer directed” and not “counselor directed.” All RCs should receive training on how to do PCP, and then the policy should reflect that RCs are required to use PCP to develop the consumer’s IEP.</td>
</tr>
<tr>
<td>Family and other supports participating in the consumer’s IPE</td>
<td>Adequate Evidence</td>
<td>Continue allowing the consumer to bring in supportive individuals to help them develop their IPE, but ensure that the process uses PCP.</td>
</tr>
<tr>
<td>Pre-Employment Services</td>
<td>Strong Evidence</td>
<td>Continue providing such services to the consumer.</td>
</tr>
<tr>
<td>Vocational Training Programs</td>
<td>Inadequate Evidence</td>
<td>List the vocational trainings that DARS provides. If DARS does not provide these services, but will only pay for some of these services, provide this information in documents, such as flyers and brochures.</td>
</tr>
<tr>
<td>Rehabilitation Technology Services</td>
<td>Adequate Evidence</td>
<td>Provide more examples of these services that DARS provides in documents, such as flyers and brochures.</td>
</tr>
<tr>
<td>Technology to share innovative ideas</td>
<td>No Evidence</td>
<td>Develop a system that allows RCs to discuss innovative ideas that have helped youth with ASD gain and or maintain employment.</td>
</tr>
<tr>
<td>Video Modeling</td>
<td>No Evidence</td>
<td>If DARS is not already using video modeling to assist the population, please do so and discuss it in documents.</td>
</tr>
<tr>
<td>Component</td>
<td>Evidence</td>
<td>Recommendations</td>
</tr>
<tr>
<td>---------------------------------</td>
<td>----------</td>
<td>-----------------------------------------------------------------------</td>
</tr>
<tr>
<td>Covert Audio Coaching (CAC)</td>
<td>No Evidence</td>
<td>If DARS is not already using CAC to assist the population, please do so and discuss it in documents.</td>
</tr>
<tr>
<td>Supported Employment</td>
<td>Strong Evidence</td>
<td>Continue providing such services to youth with ASD.</td>
</tr>
<tr>
<td>Job Coaches</td>
<td>Strong Evidence</td>
<td>Continue using Job Coaches in your supported employment program.</td>
</tr>
<tr>
<td>Interagency Collaboration</td>
<td>Strong Evidence</td>
<td>Continue collaborating with other agencies to assist youth with ASD gain and maintain employment.</td>
</tr>
<tr>
<td>Database System with Employers</td>
<td>Strong Evidence</td>
<td>Continue using the Business Tracking tool to keep in contact with employers that have previously hired consumers. Have specific representatives assigned to have regular communication with these employers.</td>
</tr>
<tr>
<td>Embedded Training Programs</td>
<td>Strong Evidence</td>
<td>Continue using the Business Relations Coordinators (BRCs) and regional Outreach Service Coordinator (OSC) teams to market consumers to potential employers.</td>
</tr>
<tr>
<td>Contracts</td>
<td>Strong Evidence</td>
<td>Continue doing contracts with the agencies DARS collaborates with in order to delineate all parties’ roles in the process.</td>
</tr>
<tr>
<td>Cross-agency professional development</td>
<td>No Evidence</td>
<td>Participate in cross-agency professional development with the agencies DARS contracts with. This will build better relationships between the agencies.</td>
</tr>
<tr>
<td>Independent Living Skills</td>
<td>Strong Evidence</td>
<td>Provide more examples of the ILS DARs provides in documents for the consumer to read, such as brochures and flyers.</td>
</tr>
</tbody>
</table>

### Community Level Process

<table>
<thead>
<tr>
<th>Components/Elements</th>
<th>Evidence</th>
<th>Recommendations</th>
</tr>
</thead>
<tbody>
<tr>
<td>Eligibility Requirements</td>
<td>40% of agencies have a timeframe to determine eligibility.</td>
<td>If an agency has a timeframe to determine eligibility, the policy should be as soon as possible and preferably within two weeks to one month from application.</td>
</tr>
<tr>
<td>Case Manager</td>
<td>CMs receive special training</td>
<td>CMs attend GISD transition meetings</td>
</tr>
<tr>
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</tr>
<tr>
<td>45% of agencies have CMs with specialized caseloads to work with individuals with ASD.</td>
<td>Only 44% of agency CMs receive specialized training.</td>
<td>Only 14% of agencies.</td>
</tr>
<tr>
<td>More agencies should have policies requiring CMs to have specialized caseloads to assist youth with ASD.</td>
<td>More agencies should require their CMs to receive specialized training on how to best work with this population.</td>
<td>If an agency is working with a youth with ASD that attends GISD, then the agency CM should attend the youth’s transition meetings.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Employment Services</th>
<th>Assessments</th>
<th>Employment Plans</th>
<th>PCP</th>
<th>Support with Employment Plans</th>
</tr>
</thead>
<tbody>
<tr>
<td>The majority of agencies use assessments.</td>
<td>50% of the agencies do employment plans.</td>
<td>80% of agencies that do employment planning use PCP.</td>
<td>The majority of agencies allow the youth, parents and guardian, school personnel and other supportive adults participate in the youth’s employment plan.</td>
<td>The majority of agencies allow the youth, parents and guardian, school personnel and other supportive adults participate in the youth’s employment plan.</td>
</tr>
<tr>
<td>If your agency is not using assessments to determine the youth with ASD’s strengths, interests and preferences, then research such assessments and incorporate them.</td>
<td>If one of your agency’s goal is to help the youth with ASD gain employment, then do employment planning with them.</td>
<td>Continue using PCP for this population when developing employment plans.</td>
<td>If your agency does employment planning, then allow the youth with ASD, their parent/guardian, school personnel and other supportive adult to participate in the planning.</td>
<td></td>
</tr>
<tr>
<td>Service</td>
<td>Percentage of Agencies Offered</td>
<td>Description</td>
<td></td>
<td></td>
</tr>
<tr>
<td>----------------------------------------------</td>
<td>--------------------------------</td>
<td>-----------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pre-employment services</td>
<td>70%</td>
<td>If one of your agency's goal is to help individuals gain employment, then pre-employment services must be offered.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Specialized Vocational Training</td>
<td>Only 2 agencies (25%)</td>
<td>Community based organizations, especially vocational training schools need to research such specialized training programs that have proven to have success with this population. Such specialized training programs should be developed for this population.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rehabilitation Technology</td>
<td>Only 27%</td>
<td>More agencies should have policies requiring their staff to use such technology.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Video Modeling</td>
<td>Only 40%</td>
<td>More agencies should use video modeling as this has proven to help youth with ASD learn job skills and other life skills.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Covert-Audio Coaching (CAC)</td>
<td>None</td>
<td>Agencies should research CAC and offer CAC to this population when training them on the job.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Technology to share innovative ideas.</td>
<td>Only 30%</td>
<td>Agencies need to have technology that shares creative ideas that have helped this population reach their transitional goals.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Supported Employment</td>
<td>44%</td>
<td>More agencies need to provide this service as it is often discussed as a best practice to help this population gain and maintain employment.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Job Coaches</td>
<td>44%</td>
<td>More agencies should enlist the help of Job Coaches for this population.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Independent Living Skills (ILS)</td>
<td>50%</td>
<td>If your agency does not provide ILS, then collaborate with an agency that does provide such skills training to assist the youth with ASD.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Topic</td>
<td>Description</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>-------------------------------------------</td>
<td>-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
| One-stop-Career Center                    | 2 agencies (20%) identified themselves as a one stop career center, but only 1 actually appeared to be a one stop career center.  
This is an adequate number of one-stop-career centers for individuals with ASD who reside in Georgetown. |
| Interagency Collaboration                 | 38% of agencies collaborate with other agencies to assist this population.  
This percentage is way too low. All agencies should collaborate with other agencies in the community to assist this population. If an agency does not provide one of the many transitional programs needed to assist this population, then that agency should be working with another agency that can provide the necessary program. |
| Embedded Training Programs (ETPs)         | Only 20% of agencies have ETPs.  
More agencies should have marketing programs that are designed to help youth with ASD gain employment. |
| Contracts                                 | 100% of agencies that collaborate with another agency has contracts with the other agency.  
Continue having contracts with the agencies your organizations collaborate with. |
| Cross-agency professional development    | 33% of agencies do cross-agency professional development.  
If your agency collaborates with another agency, then you should do cross-agency professional development. |
| Follow-up services                        | 75% of agencies offer follow-up services after a youth with ASD gain’s employment in a field identified on their employment plan.  
This is a decent percentage of agencies. However, of the agencies that do provide follow-up services, only one indicated they can provide such services for over 1 year, while 1 said they can provide follow up services from 3 to 6 months, and the last agency indicated they can provide follow-up services from 1 to 3 months. Follow-up services should go longer than 3 months, preferably up to 6 months or longer. This will ensure the youth with ASD knows the job very well and the employer is very satisfied with the employee. |
Limitations to the Study

This study does have some limitations. In the state level process, none of the state representatives that were sent the survey were able to participate in the survey, hence limiting the amount of data collected. Therefore, DARS may provide some of the elements that the researcher could not find by attending the public presentations and reviewing DARS’ policies and procedures and other documents. In the community level process, not all of the agencies that were sent a survey participated in or completed the survey. Therefore, the study did not include all agencies that provide transitional programs to youth with ASD residing in Georgetown. Lastly, this study was done to identify the best practices for transitional programs for youth with ASD who go from high school to employment, therefore the best practices for youth with ASD that go to colleges were not researched. The researcher did include the vocational schools in the area that provide vocational trainings, but youth in Georgetown may decide to move further away from home to participate in such training programs.

Suggestions for Future Research

Future research should look at the transitional services that high schools can provide to prepare those youths with ASD who want to attend college. This population will likely be a smaller percentage of youth with ASD compared to those that want to transition to employment following high school. This research should develop a practical ideal type model for colleges that will assist youth with ASD in succeeding at such schools and prepare them for employment and life after they earn their respective degrees.
References


Georgetown ISD. (n.d.) ARD Committee Meeting (Brochure).

Georgetown ISD. (n.d). Georgetown ISD Bridges Vocational Training (Brochure).

Georgetown ISD. (n.d.). Georgetown ISD Special Education Parent Liaison (Flyer).


Texas Department of Assistive and Rehabilitation Services. (n.d.). Division for Rehabilitative Services D.A.R.S (PowerPoint printout from February 27, 2016.).


Appendix A

Interview Questions

1. Describe the current process and policy for the Individual Education Programs (IEPs) and transition planning for youth with Autism Spectrum Disorder (ASD)?

2. At what age do they begin the process?

3. Does your agency use any assessments to determine the youth with ASD’s strengths, preferences and interest?

4. If Q. #3 is Yes, please list the assessments your department uses?

5. Do you use Person Centered Planning (PCP) to encourage the youth with ASD to participate in and/or lead their IEP?

6. If not, how do you ensure the youth with ASD will participate in their IEP?

7. If so, is there a particular PCP curriculum that you use?

8. Who is invited/included at the IEP Transition Meeting?

9. How do you encourage family members and other support systems to attend and participate in the IEP transition meeting?

10. What agencies are invited to the IEP transition meeting?
11. Do DARS’ representatives get invited to the IEP transition meeting?

12. What agencies do you collaborate with to assist the student in achieving their transitional goals?

13. How do you teach Self-Determination skills to ASD youth?

14. Is there a specific curriculum that your ISD uses to teach self-determination skills?

15. Does your agency teach Independent Living Skills to youth with ASD?

16. If so, what independent living skills are taught and how are they taught?

17. What’s your ISD’s policy on Inclusion in General Education Classes for youth with ASD?
18. Does your ISD train regular education teachers on how to best teach this population?

19. Does your ISD offer support staff to help the youth with ASD succeed in general education classes?

20. What types of vocational education classes does your ISD provide for youth with ASD?

21. Are students with ASD allowed to attend offsite VETs during school hours? If so, what programs can they attend, and at what age and school grade level are these students allowed to participate in these VET programs?

22. Does your ISD help students with ASD gain work internships or paid employment when they are within 2 years of graduating?

23. Does your ISD contract with any community agencies where the student can participate in work internships or paid employment during their last couple of years in school?
Appendix B

Survey

1. Your agency can best be identified as:
   A) DARS, B) Community-Based-Organization (Private or Public) C) other

2. If Q. #1 is “other,” Describe what type of agency your organization is:

   _______________________________________________________________________
   _______________________________________________________________________

3. Does your agency provide transitional services to youth (between the ages of 16 and 21) with Autism Spectrum Disorder?
   A) Yes, B) Maybe, C) No

4. If Q. #3 is not “No,” At what age does your agency start providing transitional services to youth with Autism Spectrum Disorder (ASD)?
   A) Younger than 16, B) 16, C) 17, D) 18 or older

5. If Q. #3 is not “No,” Does you agency serve youth with ASD who reside in Georgetown, TX?
   A) Yes, B) Maybe, C) No

6. Your agency’s current policy to determine eligibility for services is within:
   A) 2 weeks of application. B) 1 month of application, C) more than one month, D) There is no such policy

7) Does your agency use any assessments to determine the strengths of a youth with Autism Spectrum Disorder (ASD)?
   A) Yes       B) No
8. If Q. #7 is “Yes,” please list the assessments your agency uses to determine the strengths of a youth with ASD:

______________________________________________________________________________

______________________________________________________________________________

9. Does your agency use any assessments to determine the preferences of a youth with ASD?
A) Yes    B) No

10. If Q. #9 is “Yes,” Please list the assessments your agency uses to determine the preferences of a youth with ASD:

______________________________________________________________________________

______________________________________________________________________________

11. Does your agency use any assessments to determine the interests of a youth with ASD?
A) Yes    B) No

12. If Q. #11 is “Yes,” Please list the assessments your agency uses to determine the interests of a youth with ASD:

______________________________________________________________________________

______________________________________________________________________________

13. Does your agency do employment/career planning with youth with ASD?
A) Yes, B) No

14. If Q. #13 is “Yes,” Does your agency use Person Centered Planning (PCP) to encourage the youth with ASD to participate in and/or lead their plan for employment?
A) Yes    B) No
15. If Q. #13 is “Yes,” Check all individuals who are allowed to participate in the youth with ASD’s employment plan
A) The youth with ASD  B) parents/guardians  C) School personnel  D) Other supportive adults

16. Does your agency have specialized Rehabilitation Counselors or Case Managers to work with individuals with ASD?
A) Yes  B) No

17. If Q. #16 is “Yes,” How many specialized Rehabilitation Counselors or Case Managers does your agency have to work with youth with ASD?
A) One, B) Two, C) Three, D) More than three

18. Do your Rehabilitation Counselors or Case Managers receive special training on how to best work with individuals with ASD?
A) Yes  B) No

19. How often do Rehabilitation Counselors or agency representatives get invited to school IEP/Transition meetings at a Georgetown high school for youth with ASD?

20. How often do Rehabilitation Counselors or agency representatives attend school IEP Transition meetings at a Georgetown High School for youth with ASD?

21. Does your agency have a representative that is assigned to attend IEP Transition Meetings for youth with ASD at a Georgetown High School?
A) Yes, B) No
22. Does your agency offer pre-employment services to youth with ASD (e.g., mock interviews, help with resumes, job placement, and job readiness classes)?

A) Yes, B) No

23. If Q. #22 is “Yes,” List all pre-employment services your agency offers to youth with ASD:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________

24. Does your agency offer Embedded Training Programs?

A) Yes, B) No

25. If Q. #24 is “Yes,” List all Embedded Training Programs your agency offers:
____________________________________________________________________________
____________________________________________________________________________

26. Does your agency use technology to share innovative ideas that have helped individuals with ASD gain employment?

A). Yes, B) No

27. Does your agency use video modeling to train youth with ASD?

A) Yes, B) No

28. If Q. #27 is “Yes,” List the ways your agency uses video modeling to help train youth with ASD:
____________________________________________________________________________
____________________________________________________________________________
____________________________________________________________________________
29. Does your agency use Covert Audio Coaching to assist youth with ASD on the job?
A) Yes  B) No

30. If Q. #29 is “Yes,” List the ways your agency has used Covert Audio Coaching to assist youth with ASD on the job:
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

31. Does your agency have a data base that lists the employers who have previously employed youth with ASD?
A) Yes  B) No

32. Does your agency use Rehabilitative Technology to help youth with ASD gain and/or maintain employment?
A) Yes, B) No

33. If Q. #32 is “Yes,” List any rehabilitative technology that your agency uses to assist individuals with ASD gain and/or maintain employment
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

34. Does your agency offer supported employment to individuals with ASD?
A) Yes  B) No

35. Does your agency have Job Coaches or Employment Specialist to assist youth ASD gain and/or maintain employment?
A) Yes  B) No
36. If Q. #34 is “Yes,” List all services that are provided through your supported employment program:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

37. Does your agency offer any vocational training to youth with ASD?
A) Yes  B) No

38. If Q. #37 is “Yes,” List all vocational training fields that your agency offers to youth with ASD and indicate if the training is a specialized vocational program that has proven to be successful at assisting youth with ASD gain competitive employment (e.g., visual effects for movie production):

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

39. Does your agency teach independent living skills to youth with ASD?
A) Yes, B) No

40. If Q. #39 is “Yes,” What types of independent living skills are taught to youth with ASD and how are they taught?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

41. Is your agency considered a one-stop-career center?
A) Yes  B) No
42. Does your agency network with community employers to help individuals with ASD gain employment?
   A) Yes   B) No

43. Does your agency have a database that lists all employment opportunities in the community?
   A) Yes   B) No

44. Does your agency collaborate with other agencies to provide transitional services to youth with ASD?
   A) Yes, B) No

45. If Q. #44 is “Yes,” List all agencies your organization collaborates with to provide transitional services to youth with ASD
   __________________________________________________________________________
   __________________________________________________________________________
   __________________________________________________________________________

46. If Q. #44 is “Yes,” Does your agency have contracts with these agencies?
   A) Yes   B) No

47. If Q. #44 is “Yes,” Does your organization do any cross-agency professional development with these agencies?
   A) Yes   B) No

48. After a youth with ASD gains employment in a field identified on their individual employment plan, does your agency provide follow up services?
   A) Yes   B) No
49. If Q. #48 is “Yes,” How long can your agency offer follow-up services?

A) Less than one month, B) 1 Month, C) 1 to 3 months, D) 3 to 6 months, E) 6 to 12 months, F) Over 1 year

50. If Q. #48 is “Yes,” What types of follow-up services does your agency provide to youth with ASD?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

51. If Q. #48 is Yes, What types of follow-up services does your agency offer to the employers of youth with ASD?

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

52. Please provide any additional information you want the researcher to know about your agency:

______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
Appendix C

E-mail to Community Based Organizations

Hi ____________,

My name is Deron Reinders, and I met you earlier today at the Transition Fair at Round Rock High School. I spoke with you about my Applied Research Project (ARP) for my Master’s Degree at Texas State University. My ARP is on transitional programs from high school to employment for youth with Autism Spectrum Disorder (ASD).

From my research on the topic, I learned that multiple agencies (i.e., high schools, DARS and community-based-organizations) provide transitional services to youth with ASD. For this study, I am interviewing high school personnel and sending an anonymous survey to all community-based-organizations that provide such services to residents in Williamson County.

Your participation in this survey is voluntarily, your responses on the survey are confidential, your name will not be provided in the ARP and the ARP will not single out any of the agencies that participate. I will use the survey to collect descriptive statistics on the agencies that complete it. Based off of the statistics, my ARP will make recommendations to improve upon the transitional services and programs that the agencies who participated in the study provide.

Your Anonymous Survey Link:

https://qtrial2016q1az1.qualtrics.com/SE/?SID=SV_4Jn4xIa0MT4ySOx

Please complete the survey by 03/10/16. So far it has taken an average of 13.5 minutes for respondents to complete the survey. If you have any questions or need additional information on the study, I can be reached at 512-784-8502 or by responding to this e-mail.

Sincerely,

Deron J. Reinders
Appendix D

Exemption E-mail

DO NOT REPLY TO THIS MESSAGE. This email message is generated by the IRB online application program.

Based on the information in IRB Exemption Request EXP2016N816921V which you submitted on 01/19/16 20:56:50, your project is exempt from full or expedited review by the Texas State Institutional Review Board.

If you have questions, please submit an IRB Inquiry form:

http://www.txstate.edu/research/irb/irb_inquiry.html

Comments:
Your application has been approved under category 2 not category 1. If you have any questions please feel free to contact me at 512-245-2314.

Monica Gonzales

IRB administrator