

Guest Editorial

Self-determination, vocational rehabilitation, and workplace supports

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Abstract. This article introduces the special issue on self-determination and vocational rehabilitation by defining the self-determination construct and examining its relevance to vocational rehabilitation services.

Keywords: Self-determination, vocational rehabilitation, choice making, workplace supports

1. Introduction

The findings of Congress [Section 2 (29 U.S.C. 701)] from the 1992 Amendments to the Rehabilitation Act (and in subsequent reauthorizations) stated:

- 1) millions of Americans have one or more physical or mental disability and the number of Americans with disabilities is increasing;
- 2) individuals with disabilities constitute one of the most disadvantaged groups in society;
- 3) disability is a natural part of the human experience and in no way diminishes the right of individuals to:
 - a) live independently;
 - b) *enjoy self-determination*;
 - c) *make choices*;
 - d) contribute to society;
 - e) pursue meaningful careers; and
 - f) enjoy full inclusion and integration in the economic, political, social, cultural and educational mainstream of American society;

and (later in the section):

- 6) the goals of the nation properly include the goal of providing individuals with disabilities the tools necessary to:
 - a) *make informed choices and decisions*; and
 - b) achieve equality of opportunity, full inclusion and integration into society, employment, independent living and economic and social self-sufficiency, for such individuals (*italics added*).

The 1998 amendments to the State Vocational Rehabilitation Services Program Act further strengthened and emphasized the centrality of informed choice in the rehabilitation process. Indeed, readers of the *Journal of Vocational Rehabilitation* know there is a national trend toward residential and vocational services that are delivered in a more consumer-driven manner [1,6,13]. If, however, VR consumers are to benefit from these new ways of doing business, there is a need to address research and practice issues pertaining to promoting and enhancing self-determination. An issue of *JVR* in 1995 [12] introduced the concept of self-determination to readers of the journal. This issue provides research demonstrating the impact of practices to promote self-determination for VR consumers and overviews policy and practice issues.

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2. What is self-determination?

Put most simply, the self-determination construct refers to both the right and capacity of people to exert control over and direct their lives. The construct's use in reference to a right is grounded in its meaning referring the political right of people or peoples to self-governance. Disability advocates and activists have stressed the inherent right of people with disabilities to assume responsibility for and control over their lives [5, 8]. In the 1990s, promoting and enhancing the self-determination of students with disabilities, particularly as a function of the transition planning process, became best practice [9]. These efforts focused primarily on enhancing student capacity to become self-determined and exert control in one's life by promoting goal setting, problem solving, decision making and self-advocacy skills and focusing on efforts to promote opportunities for students to use these skills.

A variety of definitions of the construct have emerged from efforts in special education (see [3,9]). Field et al. [3] summarized these various definitions of self-determination by stating that self-determined people apply "a combination of skills, knowledge and beliefs" that enable them "to engage in goal-directed, self-regulated, autonomous behavior. An understanding of one's strengths and limitations together with a belief in oneself as capable and effective are essential in self-determination. When acting on the basis of these skills and attitudes, individuals have greater ability to take control of their lives and assume the role of successful adults in our society" (p. 2). Field et al. [3] further delineated the common components of self-determined behavior identified across multiple self-determination models or frameworks. These include (a) awareness of personal preferences, interests, strengths, and limitations; (b) ability to (i) differentiate between wants and needs, (ii) make choices based on preferences, interests, wants, and needs, (iii) consider multiple options and anticipate consequences for decisions, (iv) initiate and take action when needed, (v) evaluate decisions based on the outcomes of previous decision and revise future decisions accordingly, (vi) set and work toward goals, (vii) regulate behavior, (viii) use communication skills such as negotiation, compromise, and persuasion to reach goals, (ix) assume responsibility for actions and decisions; (c) skills for problem-solving; (d) a striving for independence while recognizing interdependence with others; (e) self-advocacy and self-evaluation skills; (f) independent performance and adjustment skills, (g) persistence; (h) self-confidence; (i) pride; and (j) creativity.

3. Is self-determination important for VR consumers?

There are several indicators to suggest that the answer to this question is 'yes'. First, as mentioned previously, promoting choice and self-determination is mandated by federal disability policy and legislation. Second, people with disabilities have been unequivocal in their demands for enhanced self-determination [5,8]. Third, there is compelling evidence from the special education literature that enhanced self-determination leads to more positive adult outcomes. Wehmeyer and Schwartz [11] measured the self-determination status of 80 students with mild mental retardation or learning disabilities in their final year of high school and then one year after high school. Students with higher self-determination scores were more likely to have expressed a preference to live outside the family home, have a savings or checking account, and be employed for pay. Eighty percent of students in the high self-determination group worked for pay one year after graduation, while only 43% of students in the low self-determination group did likewise. Among school-leavers who were employed, youth who were in the high self-determination group earned significantly more per hour ($M = \$4.26$) than their peers in the low self-determination group ($M = \$1.93$).

Wehmeyer and Palmer [10] conducted a second follow-up study, examining the adult status of 94 young people with cognitive disabilities (mental retardation or learning disability) one and three years post-graduation. These data replicated results from Wehmeyer and Schwartz [11]. Sowers and Powers [7] showed that instruction on multiple components related to self-determination increased the participation and independence of students with severe disabilities in performing community activities.

Finally, there is a growing body of evidence in the field of vocational rehabilitation that, in particular, enhancing choice opportunities leads to better VR-related outcomes. For example, Farley et al. [2] evaluated the impact of strategies to enhance consumer choice and involvement in the VR process, and found that consumers who were actively involved in VR planning enhanced vocational career development outcomes. Similarly, Hartnett et al. [4] compared costs, services received and outcomes achieved for people served through the typical VR system and people involved in a "Consumer Choice Demonstration Project" in Vermont. They found that the *Choice* group was two times more likely

to have completed rehabilitation and their mean income was 2.7 times higher.

It appears, then, that there are more than just compliance-related reasons to focus on promoting self-determination among vocational rehabilitation consumers. This issue of *JVR* extends the literature base pertaining to self-determination and vocational rehabilitation. It is our hope that this will both heighten awareness of the construct among professionals in vocational rehabilitation and stimulate research and model development to achieve the intent of the VR Act with regard to self-determination and consumer choice.

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