

DOCTORAL STUDENTS' PERCEPTIONS OF SELF-DETERMINATION FOR
STUDENTS WITH DISABILITIES

BY

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Abstract

The purpose of this study is to investigate special education doctoral students' perceptions of self-determination for students with disabilities. This study is designed to examine what doctoral students who are preparing for the future role as faculty in special education know about self-determination and their views related its importance in their own studies and in future teaching. Specifically, this study identifies doctoral students' knowledge of and general attitude toward self-determination. For this, an extensive literature review has been conducted in the area of self-determination for students with disabilities.

This study uses the *Doctoral Student's Perceptions of Self-Determination for Students with Disabilities* survey (Kim, in press). The survey was developed to gather information about doctoral students' perceptions of self-determination for students with disabilities. Ninety-nine doctoral students majoring in special education completed the survey.

The results of this study suggested that the high number of special education doctoral students as pre-faculty members in special education departments indicated they understood the definition and components of self-determination. However, they need to have more sufficient knowledge about self-determination such as assessment, curricula, issues and trends. In addition, the results indicated that a majority of the doctoral students believed that self-determination is one of the most important skill sets acquired by students with disabilities, and they were willing to integrate self-determination knowledge and

skills into their future teaching. Finally, limitations of this study and implications for further research are discussed.

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Chapter I: Introduction

During the past three decades, researchers have demonstrated that self-determination skills have important effects on transition education of students with disabilities (e.g., Hardre & Reeve 2003; Wehmeyer & Palmer, 2003; Wehmeyer & Schwartz, 1997). The Council for Exceptional Children's Division on Career Development and Transition (DCDT) stressed the importance of self-determination as part of the transition of students with disabilities (Field, Martin, Miller, Ward, & Wehmeyer, 1997). In addition, Wehmeyer (2005) suggested that self-determination allows individuals with disabilities develop skills, knowledge and attitudes that make their lives more valuable.

Nevertheless, research has suggested that while teachers know that the curriculum for students with disabilities should include strategies for improving self-determination, only a few teachers actually instruct their students in self-determination (Agran, Snow, & Swaner, 1999; Thoma, Nathanson, Baker, & Tamura, 2002). Although many educators have agreed that it is important to teach the component elements of self-determination, only 22% of secondary special education teachers reported that the IEP goals of their students included self-determination (Wehmeyer, Agran, & Hughes, 2000).

Why do teachers have difficulty teaching self-determination skills to their students? Thoma, Nathanson, et al. (2002) identified one reason in their research. Their results indicated that teachers did not receive sufficient training about how to improve self-determination skills and did not have knowledge about it as part of undergraduate or graduate programs. In order to improve special education teachers' techniques to teach self-determination skill, we need to investigate the perceptions of future faculty regarding

self determination and their future role in providing instruction on self-determination within pre-service programs.

Purpose

The purpose of this study was to investigate doctoral special education students' perceptions of self-determination for students with disabilities. This study was designed to examine what doctoral students who are preparing for the future role as faculty in special education know about self-determination and their views related its importance in their own studies and in future teaching. The research questions for this study were:

1. Have doctoral students taken courses related to self-determination?
2. From which sources do they obtain information about self-determination?
3. Do doctoral students have adequate knowledge about self-determination?
4. What are the attitudes of doctoral students toward self-determination?

Chapter II: Literature Review

The following chapter will offer a brief history of self-determination for people with disabilities. Next, a description of the definition, essential characteristics, component elements, and the effects of self-determination will be provided. Finally, the importance of doctoral students and pre-faculty members for preparing teachers of students with disabilities about self-determination will be reviewed.

Historical Background of Self-Determination for People with Disabilities

In 1972, the concept of self-determination for individuals with disabilities was first introduced by Benget Nirje (Shapiro, 1993).

Nirje (1972) suggested the following:

One major facet of the normalization principle is to create conditions through which a...person [with disabilities] experiences the normal respect to which any human is entitled. Thus, the choices, wishes, desires and aspirations of a...person [with disabilities] have to be taken into consideration as much as possible in actions affecting him. To assert oneself with one's family, friends, neighbors, co-workers, other people, or vis-à-vis an agency is difficult for many people. It is especially difficult for someone who has a disability or is otherwise perceived as devalued. Thus, the road to self-determination is indeed both difficult and all-important for a person who is impaired. (p. 177).

Nirje described a variety of activities that would encourage people with disabilities to better manage their lives and futures. Sixteen years later, the Office of Special Education Programs (OSEP) suggested that self-determination was important for all people,

especially so for individuals with disabilities, for whom it is a more difficult but critical goal (Ward, 1988). In addition, Ward asserted that students with disabilities needed to learn and practice self-determination skills. Self-determination was included as a critical element of legislated transition services for individuals with disabilities in the Rehabilitation Acts of 1992 and 1998; and the Individuals with Disabilities Education Acts of 1990 and 1997 (Wood, Karvonen, Test, Browder, & Algozzine, 2004). From this early theory, researchers have identified strategies to improve choice-making abilities among individuals with disabilities related to personal activities, education, independence, decision making and problem-solving (Agran & Wehmeyer, 2003).

The Definition of Self-Determination

It is difficult to define self-determination as one technical structure or form. While the literature has defined self-determination in many ways, a theoretical approach that describes self-determination across one unified concept has not yet occurred. In the area of special education, in the 1990's, the research related to self-determination for students with disabilities began to be implemented in earnest, and the definition for self-determination was established (Wehmeyer, Agran & Hughes, 1998). Ward (1998) defined self-determination as the ability, attitude or skill that helps people determine goals and to achieve them. Martin and Marshall (1995) suggested that self-determined people know what they want and how to achieve it, and assert their rights to fulfill their interests and concerns. Wehmeyer (1992) defined self-determined behavior as: "the attitudes and abilities required to act as the primary causal agent in one's life and to make choices regarding one's actions free from undue external influence or interference" (p. 305).

Moreover, Wehmeyer (2006) revised this definition, suggesting that “self-determined behavior refers to volitional actions that enable one to act as the primary causal agent in one’s life and to maintain or improve one’s quality of life” (p. 117). Kim & Kim (2000) suggested there are common factors among the different definitions: (a) self-determination includes private control in life; (b) individuals need to have a regular attitude, personality and ability to control their lives; (c) individuals need to interact with environments around themselves in appropriate ways; (d) individuals need to have freedom and independence; (e) individuals should know the value of themselves, and make decisions or choices, based on interests or preferences of themselves; and (f) individuals should decide the goals to succeed in their transition to adulthood and try to achieve them.

The Essential Characteristics of Self-Determined Behavior

According to Wehmeyer et al. (1998), self-determined behavior refers to actions following four essential characteristics: (a) behavior autonomy; (b) self-regulated behavior; (c) Psychology empowerment; and (d) self-realization.

Lewis and Taymans (1992) defined autonomy as:

A complex concept which involves emotional separation from parents, the development of a sense of personal control over one’s life, the establishment of a personal value system and the ability to execute behavioral tasks which are needed in the adult world. (p. 37)

Wehmeyer et al. (2000) also suggested that autonomy is the action that follows the preference, interests and abilities of the individual that is independent behavior without any effect or interference from outside.

Whitman(1990) defined self-regulation as:

A complex response system that enables individuals to examine their environments and their repertoires of responses for coping with those environments to make decisions about how to act, to evaluate the desirability of the outcomes of the action, and to revise their plans as necessary. (p. 373)

Psychological empowerment refers to the multiple areas of perceived control that include self-recognition, personality and motivation (Zimmerman, 1990). Finally, self-determined people achieve self-realization through using comprehensive and accurate self-knowledge. Self-knowledge is achieved through the individual's interpretation of environments and experiences. Also, how significant others reinforce and contribute to the individual's behaviors effects the formation of self-realization and self-understanding (Wehmeyer et al., 1998).

The Component Elements of Self-Determined Behavior

The development and achievement of multiple and interrelated component elements play a critical role in the development of self-determined behavior (Wehmeyer et al., 1998). In order to achieve each of the component elements, unique developmental and learning experiences are required (Doll, Sands, Wehmeyer, & Palmer, 1996). Wehmeyer et al. (2000) divided the component elements into seven domains: (a) choice-making; (b) decision making; (c) problem-solving; (d) goal-setting and attainment; (e) self-advocacy; (f) self-management and self-regulation skills; and (g) self-awareness and self-knowledge. Each will be described next.

Choice-making. Choice-making involves selecting something in one's own mind and informing others. Choice-making is a particularly important element in providing people with significant disabilities with a positive quality of life (Wehmeyer et al., 2000). Jones (2005) also stressed that choice-making was the necessary skills for people with intellectual disabilities. Reid, Parsons, and Green (1991) described the teaching of choice-making as consisting of the two basic components of choice activity and the identification of a preference. The first component, choice activity, includes "emitting specific behaviors necessary to select one item or event from two or more alternatives" (Reid et al., 1991, p. 3). The second component, the identification of a preference means the activity of selecting preferred outcomes. Researchers have indicated choice-making has positive effects for students with disabilities. When teachers instructed students with disabilities in choice-making skills at recreation, learning activities, and meal time, the responses of the students increased (Cooper & Browder, 1998) and engagement increased (Morgan, 2006).

Decision-making. Choice-making and decision-making have common and overlapping parts. However, decision-making can be considered as a process of making choices among alternatives, based on personal preferences. (Wehmeyer et al., 1998). In addition to playing a role as one of the elements of self-determination, decision-making had positive effects on improving the general health of people with disabilities (Niedhammer, Chastang, & David, 2008). Furthermore, Janssen and Nijhuis (2004) reported decision-making decreased emotional exhaustion of workers with disabilities.

Problem-solving. Beyth-Marom, Fischhoff, Quadrel, and Furby (1991) asserted that decision-making is a process of identifying whether a variety of solutions have

adequacy, while a problem is “a task whose solutions are not immediately perceived” (p.20). More specifically, a problem “is a specific situation or set of situations to which a person must respond in order to function effectively in his environment” (D’Zurilla & Goldfried, 1971, p. 108). Problem-solving skills can be divided into two prominent contextual areas. The first is considered to have only one kind of correct solution, like solving mathematical problems or completing puzzles (Wheeler, 1991). In contrast, the second is a complicated situation that includes various amounts of possible solutions according to time or situation (Wehmeyer & Kelchner, 1994).

Goal-setting. Goal-setting of individuals with disabilities has positive effects on their physical and intellectual developments. Duff, Evan, and Kennedy (2004) indicated goal-setting was effective in promoting physical rehabilitation of individuals with intellectual disabilities. Also, goal-setting has been used for skill acquisition of students with disabilities (Copeland & Hughes 2002). In addition, in a study by McConkey and Collins (2010), the social inclusion of students with intellectual disabilities was improved through personal goal-setting.

Self-advocacy. Positive effects of self-advocacy in special education were proved through research. In a study by Test and Neale (2004), all participants with disabilities responded positively to the self-advocacy strategy intervention and indicated that the intervention was helpful for them to participate in their IEP meeting. In addition, Pierson, Cortez, and Shea (2005) suggested the participation of students with disabilities in self-advocacy programs promotes increasing their competence and self-confidence.

Self-management and self-regulation skills. Self-management refers to methods, skills, and strategies by which individuals can effectively direct their own activities toward the achievement of objectives. Self-regulated behavior includes self-observation, self-evaluation, and the skills to be able to make and action on solutions (Agran, 1997). For improving classroom activities of middle school students with ADHD and reducing anger episodes among adults with cognitive and behavior disabilities, when using self-management strategies, it was very effective (Shapiro, Dupaul, & Bradley-Klug, 1998).

Self-awareness and self-knowledge. Individuals need to understand their strengths, weaknesses, abilities and limitations for acting in a self-realizing manner. They also should be aware of how to use these unique aspects of their personality to improve the quality of their lives. Although students do not learn directly about self-awareness and self-knowledge skills through classes, role playing, social skill simulations or teacher-centered instructions, they can learn those from their own interpretation of events and experiences (Wehmeyer et al., 1998).

The Effects of Self-Determination for Students with Disabilities

Research has shown that self-determination can have a significant effect on young adults with disabilities, leading to better outcomes in school and community and enabling them to live a quality life (Lachapelle et al., 2005). Turnbull and Turnbull (2001) suggested that self-determination is “ the means for experiencing quality of life consistent with one’s own values, preferences, strengths and needs” (p. 58). Campbell-Whatley (2006) found self-determined students with disabilities were better able to control their lives and make choices. In addition, the importance of self-determination has been

demonstrated by empirical evidence showing that highly self-determined individuals with disabilities are likely to perceive a more enhanced quality of life (Wehmeyer & Schwartz, 1998). Self-determination skills have positive effects that students with disabilities have successful academic performance (Martin, Van Dycke, D'Ottavio, & Nickerson, 2007), and in postsecondary education (Field, Sarver, & Shaw, 2003). Konrad, Fowler, Walker, Test, & Wood (2007), through an evaluation of 34 studies related to self-determination interventions, found the self-determination intervention helped students with disabilities improve their math abilities. In addition, Sarver (2000) investigated the effects of self-determination on successful academic performance of students with a learning disability. The results showed the highly self-determined students had better grade point average (GPA) than the low self-determined students

Moreover, providing instruction in self-determination is very important in the transition of students with disabilities. The Division on Career Development and Transition position statement on the transition of youth with disabilities from school life to adult life identified the importance of self-determination during the transition process (Halpern, 1994). The argument that self-determination skills have an impact on successful transitions of students with disabilities from school to local companies or workplaces caused educators to powerfully focus on promoting self-determination among students with disabilities (Field, 1996; Wehmeyer & Schwartz, 1997). In more recent studies, self-determined young adults with disabilities achieved more positive adult outcomes, including employment than students who are not self-determined (Field & Hoffman, 2002;

Konard et al., 2007). Thus, self-determined students are more able to improve the quality of their lives and succeed in their transition to adult lives.

The lack of self-determination could cause students with disabilities to have low self-efficacy and poor learning strategies. As a result, they would cause learning, social and behavior problems (Durlak, Rose, & Bursuck, 1994; Hughes et al., 2000). Moreover, students with disabilities who are not considered to be self-determined have difficulties making the transition from school to the workplace or local communities after graduating from secondary schools (Heller, Miller, Hsieh, & Sterns, 2000; Wehmeyer & Bolding, 1999). The research above shows how important self-determination is for students with disabilities, and emphasizes that students with disabilities have to truly achieve self-determination to improve outcomes and the quality of life.

Special Education Doctoral Students, Pre-Faculty Members in Preparing Teachers about Self-determination

Teachers are most important people to teach self-determination skills to students with disabilities and to provide opportunities for improving self-determination. Teachers need to believe that students with disabilities can develop self-determination skills and make decisions for themselves. Teachers can provide the opportunities to use self-determination skills that lead to positive effects on improving the quality of their lives (Agran et al. 1999). Browder, Wood, Test, Karvone, and Algozzine (2001) reported that teachers should teach self-determination skills to students with disabilities and provide the opportunities to practice these skills. For this, teachers must attain specific knowledge of self-determination, and learn about how to provide appropriate instruction. Nevin, Malian,

and Williams (2002) suggested that faculty in undergraduate or graduate teacher education programs should assist their students to improve their knowledge of self-determination. Their study demonstrated that future teachers enrolled in special education courses can develop the abilities and knowledge to instruct students with disabilities in self-determination. However, a study by Thoma, Baker, and Saddler (2002) reported a negative outcome. These researchers surveyed the amount special education faculty included content about self-determination in their courses for future special educators. Their results indicated that only 22 of the 41 (54%) respondents reported including content of self-determination into their curriculums for pre-service special education teachers. In addition, Kim (in press) indicated that special education doctoral students as pre-faculty members in preparing teachers for students with disabilities lacked confidence in identifying how self-determination can be taught. Nearly half of the respondents in this study felt that they were not well prepared with regard to the instruction of self-determination for their future careers.

Summary

While self-determination skills have a significant effect on successful education of students with disabilities (e.g., Hardre & Reeve 2003; Wehmeyer & Palmer, 2003; Lachapelle et al., 2005; Wehmeyer, 2005), many researchers indicated that while teachers know that the curriculum for students with disabilities should include strategies for improving self-determination, only a few teachers actually instruct their students in self-determination (Agran et al., 1999; Thoma, Baker, et al., 2002). Moreover, Wehmeyer et al. (2000) reported that only 22% of secondary special education teachers reported that the

IEP goals of their students included self-determination. Thoma, Nathanson, et al. (2002) asserted that an important reason that teachers have difficulty teaching self-determination skills to their students is that they did not receive sufficient training about how to improve self-determination skills and did not have knowledge about it as part of undergraduate or graduate programs. Nevin et al. (2002) suggested that faculty in undergraduate or graduate teacher education programs should assist their students to improve their knowledge of self-determination. Thus, in order to improve special education teachers' techniques to teach self-determination skill, this study investigate the perceptions of self-determination for students with disabilities of doctoral special education students as pre-faculty members in preparing teachers for students with disabilities. The research questions for this study were:

1. Have doctoral students taken courses related to self-determination?
2. From which sources do they obtain information about self-determination?
3. Do doctoral students have adequate knowledge about self-determination?
4. What are the attitudes of doctoral students toward self-determination?

Chapter III: Research Methodology

The purpose of this study was to investigate doctoral students' perceptions of self-determination for students with disabilities. Specifically, this study identified doctoral students' knowledge of and general attitude toward self-determination. This chapter includes a description of the participants, the instrument, data collection, and data analysis.

Participants

Convenience sampling was used to identify the participants for this study who included 99 doctoral students majoring in special education. They were selected from among universities that comprise membership in the Higher Education Consortium for Special Education (HECSE). HECSE is a private, non-profit organization representing colleges or universities which offer doctoral programs in the fields of special education. The survey was posted on an online website, SurveyMonkey (www.surveymonkey.com), with the intent of reaching the target subjects. Emails were sent to HECSE members with the request to distribute to doctoral students. The email included information about the study and a link to the survey.

The Survey Instrument

The survey for this study, *Doctoral Student's Perceptions of Self-Determination for Students with Disabilities*, was developed by Kim (in press). The survey was developed to gather information about doctoral students' perceptions of self-determination for students with disabilities (See Appendix). The survey consisted of three sections. The first section collected the respondents' demographic information. The second section included sources of information about self-determination. These included questions such as whether the

participants had taken courses specific to self-determination. If they had taken coursework, respondents then selected whether it was at the doctoral, master's or undergraduate level. The second question in this section participants were asked if they taken courses in which self-determination content was included, but not the focus of the class. The final question asked the participants from which sources they had gained information about self-determination including: in-service trainings; conference presentations/proceedings; newsletters/articles/books; professional association; none; or other. The last section of the survey consisted of 10 questions designed to measure doctoral students' knowledge of self-determination and general attitudes toward self-determination. First, respondents were asked to rate their knowledge of self-determination using a 4-point Likert scale that ranged from "strongly agree" to "strongly disagree." The questions included: I have adequate knowledge of: (a) definition of self-determination; (b) components of self-determined behaviors; (c) self-determination assessments; (d) self-determination curricula; (e) issues and trends in self-determination. Next, the respondents were asked to rate their general attitudes toward self-determination with the remaining five questions: (a) self-determination is a very important focus in their special education programs; (b) self-determination is one of the most important skill sets acquired by students with disabilities; (c) I will integrate self-determination knowledge and skills into their future teaching; (d) I feel well prepared about self-determination for their future career; (e) self-determination course should be required of all doctoral students.

Data Collection

The data was collected through an e-mail survey (www.surveymonkey.com). The request to distribute the email requesting participation was emailed to the members of the Higher Education Consortium for Special Education (HECSE) on April 1st, 2010. HECSE members were asked to send the email to their listserv of doctoral students. Ninety-nine doctoral students completed the survey. Because the data collection used a convenience sample, there was no option to ascertain a response rate.

Data Analysis

SPSS was used to analyze data including the demographic information, the sources of information about self-determination, and doctoral students' knowledge of self-determination and general attitudes towards self-determination. The means and standard deviations of the dependent variables were computed.

Chapter IV: Results

Findings from the survey were organized into three categories: respondent characteristics, the sources of information about self-determination, and research questions. The first section describes the respondents' demographic information and includes the following: (a) the gender and age of doctoral students (b) the focus of doctoral students in special education; (c) the age level of the students that they are interested in; (d) their career plans; (e) their teaching experiences. The second section reports the results of the research questions. The questions address: (a) sources of information about self-determination; (b) perceptions of knowledge of self-determination; and (c) general attitudes toward self-determination.

Respondent characteristics

Gender and age of doctoral students. Eighty-four percent of all respondents in this survey were female with 16% being male. The age ranges of the respondents varied. Fifty-five percent of the respondents ranged in age from 30 to 39, 20% ranged from 20 to 29, 18% were between from 40 to 49, and 9% were over 50 years of age (See Table 1).

The focus of doctoral students in special education. All participants were asked to identify the focus areas of their doctoral program in special education. The open-ended responses were categorized into 18 different programs. Almost two-fifths of the respondents fell into the following four areas: low incidence (13%); high incidence (12%); emotional/behavior disorder (8%); Autism (8%). Following, in descending order, is teacher education (8%), transition (6%), early intervention (6%), inclusive/collaboration/co-teaching (5%), technology (4%), minority/multicultural Education (3%), family (2%), deaf

education (2%), visual impairment (2%), self-determination (2%), ABA/PBIS (2%), secondary special education (1%), combination programs (6%), and others (10%). (See Table 1).

The age level of the students for whom the doctoral students were interested. All respondents were asked to report the age level of the students with disabilities for whom they were interested. Their answers were as follows: (a) secondary (35%); (b) elementary (27%); (c) both early child and elementary (18%); (d) early childhood (12%); and (e) youth and primarily adults (8%) (See Table 1).

Career plans. A majority (77%) of all the respondents indicated their future career plan was to have an academic appointment or to become faculty. In descending order, 13% of the respondents were not sure about their future plans; 4% indicated that they planned to work for a higher education administration; 2% were interested in early childhood, elementary, or secondary administration; 2% indicated a desire to teach at an early childhood, elementary, or secondary school; and finally, 2% reported other areas of interest (See Table 1).

Teaching experience. Ninety percent of all respondents reported they had experience teaching students with disabilities in public schools (See Table 1). Among the 90% who had experience teaching, 42% indicated that they taught for 1 to 5 years; 30% from 6 to 10; 18% from 11 to 15; 5% from 16 to 20; and the 5% had worked with students with disabilities more than 21 years (See Table 1). The respondents who had experience teaching in public schools also were asked about age level of the students who they served. Thirty-eight percent reported that they worked at secondary schools; 36% indicated

elementary level; 19% worked at both early childhood and elementary schools; and finally 7% answered that they worked with early childhood (See Table 1). In addition, they were asked what the disabilities of the students that they served were: 52% reported that they worked with students with high incidence (LD, ED, SLP, HFASD, and OHI); 27% indicated low incidence/intellectual disabilities (MR, DD, and TOI); 8% indicated Autism; another 8% indicated all levels/cross-categorical/various disabilities; 2% indicated visual impairments, 1% indicated deaf and hard of hearing; and finally another 1% indicated general education (See Table 1). Finally, they were asked about what their professional roles were in the public school. Thirty-eight percent of them reported that they had worked as special education teachers, 36% indicated that they had experience working as general education teachers. Following, in descending order, is both general and special education teacher (4%), both general education teacher and behavior specialist (4%), behavior specialist (2%), both special education teacher and behavior specialist (2%), transition education (2%), early interventionist (2%), para-professional (1%), special education coordinator (1%), and other (8%) (See Table 1).

Research Question 1. Have Doctoral Students Taken Courses Related to Self-Determination?

In Table 2, all participants indicated whether they had obtained information about self-determination for students with disabilities from specific courses. Surprisingly, only 25% of respondents had taken a course specific to self-determination, while 75% had not take any such course. Of the 25% of respondents who had taken courses related to self-determination, 36% indicated that they had taken the courses in a master's program, 24%

in a doctoral program, 16% in both doctoral and master's programs, 12% in an undergraduate program, and finally 12% in other programs.

Participants identified courses in which self-determination content was included (See Table 2). Sixty-nine of all respondents indicated they had taken a course while 30% had not. Of the 70% of all respondents who had, 31% indicated they had taken courses with information about self-determination in a doctoral program; 31% in a master's program; 17% in both doctoral and master's programs; 11% in undergraduate, master's, and doctoral programs, 6% in an undergraduate program, 3% in both master's and undergraduate programs, and 1% in other programs.

Research Question 2. From Which Sources Do They Obtain Information about Self-Determination?

Participants were asked to identify other sources by which they had gained information about self-determination (See Table 2). The source most frequently cited was newsletters/ articles/ books (53%). In descending order, the other sources were: conference presentations/ proceedings (47%); professional association (30%); in-service training on self-determination topics (20%); and other (8%). 28% of respondents indicated that they had not received information about self-determination from any source.

Research Question 3. Do Doctoral Students Have Adequate Knowledge about Self-Determination?

Participants responded to whether they had adequate knowledge of self-determination along a 4-point Likert-type scale (1=strongly disagree to 4=strongly agree) (See Table 3). For the definition of self-determination, 78% of respondents indicated they

strongly agreed or agreed, while 22% disagreed or strongly disagreed that they had adequate knowledge. The mean level of agreement was almost 3 ($M=2.92$, $SD=0.73$). Second, with regard to the components of self-determined behaviors, 70% of respondents indicated they strongly agreed or agreed with those disagreeing or strongly disagreeing at 30% ($M=2.84$, $SD=0.80$). Third, respondents indicated the level of their knowledge about self-determination assessment. Over half of respondents indicated that they disagreed or strongly disagreed (65%). The remaining 35% disagreed or strongly disagreed ($M=2.33$, $SD=0.74$). Fourth, regarding their knowledge about self-determination curricula, 68% disagreed or strongly disagreed, while 32% strongly agreed or agreed that they had adequate knowledge ($M=2.28$, $SD=0.77$). Finally, for the issues and trends in self-determination, 61% of doctoral students who responded to the question reported that they disagreed or strongly disagreed, while 39% strongly agreed or agreed ($M=2.41$, $SD=0.80$). In these research questions, the mean score of the first section, the definition of self-determination, was the highest, while the mean score of self-determination curricula was the lowest. This revealed that respondents were most familiar with the definition of self-determination and were most unfamiliar with the self-determination curricula.

Research Question 4. What are the Attitudes Doctoral Students toward Self-Determination?

Table 3 reports the doctoral students' general attitudes toward self-determination. This section included five separate questions. First, all participants were asked to determine their level of agreement with the statement, "self-determination is a very important focus in my special education program." Over half (52%) reported that they

strongly agreed or agreed, while 48% disagreed or strongly disagreed. The mean level of agreement was 2.57(SD=0.85). Second, when asked if participants believed self-determination was one of the most important skill sets acquired by students with disabilities, over 90% of respondents responded positively: 91% indicated that they strongly agreed or agreed, while only 9% disagreed or strongly disagreed (M=3.25, SD=0.64). Third, the question related to their abilities to integrate self-determination knowledge and skills into future teaching, respondents indicated the following: 90% strongly agreed or agreed; 10% disagreed or strongly disagreed (M=3.22, SD=0.65). In this section, over 90% of respondents also showed a positive attitude to the question. Fourth, all doctoral students completing the research were asked if they felt well prepared about self-determination in their future careers. Fifty-four percent of respondents indicated that they disagreed or strongly disagree, while 46% strongly agreed or disagreed (M=2.52, SD=0.82). Finally, in the question about whether doctoral students think a self-determination course should be required of all doctoral students. Almost 65% of respondents strongly agreed or agreed. On the other hand, 35% reported that they disagreed or strongly disagreed (M=2.86, SD=0.80).

Chapter V: Discussion

This study investigated doctoral special education students' perceptions of self-determination for students with disabilities. This chapter concludes the present study by summarizing the results. In addition, this chapter provides possible limitations that may have affected the outcomes of this study and provides suggestions for future research. The purpose of this study was to investigate special education doctoral students' perceptions of self-determination, as well as to identify knowledge of self-determination and general attitude toward self-determination that doctoral students have. This research also identified how they have obtained information about self-determination.

Respondent Characteristics

A majority (84%) of all respondents in this survey was female. The age range was a little over half (53%) of all respondents were between the age of 30 to 39. The special education doctoral students had a variety of focus areas such as, low incidence, high incidence, emotional/behavior disorder and applied behavior analysis. Therefore, the knowledge and attitudes about self-determination in this study would also be impacted by their focus in special education.

A large number of the doctoral students in this study indicated their future career plan was to have an academic appointment or to become faculty. Therefore, the special education doctoral students could be regarded as pre-faculty members in training teachers to become who might teach about self-determination. As stated in literature review, faculty in undergraduate or graduate teacher education programs should assist their students to improve their knowledge of self-determination (Nevin et al, 2002). Therefore, this survey

of special education doctoral students is helpful for improving teachers' instruction in self-determination.

Sources of Information about Self-Determination

Seventy percent of special education doctoral students indicated that they had not taken any course specific to self-determination, while only 27% of respondents had taken a course specific to self-determination. In other words, only a few doctoral students have taken a course specific to self-determination. That was similar to the result of the study by Thoma, Nathanson, et al. (2002) that teachers did not receive sufficient training about how to improve self-determination skills and did not have knowledge about it as part of undergraduate or graduate programs. Of the 27% of respondents who had taken courses related to self-determination, 24% indicated that they had taken the courses in a doctoral program, 36% in a master's program, 16% in both doctoral and master's programs, 12% in an undergraduate program, and finally 12% in other programs. This finding suggested that specific courses for self-determination were the most insufficient in undergraduate programs.

Special education doctoral students in this study indicated that they obtained information about self-determination through various sources such as in-service training, conference presentations, newsletters, articles, books, professional associations, and so on. The source most frequently cited was newsletters/ articles/ books. In addition, surprisingly, this study reported that 28% of doctoral students had not obtained information about self-determination.

Perceptions of Knowledge of Self-Determination

Wehmeyer (2006) defined self-determined behavior refers as volitional actions that enable one to act as the primary causal agent in one's life and to maintain or improve one's quality of life. Seventy percent of the special education doctoral students indicated they had adequate knowledge of the definitions of self-determination, while 22% of them disagreed or strongly disagreed that they had adequate knowledge. With regard to the components of self-determined behaviors, a majority of special education doctoral students (70%) indicated they had adequate knowledge of them. These findings were similar to previous research findings that about two-thirds of US special education doctoral students perceived that they had an adequate knowledge about the definitions and component elements of self-determined behaviors (Kim, in press). Although many researchers (Agran, et al., 1999; Thoma, Baker, et al., 2002; Wehmeyer et al., 2000) have asserted that teachers did not have sufficient knowledge of self-determination, the finding of this study indicated the high number of doctoral students indicated they understood the definition and components of self-determination.

On the other hand, their levels of knowledge in the areas of assessments, curricula, issues, and trends were significantly low. While researchers have demonstrated that self-determination skills have important effects on transition education of students with disabilities (Lachapelle et al., 2005, Hardre & Reeve 2003; Wehmeyer & Palmer, 2003; Sarver, 2000; Wehmeyer & Schwartz, 1997), unfortunately, over half of the doctoral students lacked knowledge about these areas of self-determination. These findings in this study were comparable to the study conducted by Kim (in press), which indicated that a high number of doctoral students did not have sufficient knowledge about self-

determination assessment and curricula. However, there was somewhat of a difference between this study and Kim (in press) in the knowledge of issues and trends in self-determination. This research reported that over 60% of the doctoral students reported having adequate knowledge of issues and trends in self-determination, while Kim's (in press) study indicated nearly 50% of doctoral students had adequate knowledge in this domain.

These results suggest that special education doctoral students as pre-faculty members in special education departments need to have more sufficient knowledge about self-determination such as assessment, curricula, issues and trends. In addition, these findings are related to previous research conducted by Nevin, Malian, and Williams (2002), who suggested that faculty in undergraduate or graduate teacher education programs should assist their students to improve their knowledge of self-determination.

The Attitudes of Doctoral Students toward Self-Determination

Research question four examined special education doctoral students' attitudes toward self-determination. There were five separate questions in this section. First, over half (52%) of respondents reported that self-determination was a very important focus in their special education program. The mean level of agreement was almost 2.57(SD=0.85). Second, over 90% of respondents answered positively (M=3.25, SD=0.64) that self-determination was one of the most important skill sets acquired by students with disabilities, with only 9% disagreed or strongly disagreed. Third, in the question related to their willingness to integrate self-determination knowledge and skills into future teaching, a high number (90%) of respondents indicated doctoral students strongly agreed or agreed

($M=3.22$, $SD=0.65$). Fourth, when all doctoral students were asked if they felt well prepared about self-determination in their future careers, 54% of respondents indicated that they disagreed or strongly disagree ($M=2.52$, $SD=0.82$). Finally, almost 65% of the doctoral students thought a self-determination course should be required of all doctoral students. ($M=2.86$, $SD=0.80$).

Consistent with previous studies that suggested that self-determination skills have an impact on successful education of students with disabilities, a majority of the doctoral students also believed that self-determination is one of the most important skill sets acquired by students with disabilities (Hardre & Reeve 2003; Wehmeyer & Palmer, 2003; Lachapelle et al., 2005; Wehmeyer, 2005). In addition, the result of this study indicated that they will integrate self-determination knowledge and skills into their future teaching. However, a high number of the respondents indicated self-determination was not a focus in their special education program and they reported that they were not well prepared in regards to self-determination for their future career. Moreover, 74% of them didn't think that a self-determination course should be required of all doctoral students. We need to know how they want to get the knowledge about self-determination and to be prepared to teach it because teachers should teach self-determination skills to students with disabilities and provide the opportunities to practice these skills (Browder et al., 2001).

According to Lachapelle et al. (2005), self-determination can have a significant effect on young adults with disabilities, leading to better outcomes in school and community and enabling them to live a quality life. Therefore, special education doctoral students as pre-faculty members of special education programs that train teachers of

students with disabilities should realize the importance of self-determination and be well prepared in regards to self-determination for their future career.

Limitations

Several limitations existed in this study that lessened the ability to generalize the findings. These limitations are related to the limited information of the representatives of the sample, the component of subscales for examining the knowledge of self-determination of doctoral students, and the characteristic of self-report data.

The first limitation of this study was about the sample of this study. The lack of information about the representation of the participants makes it difficult for the results to be generalized. Therefore, in order for the findings to become more reliable, a more representative sample of special education doctoral students is needed. In addition, because the resulting sample was a convenience sample, there was a limit to generalize the findings to the entire special education doctoral students.

Another limitation was that the area of knowledge of self-determination consisted only of definition, components, assessments, curricula, issues and trends. These subscales were too vague to examine the specific knowledge of self-determination of special education doctoral students. Therefore, in order to examine knowledge more exactly, subscales of knowledge of self-determination need to be detailed.

The third possible limitation related to this research was the survey was a self-report. Respondents were asked to indicate the level of their knowledge and their attitude of self-determination. Because of this, it is difficult to guarantee veracity of the results.

Future Research

Based on the findings of this study, there are several recommendations for future research. First, this research indicated that many special education doctoral students had not taken any course related to self-determination. In order for special education professionals such as university faculties, teachers, and so on to realize the importance of self-determination and to acquire knowledge about self-determination, it is necessary to study and develop curricula related to self-determination in the special education department.

An additional suggestion in this study is to develop models for teaching self-determination skills. As stated in the literature, many teachers have difficulty teaching self-determination to their students (Agran et al., 1999; Thoma, Nathanson, et al., 2002). Therefore, in order for them to effectively teach self-determination, research on models for teaching self-determination is needed.

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Tables

Table 1. *Respondents' Demographic Information*

Characteristics	N	(%)
Gender		
Female	81	(84.4%)
Male	15	(15.6%)
Age		
Skipped	3	
20 – 29	19	(20%)
30 – 39	50	(52.6%)
40 – 49	17	(17.9%)
50 and over	9	(9.5%)
Skipped	4	
Focus of Doctoral Program		
Low incidence	12	(12.6%)
High incidence	11	(11.6%)
Emotional disorder/behavior disorder	8	(8.4%)
Autism	8	(8.4%)
Teacher education	7	(7.4%)
Transition	6	(6.3%)
Early intervention	6	(6.3%)
Inclusive/collaboration/co-teaching	5	(5.3%)

Technology	4	(4.2%)
Minority/multicultural Education	3	(3.2%)
Family	2	(2.1%)
Deaf education	2	(2.1%)
Visual impairment	2	(2.1%)
Self-determination	2	(2.1%)
ABA/PBIS	2	(2.1%)
Secondary special education	1	(1.1%)
Combination programs	5	(5.3%)
Other ^a	9	(9.5%)
Skipped	4	

Age level of the students who doctoral students are interested in

Early childhood	11	(11.5%)
Elementary	26	(27.1%)
Both Early childhood and Elementary	17	(17.7%)
Secondary	34	(35.4%)
Youth, primarily adults	8	(8.3%)
Skipped	3	

Career Plan

Academic appointment/faculty	73	(76.8%)
Higher education administration	4	(4.2%)

Early childhood/elementary/secondary administration	2	(2.1%)
Early childhood/elementary/secondary teaching	2	(2.1%)
Other ^b	2	(2.1%)
Not sure	12	(12.6%)
Skipped	4	
<hr/>		
Have taught in public school		
<hr/>		
Yes	86	(89.6%)
No	10	(10.4%)
Skipped	3	
If yes, how many years		
1 to 5	32	(38.6%)
6 to 10	28	(33.7%)
11 to 15	14	(16.9%)
16 to 20	5	(6.0%)
20 and over	4	(4.8%)
Age level of the students		
Early childhood	6	(7.2%)
Elementary	30	(36.1%)
Both early childhood and Elementary	16	(19.3%)
Secondary	31	(37.3%)
The disabilities of the students		
High incidence (LD, ED, SLP, HFASD, and OHI)	43	(51.8%)

Low incidence/intellectual disabilities (including MR, DD, and TOI)	22	(26.5%)
Autism	7	(8.4%)
Visual impairments	2	(2.4%)
Deaf and hard of hearing	1	(1.2%)
All levels/cross-categorical/various	7	(8.4%)
General education	1	(1.2%)
Professional role		
Special education teacher	31	(37.3%)
General education teacher	30	(36.1%)
Both general and special education teacher	3	(3.6%)
Both general education teacher and behavior specialist	3	(3.6%)
Behavior specialist	2	(2.4%)
Both special education teacher and behavior specialist	2	(2.4%)
Transition coordinator	2	(2.4%)
Early interventionist	2	(2.4%)
Para-professional	1	(1.2%)
Special education coordinator	1	(1.2%)
Other ^c	6	(7.2%)

Note. ^a Others include: a) Early literacy/Diverse Learners; b) Leadership, literacy, and secondary school reform; c) writing instruction; d) Response to Intervention (RTI); e) Mathematics; f) Research intensive; and g) Test and Measurement.

^b Others include assessment/program streaming and teacher training.

^c Others include instructor, case manager, science educator, speech/language pathologist, and gifted educator.

Table 2. *Source of Training Self-Determination*

Taken a course specific to self-determination		
	N	(%)
No	68	(73.1%)
Yes	25	(26.9%)
Doctoral courses	6	(24%)
Master's courses	9	(36%)
Undergraduate courses	3	(12%)
Doctoral and master's courses	4	(16%)
Other ^a	3	(12%)
skipped	6	
Taken a course in which self-determination content was partially covered		
No	28	(30.1%)
Yes	65	(69.9%)
Doctoral courses	20	(30.8%)
Master's courses	20	(30.8%)
Undergraduate courses	4	(6.1%)
Doctoral and master's courses	11	(16.9%)
Master's and undergraduate courses	2	(3.1%)
Doctoral, master's and undergraduate courses	7	(10.8%)
Other	1	(1.5%)

Skipped	6	
<hr/>		
Received self-determination content from other sources ^b		
<hr/>		
In-service training on self-determination topics	19	(20.4%)
Conference presentations/proceedings	44	(47.3%)
Newsletters/articles/books	49	(52.7%)
Professional association	28	(39.1%)
Other ^c	7	(7.5%)
No	26	(28.0%)
Skipped	6	

Note. ^a Others include a training seminar, independent study during master's, and a professional writing course where self-determination was the primary topic of writing.

^b The total of the source of training self-determination is not equal to 99 because some doctoral students have gained information on self-determination more than one source (the total of percentage is also larger than 100%).

^c Others include correspondence, doctoral research, Foster care emancipation/self-determination, Journal Articles, websites, Discussions with university faculty, Research projects, and colleagues

Table 3. *Doctoral Students' Perceptions of Self-Determination*

Adequate knowledge of self-determination	<i>Response Scale^a</i>				N	Mean	SD
	1	2	3	4			
Definitions of self-determination	4.3% (4)	17.2% (16)	60.2% (56)	18.3% (17)	93	2.92	0.73
Components of self-determined behaviors	5.4% (5)	24.7% (23)	50.5% (47)	19.4% (18)	93	2.84	0.80
Self-determination assessments	9.9% (9)	54.9% (50)	27.5% (25)	7.7% (7)	91	2.33	0.74
Self-determination curricula	11.8% (11)	55.9% (52)	24.7% (23)	7.5% (7)	93	2.28	0.77
Issues and trends in self-determination	8.7% (8)	52.2% (48)	28.3% (26)	10.9% (10)	92	2.41	0.80
Skipped					6		

General attitudes toward self-determination	<i>Response Scale</i>				N	Mean	SD
	1	2	3	4			
Self-determination is a very important focus in my special education program.	9.7% (9)	37.6% (35)	38.7% (36)	14.0% (13)	93	2.57	0.85
I believe that self-determination is one of the most important skill sets acquired by students with disabilities.	1.1% (1)	7.5% (7)	57.0% (53)	34.4% (32)	93	3.25	0.64

I will integrate self-determination knowledge and skills into my future teaching.	1.1% (1)	8.8% (8)	57.1% (52)	33.0% (30)	91	3.22	0.65
I feel I am well prepared about self-determination for my future career.	7.5% (7)	46.2% (43)	33.3% (31)	12.9% (12)	93	2.52	0.82
I think a self-determination course should be required of all doctoral students	2.2% (2)	33.3% (31)	40.9% (38)	23.7% (22)	93	2.86	0.80
Skipped					6		

Note. ^a 4-point Likert scale (1=strongly disagree, 4=strongly agree)

Appendix

Survey of Doctoral Students' Perceptions of Self-Determination

Survey of Doctoral Students' Perceptions of Self-Determination

Internet Information Statement

The Department of Special Education at the University of Kansas supports the practice of protection for human subjects participating in research. The following information is provided for you to decide whether you wish to participate in the present study. You should be aware that even if you agree to participate, you are free to withdraw at any time without penalty.

We are conducting this study to better understand the perceptions of doctoral students in special education who are preparing to be teacher educators within high education. The purpose of this study is to investigate the perceptions of doctoral students related to their knowledge of and perceptions about self-determination for students with disabilities. The role of higher education faculty to prepare classroom special educators who provide educational services to students with disabilities and their families regarding self-determination is believed to be an important link to outcomes for students with disabilities. If teacher education programs intend to prepare special educators with knowledge of self-determination, then future higher education faculty must have similar knowledge and skills. This study will investigate special education doctoral students' perceptions of their knowledge of self-determination and general attitudes towards self-determination which will affect the knowledge and skills teachers obtain in professional preparation programs.

This will entail your completion of the online questionnaire. The questionnaire packet is expected to take approximately 10 minutes to complete. The content of the questionnaires should cause no more discomfort than you would experience in your everyday life. Although participation may not benefit you directly, we believe that the information obtained from this study will help us gain a better understanding of the knowledge and skills of future teacher educators related to self-determination for students with disabilities. Your participation is solicited, although strictly voluntary. Your name will not be associated in any way with the research findings. It is possible, however, with internet communications, that through intent or accident someone other than the intended recipient may see your response.

If you would like additional information concerning this study before or after it is completed, please feel free to contact us by phone or mail.

Completion of the survey indicates your willingness to participate in this project and that you are at least age eighteen. If you have any additional questions about your rights as a research participant, you may call (785) 864-7429, write the Human Subjects Committee

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1. I agree to Participate in this Study

- Yes, I agree to participate
- No, I do not want to participate

2. Your gender?

- Male
- Female

3. What is your age?

- 20 – 29
- 30 – 39
- 40 – 49
- 50 and over

4. What is the focus of your doctoral program in Special Education?

5. What age level are the students who you are interested in?

- Early childhood
- Elementary
- Both Early childhood and Elementary
- Secondary
- youth, primarily adults

6. What is your career plan? (Check only one)

- Academic appointment/Faculty
- Higher education administration
- Other research/Analysis
- Early childhood/Elementary/Secondary administration
- Early childhood/Elementary/Secondary teaching
- Government/Administration
- Government/Policy analysis
- Non-Profit Employment
- Not sure

Other

(please specify)

7. Have you taught in public school?

- 1. Yes
- 2. No

If no, please jump to question 12

8. How many years have been teaching?

9. What age level were the students you served?

- Early childhood
- Elementary
- Both Early childhood and Elementary
- Secondary
- youth and primarily adults

10. What were the disabilities of the students you served?

11. What was your professional role?

12. Have you taken a course specific to self-determination? (Multiple answers)

- 1. Doctoral courses
- 2. Master's courses
- 3. Undergraduate courses
- 4. No
- 5. Other

(please specify)

13. Have you taken a course in which self-determination content was partially covered? (Multiple answers)

- 1. Doctoral courses
- 2. Master's courses
- 3. Undergraduate courses
- 4. No
- 5. Other

(please specify)

14. Have you received self-determination content from other sources? (Multiple Answers)

- 1. In-service training on self-determination topics
- 2. Conference presentations/ proceedings
- 3. Newsletters/ articles/ Books
- 4. Professional association
- 5. No
- 6. Other

(please specify)

15. I have adequate knowledge of

	Strongly disagree	Disagree	Agree	Strongly agree
a. Definitions of self-determination	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
b. Components of self-determined behaviors	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
c. Self-determination assessments	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
d. self-determination curricula	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
e. Issues and trends in self-determination	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree

16. Please answer the questions.

	Strongly disagree	Disagree	Agree	Strongly agree
a. Self-determination is a very important focus in my special education program.	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
b. I believe that self-determination is one of the most important skill sets acquired by students with disabilities.	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
c. I will integrate self-determination knowledge and	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree

	Strongly disagree	Disagree	Agree	Strongly agree
skills into my future teaching.				
d. I feel I am well prepared about self-determination for my future career.	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree
E. I think a self-determination course should be required of all doctoral students.	<input type="radio"/> Strongly disagree	<input type="radio"/> Disagree	<input type="radio"/> Agree	<input type="radio"/> Strongly agree