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Adolescents with disabilities: the development of life skills through occupational therapy

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Adolescents with Disabilities: The Development of Life Skills through Occupational Therapy

By

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Submitted to the Occupational Therapy Department
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for the degree of
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Approval Page

This Scholarly Project Paper, submitted by Diane Magnuson, MOTS and Courtney Mohler, MOTS in partial fulfillment of the requirement for the Degree of Master’s of Occupational Therapy from the University of North Dakota, has been read by the Faculty Advisor under whom the work has been done and is hereby approved.

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Faculty Advisor

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PERMISSION

Title: Adolescents with Disabilities: The Development of Life Skills through Occupational Therapy

Department: Occupational Therapy

Degree: Master’s of Occupational Therapy

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Courtney
ABSTRACT

Purpose: The purpose of this scholarly project was to create a workshop for occupational therapists (OTs) who work with adolescents as they transition from high school to adulthood focusing on life skill development.

Methodology: An Internet search was completed to determine the current role of OT in the transition process and the needs of adolescents as they transition to adulthood. Information was obtained from the following databases: PubMed, PsychInfo, SCOPUS, and Cumulative Index to Nursing and Allied Health Literature (CINAHL). Resources included professional journals, scholarly text books, and government websites. The literature review also included information on the Ecology of Human Performance Model and Knowles Adult Learning theory to guide the development of this scholarly project.

Results: Adolescents with disabilities have more difficulty developing adult life skills in the areas of social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence. As an IEP team member, OTs have unique knowledge and skills to facilitate the transition process, increase adolescent independence and participation in meaningful occupations. This scholarly project includes a workshop and resource manual based on a theoretical foundation and evidence-based research to support the role expansion of occupational therapy in transitional programs.

Conclusions: In conclusion, it is recommended that occupational therapists expand their existing role in the transition process to include life skills development of adolescents. It is likely that this workshop will facilitate this role expansion by providing an opportunity for discussion, problem solving, idea sharing, learning about related legislation and research. It is expected that this workshop will be implemented in public school settings by the year 2012. Continued research is needed in the area of life skill development for adolescents with a disability who are in the process of transitioning to adulthood to continue to expand this workshop.
CHAPTER I

INTRODUCTION

Currently, adolescents with disabilities are not successfully transitioning from high school to adulthood. Adolescents with disabilities have more difficulty developing adult life skills such as: social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence (US Department of Health and Human Services, 2004).

Occupational therapy (OT) has the qualifications to help adolescents with disabilities develop these adult life skills in transitional programs, yet OT is not typically involved in these programs. Spencer, Emery & Schneck (2003), found that only five to eight percent of occupational therapists (OTs) provided community-based transition services and only one-fifth of high school transition services are provided by OTs (Spencer, Emery & Schneck, 2003).

Expanding the role of OT in the transition process may support enhancement of life skill development in adolescents and young adults with disabilities. The American Occupational Therapy Association (AOTA) indicates that OTs work collaboratively with special education personnel, parents and other team members to meet student goals and address plans for the future (2008b). OTs have unique skills and knowledge to provide transition services for adolescents with disabilities as they enter adult life.
The Ecology of Human Performance Model has been chosen to guide this scholarly project because of its ability to describe the role of occupational therapy within a multidisciplinary setting. The focus of this client-centered model is not on the disability of the student, but on how to accommodate the student’s individual skills and abilities into the community through modification of various contexts (Cole & Tufano, 2008).

Research indicates a significant need for increased services during the transition process. To address this need, a workshop was created specifically for occupational therapists to define and expand their role in transition services. It is the intention of these authors to engage the workshop participants in an active learning process utilizing adult learning principles (Berkeland & Flinn, 2005; Fink, 2003; Knowles, 1980). This will occur through sharing experiences and reflecting on previous experiences relating to adolescents with disabilities and the role of OT in the transition process (Fink, 2003).

The following chapters will describe the scholarly project in detail. Chapter two will describe problems related to legislation, effective interventions related to the problems currently experienced by adolescents with disabilities transitioning from high school to adulthood. Chapter three will describe how the literature and models guided decision making for this scholarly project. In order to address these problems, a workshop was created and will be defined in detail in chapter four. Chapter five consists of a summary of the entire scholarly project.
CHAPTER II
LITERATURE REVIEW

Introduction

Currently, adolescents with disabilities are not successfully transitioning from high school to adulthood. According to the United States Department of Health and Human Services (2005), adolescents with disabilities have more difficulty developing adult life skills such as: social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence which were individually researched to discover specific challenges. Occupational therapy (OT) has the qualifications to help adolescents with disabilities develop these adult life skills in transitional programs, yet OT is not typically involved in these programs. Spencer, Emery & Schneck (2003), found that only five to eight percent of occupational therapists (OTs) provided community-based transition services and only one-fifth of high school transition services are provided by OTs (Spencer, Emery & Schneck, 2003). This literature review will present evidence that describes the problems, legislative mandates, and programming related to life skill development in adolescents with disabilities in order to inform development of this scholarly project.

Problems
Social skills. Social skill development is a problem often experienced in adolescents as they transition into adulthood. Transitional periods are considered marked events that initiate a serious life change. It is expected that individuals going through stages of transition display competence in all aspects of transition; this includes the social changes that occur during a transitional period that will continue throughout the individual’s life (Davis, 2003). Specific areas of importance to adolescent biopsychosocial development are cognition, identity formation, social skills, and sexual development (Davis, 2003). Adolescence is characterized by the yearning for independence and the increased dependence on support systems among peers (Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007). There is a significant risk of social isolation if appropriate social skills are not developed during adolescence or young adulthood. The National Association of School Psychologists (NASP) defines consequences associated with poor development of social skills as the following: depression, anxiety, difficulty with personal relationships (family, program team, and peers), peer rejection, and an increased risk of juvenile delinquency (2002). When adolescents demonstrate and utilize appropriate social skills, they also experience secondary benefits such as anger management, problem solving, peer negotiation, listening, communication skills, peer negotiation, and peer acceptance (NASP, 2002).

Community involvement. A lack of community involvement was a second area identified by the Department of Health and Human resources as a problem for young adults with disabilities. The Kaiser Public Opinion Spotlight
(2004) reported that 82% of Americans perceived the quality of life for people with a disability had improved over the past 50 years; however, when asked about the level of influence in society, 60% of Americans stated that people with disabilities do not have enough influence (Kaiser Public Opinion Spotlight, 2004). Furthermore, 24.9% of individuals with disabilities living in the community between the ages of 16 – 64 live in poverty (Annual Disability Statistics Compendium, 2009). In contrast, individuals without a disability have a 10% poverty rate (Annual Disability Statistics Compendium, 2009). Bramston, Chipuer and Pretty (2005) measured quality of life for study participants ranging in age from 17 – 25 years old. The collected data was compared between two samples, people with a disability and without a disability. Results of this study indicated that people with a disability rated their overall health higher than nondisabled peers; however, community involvement and intimacy ratings were lower when compared to their nondisabled peers (Bramston, Chipuer, & Pretty, 2005). Results from the National Longitudinal Transition Study 2 (2005) indicated that 69% of high school graduates are not active in community groups and 70% do not volunteer or engage in community service activities. These statistics highlight the need for increased community involvement for adolescents with disabilities.

**Employment.** Finding employment is a serious problem experienced in adults with disabilities. Nearly 70% of individuals between ages 18 and 65 with a disability are unemployed (Dick & Golshani, 2008). Furthermore, over 40% of these unemployed individuals would be able to participate in gainful employment
with reasonable accommodations (Dick & Golshani, 2008). The Social Security Income (SSI) Annual Statistic Report (2009) indicated that over seven and one-half million individuals received SSI payments in December 2009. In addition, 85% of these people were eligible for SSI payments based on their disability and 60% of SSI recipients are diagnosed with a mental disorder (SSI Annual Report, 2009). Additionally, just over five percent of individuals receiving SSI, about 340,000, were employed in December 2009 (SSI Annual Report, 2009). Yet, over 57% of individual receiving SSI have no additional income (SSI Annual Report, 2009). Despite factors regarding age, gender, and personal debt, there is a positive correlation between depression and unemployment (Meltzer, Bebbington, Brugha, Jenkins, McManus, & Stansfeld, 2010). Some adolescents with a disability identify employment as a priority post graduation, while others identify postsecondary education that leads to employment as their priority area. Despite employment being a priority, unemployment is still a dominating problem experienced in adolescents who are transitioning into adulthood.

**Postsecondary education.** As mentioned above, postsecondary education is also a serious issue for adults with disabilities. Annual Disability Statistics Compendium (2009) reported that 42% of students with a disability earned a high school diploma or equivalent and 22% had some college experience and seven percent of youth with disabilities earned a bachelor’s degree or higher. The National Longitudinal Transition Study 2 (NLTS2) reported that 27% of high school graduates, with a disability, enrolled in a two-year or community college, while one in eight high school graduates, with a disability enrolled in a four-year
college degree (2005). However, 28% of youth with disabilities did not complete high school (NLTS2, 2005; Annual Disability Statistics Compendium, 2009).

The National Center on Secondary Education and Transition reported that youth with a disability are, on average, most at risk for leaving school early (Lehr, Johnson, Bremer, Cosio & Thompson, 2004). The higher drop-out rate among young adults with disabilities results in a lower socioeconomic affiliation, making it more difficult to access resources for living, such as housing.

**Housing.** Accessibility to affordable housing and discrimination are problems that arise for people with disabilities as they transition to adulthood. Cooper, Korman, O’Hara, & Zovistoski, (2009) completed a study entitled Priced Out which is an annual study that was completed by the Technical Assistance Collaborative, Inc. (TAC) and the Consortium for Citizens with Disabilities (CCD). This study examined housing for people with disabilities. Results of Priced Out (2009) indicated that it is impossible for a person with a disability, who receives SSI payments, to rent a basic apartment in the United States. SSI payments, in 2008, averaged $668.00 monthly or $8,016.00 annually; which is 30% below the federal poverty rate. The average rent for a one bedroom apartment is $749.00, which is an increase of 62% from the first Priced Out study in 1998. Federal housing guidelines state that housing costs should reflect no more than 30% of monthly expenses. If this guideline were applied to the average SSI payment, housing costs would be $191.00 a month. Currently, about 4.2 million adults with disabilities utilize their SSI money to cover basic needs. The average amount of SSI money is less than the average cost for rent without any
money remaining to cover other expenses such as food, clothing and transportation. The effects of inaccessibility of affordable housing for people with disabilities are far reaching.

As a result of lack of affordable housing, homelessness for individuals with a disability is on the rise. An increase in homelessness for individuals with mental illness began during the 1980’s with the decrease in supportive housing and services (National Coalition for the Homeless, 2009). The Status Report on Hunger and Homelessness (2008) in America’s Cities provided additional evidence to support the need for affordable housing. This report documented the results of a survey from 23 different American cities regarding local services designed for people who are homeless as well as emergency food assistance programs (US Conference of Mayors, 2008). More affordable and assessable housing for individuals with a disability was identified by 72% of participants as a need in order to decrease homelessness (US Conference of Mayors, 2008). Additionally, results of the survey indicate that 26% of the homeless population have a serious mental illness, while only six percent of the general population in the United States have a serious mental illness (US Conference of Mayors, 2008). Mental illness was identified as the cause of homelessness for 12% of families and 48% of single adults (U.S. Conference of Mayors, 2008).

Just as homelessness is a problem, so is nursing home admission among young adults with disabilities. Priced Out (2008) reported that more than 420,000 individuals with a disability under the age of 65 live in nursing homes because of a lack of affordable housing. Hundreds of thousands of other people
with a disability are unable to live within their community and are forced to remain in institutionalized care such as mental hospitals and Intermediate Care Facilities for the Mentally Retarded (Cooper, Korman, O’Hara, & Zovistoski, 2009).

**Discrimination.** Along with a lack of affordable housing, a second significant barrier to independent living for adults with disabilities is discrimination. Turner, Herbig, Kaye, Fenderson & Levy (2005) compared the treatment of people who are deaf and people who use a wheelchair, to the treatment of non-disabled persons as they experienced the process of renting an apartment in the Chicago area. Specifically, the focus of this study was to examine the level of discrimination and accessibility of housing options for people using a wheelchair and for people who are deaf. The findings indicated that people with disabilities encountered significant levels of adverse treatment as they searched for housing in the Chicago area. Participants who were deaf used the teletype writer (TTY) system to request information from housing providers concerning available housing. One in four of their calls were refused by housing providers. When the calls were accepted, people using the TTY system received significantly less information regarding the application process than non-disabled customers. They were also less likely to receive a follow-up call from the housing provider. Participants who used a wheelchair experienced significant levels of discrimination when looking for available housing. They were told about a fewer number of available units and were denied opportunities to look at units (Turner et al., 2005).
In addition to the participants who were deaf, people who use a wheelchair received less information about the application process. The Kaiser Public Opinion Spotlight (2004) surveyed Americans views of people with a disability. This survey indicated that 30% of Americans reported discrimination and prejudice towards people with disabilities and 56% reported the government is not doing enough to protect these individuals.

**Parental Dependence.** As young adults experience discrimination, they often develop excessive parental dependence. During the transition process, it is important for parents and caregivers to be involved during the transition process. Parents and caregivers can be of vital importance in areas of accommodations, support, and funding while creating a transition plan. While adolescents are transitioning to adulthood, it is important for parents or caregivers to help facilitate the process allowing the young adult to transition from living at home to living in an independent/semi-independent setting. Excessive parental or caregiver support can result in impaired life skill development (Davis, 2003).

Literature has unveiled multiple problems related to life skill development in young adults. This problems are especially recognized in areas of social skills, community involvement, employment, postsecondary education, housing and parental dependence (US Department of Health and Human Services, 2005). As the literature noted, each problem can adversely affect another problem area. To further understand how to address these problems, it is important to look toward legislative mandates to reveal how society is trying to address these problems.

**Legislative Mandates**
**Americans with Disabilities Act of 1990.** The Americans with Disabilities Act (ADA) of 1990 prohibits discrimination towards people with a disability in the areas of public accommodations, state and local government services transportation, telecommunications, and employment (U.S. Department of Justice, 2005). ADA outlines the requirements in each of the above areas and prohibits exclusion, segregation and unequal treatment.

Public accommodations, Title III of ADA, states that existing barriers must be removed, unless the expense is too great, and reasonable accommodations must be provided to allow people with disabilities access to public accommodations (US Department of Justice, 2005). New buildings must be built to comply with ADA regulations. Additionally, professional and educational access must be offered to people with a disability (US Department of Justice, 2005).

ADA Title II guarantees reasonable access to all public services. These services may include, but are not limited to access to recreational activities, health care, voting and social services (US Department of Justice, 2005). Also included under Title II are public transportation services. These services are required to provide access for individuals with a disability. If a person with a disability is unable to utilize regular public transportation services, then paratransit services must be provided for individuals if economically possible (US Department of Justice, 2005). Finally, Title IV of ADA mandates access to television and telephone for people with speech and hearing disabilities.
ADA relates to this scholarly project by defining regulations prohibiting discrimination against people with disabilities. In addition, it protects their rights as citizens to access public services and buildings, such as the public school system. It is important for OTs to know and understand the law in order to meet the needs of students.

**Section 504 of the Rehabilitation Act of 1973.** Section 504 of the Rehabilitation Act of 1973 provides and protects individuals with disabilities that participate in programming that receive Federal funding typically from the U.S. Department of Education (US Department of Education, 2009). Individuals classified as having a disability within the school district’s jurisdiction qualify for mandates under Section 504 regardless of severity of the disability. Individuals protected under Section 504 must qualify for the following: a physical and/or mental limitation that impairs at least one significant life activity, have record of this impairment, or be regarded as having this impairment (US Department of Education, 2009). Under Section 504, all individuals that qualify as having a disability and participating in school programming that receive Federal financial assistance are entitled to a “free appropriate public education” (US Department of Education, 2009). Accommodations may be applied to regular education classrooms, special education classrooms, special education services and supplementary services under Section 504. Section 504 will continue through individuals’ lifespan protecting their rights regarding education, employment, and access to transportation/buildings (LD OnLine, 2010).
Individuals with Disabilities Improvement Act of 2004 (IDEA). The Individuals with Disabilities Improvement Act of 2004 (IDEA) states that special education and related services must prepare students for adult life following secondary education. Transition services are utilized to facilitate this life change and are mandated to begin the planning stage at age 14 and the execution stage at age 16 (IDEA, 2004). Transition services are defined under IDEA (2004) as the following:

- 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. (§602(34))

Based on this definition, transition services address all of the areas in which many adolescents experience difficulty after leaving the public school system.
**Fair Housing Act of 1968.** Additional legislation that prohibits discrimination is the Fair Housing Act (1968) which addresses selling or renting housing. This legislation was amended in 1988 and prohibits housing discrimination based on national origin, race, color, family status, religion, sex or disability (US Department of Justice, 2005). Additionally, landlords are required to provide reasonable accommodations for renters (US Department of Justice, 2005).

Although legislation mandates the implementation of transitional services, statistics indicate that individuals with disabilities in the transitional process from high school to adult life are not receiving the services as mandated by current legislation. The problems experienced in young adults with disabilities serve as evidence that this population is underserved. Students with disabilities would benefit from OT in order to facilitate development of life skills that support the successful transition into adult life.

**Transitional Programs**

King, Baldwin, Currie, and Evans (2005) defined transition programs as a time of role change and development. Transition services refer to programs and supports developed to assist youth and their families adapt to major, but normative, transitions (King, Baldwin, Currie, Evans, 2006). An example of this is transition from adolescence to the adulthood. The development of transition programs are a result of the reauthorization of IDEA (IDEA, 2004). Transitional programs address the individual needs as determined by the Individual Education Plan (IEP) team. The IEP team is made up of the student, parent/guardian, special
education teacher and other related professionals. Transition programs are offered through school systems, located either in schools or in another designated location. These services help young adults develop life skills related to employment, secondary education, housing, social skill development and community involvement.

**Role of the OT in Transition Programs**

Expanding the role of OT in the transition process may support enhancement of life skill development in adolescents and young adults with disabilities. OTs are a part of the educational team within the school system. The American Occupational Therapy Association (AOTA) indicates that OTs work collaboratively with the special education personnel, parents and other team members to meet student goals and address plans for the future (2008b). The AOTA (2008b) provides a sample of skilled interventions the OT could provide throughout the transition process. For example, the OT could conduct assessments, provide intervention, and collaborate with the Individual Education Plan (IEP) team to develop an appropriate transition program. The OT works both directly with the student and also as a part of the team. OTs have unique skills and knowledge to provide transition services for adolescents with disabilities as they enter adult life.

The Occupational Therapy Practice Framework was created in order to guide and regulate the scope of practice among OT personnel (AOTA, 2008a). The general role of OT in the Occupational Therapy Practice Framework is defined as, “supporting health and participation in life through engagement in
occupation” (AOTA, 2008, p. 626). The term occupation is defined by the AOTA (2008a) as an activity an individual engages in throughout his or her daily life. In the field of OT, there are eight areas of occupational that are addressed by OT in order to holistically treat each individual’s specific needs. These occupations include activities of daily living (ADLs), instrumental activities daily living (IADLs), rest and sleep, education, work, play, leisure, and social participation (AOTA, 2008a). Activities of daily living include but are not limited to bathing/showering, bowel and bladder management, dressing, eating, feeding, functional mobility, personal device care, personal hygiene and grooming, sexual activity and toilet hygiene (AOTA, 2008a). Instrumental activities of daily living include the ability to care for others, care of pets, child rearing, communication management, community mobility, financial management, health management and maintenance, home establishment and management, meal preparation and cleanup, religious observance, safety and emergency maintenance, and shopping (AOTA, 2008a).

Rest and sleep are also areas of occupation addressed by the OT Practice Framework (AOTA, 2008a). The aspects of sleep and rest that an OT would consider are the actual process of rest/sleep, sleep preparation, and sleep participation (AOTA, 2008a). Educational aspects of OT include formal educational participation, informal personal educational needs or interest exploration, and informal personal education participation (AOTA, 2008a). The area of occupation of work includes employment interests and pursuits,
employment seeking and acquisition, job performance, retirement preparation and adjustment, volunteer exploration, and volunteer participation (2008a).

Play, which is an area of occupation typically addressed with infants and children, includes play exploration and play participation (AOTA, 2008a). This may not be an appropriate area of occupation addressed in the adolescent population. AOTA addresses leisure exploration and leisure participation (2008a) which is similar to play, but is age appropriate for adolescents as they transition to adulthood.

Social participation within the community, family, and among peers is the final area of occupation addressed by OTs (AOTA, 2008a). OTs can provide valuable training in these areas as outline in the OT Practice Framework: Domain and Process. The areas of social skills addressed by OT include the individual’s ability to successful participate socially within his or her community, among family/caregivers, and peers (AOTA, 2008a). If successful transition does not occur in this area, adolescents may be at an increased risk of psychological vulnerability leading to social isolation (Hall-Lande, Eisenberg, Christenson, & Neumark-Sztainer, 2007).

In addition to the Occupational Therapy Practice Framework, AOTA (2008b) has outlined a sample of skilled services the OT could engage in with the adolescent in the transition process. These include: promote student independence and self advocacy, administer assessments to support the transition process, measure progress and develop functional goals with the team, facilitate functional skill development, complete an activity analysis for job requirements
and internships, provide job coaching, provide recommendations based on needed environmental accommodations, provide assistive technology to increase the student’s independence and participation level, and facilitate growth in social skills and friendships. The OT also collaborates with local agencies to provide appropriate services, participates in curriculum planning and instruction for related classes. Areas that should be addressed in the transition process include: post secondary education, employment, housing, transportation, finances, health insurance, social supports, leisure activities (AOTA, 2008b).

The focus of OT coincides with the mandates of IDEA. While legislation and transitional programs are trying to address the problems experienced in young adults who are transitioning to independent adult living, the current reality is that these young adults are an under-served population and are not receiving the services as mandated by current legislation.

Part of the limitations of transition programs is that role of OT in transition programs is not recognized as a solution to the problems. Kardos & White (2005) found that only 47% of the participants who were school-based occupational therapists felt that they understood transition services as defined under IDEA; while only 30% felt they utilized their professional skills and abilities in regard to transition services and planning to their full extent (Kardos & White, 2005). Use of appropriate assessment tools was also underutilized with only half of the OTs completing assessments (Kardos & White, 2005). Spencer, Emery and Schneck (2003) reported 35% of directors of special education
identified a need to increase OT services for students on an Individualized Education Plan (IEP).

OT addresses individuals in a holistic manner taking into account the person, task, context, and cognition enables students with disabilities to benefit from increased OT services as they transition from adolescence to adult life. OTs are well placed within public school systems but should be exploring additional ways to collaborate among transitional service teams across the nation (Kardos & White, 2005). A need exists for increased services encompassing life skills and leisure exploration for adolescents transitioning to independent or semi independent living. OTs are under-utilized in the adolescent transition process in the areas of Instrumental Activities of Daily Living (IADLS), leisure, social participation, education, and work (AOTA, 2008a). In order for a successful transition to occur, a holistic and client-centered approach must be used.

This transitional program interdisciplinary collaboration can occur in the form of evaluations, transition planning, and interventions (Michaels & Orentlicher, 2004). It is of vital importance for the adolescent to be involved in this collaboration among parents, teachers, and other members of the programming. In order for adolescents to begin to take responsibility for themselves and their actions, it is important that he or she be involved with the treatment and services received (Davis, 2003).

OTs can increase their role and competence in the transition process through continuing education. Continuing education can offer information to OTs on evaluation and intervention that is specific to transitional programming. The
problem is that there is limited literature and continuing education available to OTs about the role of OT in transition programs. Therefore, there is a need to develop more continuing education opportunities for OT’s role in transition programs.

To develop effective continuing education, it is important to review literature about adult learning styles. Berkeland and Flinn (2005) described principles of adult learning and components of educational programs. There are six principles to consider when working with adult learners. First, adult learners have a need to understand why it is important to learn new material. Self concept is the second principle; adult learners identify themselves as independent, self-directed and responsible. When learning new knowledge and skills, adult learners require a balance between active learning and passive learning, where the information is provided by the instructor. The third principle describes the adult learners need to be ready to learn. This can be facilitated through identification of benefits of learning new skills and knowledge in order to solve an identified problem. The fourth principle is orientation to learning. Adult learners are problem centered rather than subject centered. The motivation to learn is the finding new ways to solve a current problem (Berkeland & Flinn, 2005).

Berkeland and Flinn (2005) recognized the importance of using a needs assessment or an evaluation tool prior to beginning an educational program in order to avoid repetition of previously learned material and identify the learner’s interest areas. In addition, the program leader must also assess the learning environment, determine appropriate teaching methods and set relevant goals.
(Berkeland & Flinn, 2005). Finally, the program should be evaluated by learners to provide leaders with recommendations on the effectiveness of the workshop in order to improve the workshop. This can be accomplished using several different methods. For example, observation, interviews, checklists, or questionnaires could be used as valuable evaluation tools (Berkeland & Flinn, 2005). This information is useful in supporting OT’s as they advocate for an increased role within transition process.

In summary, the need for increased services for adolescents as they transition from high school to adulthood has been identified in current literature. Adolescents with disabilities have more difficulty developing adult life skills in the areas of social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence. Legislation from ADA, IDEA, Section 504 and the Fair Housing Act have provided regulations in order to ensure accessibility and reduce discrimination for adolescents with a disability. As an IEP team member, OTs have unique knowledge and skills to facilitate the transition process, increase adolescent independence and participation in meaningful activities.

This literature review unveiled information that may was used formatively for the development of this scholarly project. First, it identified the problems experienced in adolescents as they transition into roles associated with adulthood. It then described legislation that supports services designed to decrease the prevalence of the identified problems. It then described transition programs and the role OT may serve in further decreasing the problems experienced by this
population. Chapter three will describe the methodology for development of this scholarly project.
CHAPTER III
METHODOLOGY

The methodology to develop this scholarly project included a review of relevant literature and occupational therapy (OT) models. This scholarly project resulted in the creation of a workshop for OT to support role expansion in transition programs. Principles of adult learning guided specific teaching and learning methods for the workshop.

The Internet search began with a scholarly database search. These data bases included: PubMed, PsychInfo, SCOPUS, and Cumulative Index to Nursing and Allied Health Literature (CINAHL). The following search terms helped to gather related literature: adolescents, adolescents with disabilities, occupational therapy and adolescents with disabilities, transition programs, adolescents and transition, occupational therapy and transition services, and needs of adolescents with disabilities. In addition, government websites and databases were also searched to obtain national statistics and information. Furthermore, literature was searched through the American Occupational Therapy Association, specifically the American Journal of Occupational Therapy.

Upon review of the literature and information gathered, it was apparent that a need existed for occupational therapists to increase their role in the transition process. According to the United States Department of Health and Human Services (2005), adolescents with disabilities have more difficulty
developing adult life skills such as: social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence. The development of life skills for adolescents with disabilities through OT would address these problem areas as outlined by the Department of Health and Human Services.

Current legislation provided an understanding of the laws and regulations that support quality of life for this population. The following pieces of legislation were reviewed: Americans with Disabilities Act, Section 504 of the Rehabilitation Act, Individuals with Disabilities Education Act, and Fair housing Act. In accordance with these laws, accessibility is mandated and discrimination against people with disabilities is prohibited.

The authors of this scholarly project utilized the Ecology of Human Performance Model to describe the role of OT in transition service and planning. The focus of this client-centered model is not on the disability of the student, but on how to accommodate the student’s individual skills and abilities into the community through modification of various contexts (Cole & Tufano, 2008).

Within the Ecological Model, there are four main areas that are assessed and addressed. They include the person, task, context and the interaction between the person, task and context (Cole & Tufano, 2008). The OT would begin the evaluation process by asking the student and his/her family what he/she wanted and needed to do (Cole & Tufano, 2008). From the list of wants and needs, priorities are identified. Checklists are available to assess strengths and challenges of the individual, as well as, checklists to assess the
person/task/context. The occupational therapist completes a task analysis of desired tasks in order to determine needed skills and demands. Based on the identified priorities and the assessment results, goals are written with the student and his/her family. The authors adapted worksheets with the permission of Dr. Winnie Dunn, creator of Ecology of Human Performance Model, to facilitate the process of assessment and intervention planning. These adapted worksheets are included in the resource manual. In addition, the language and guiding principles of the Ecology of Human Performance model is embedded throughout the workshop. Furthermore, the Occupational Therapy Practice Framework (2008a) was applied throughout the creation of this product. The Occupational Therapy Practice Framework (2008a) was created with the Ecology of Human Performance as its foundation.

There are five intervention strategies that are used with the Ecological Model: establish/restore, alter, adapt/modify, prevent and create. The OT uses each of these strategies within the natural contexts. In addition to the use of intervention strategies to address goals of the adolescents, the Ecological Model encourages the OT to advocate for the inclusion of adolescents with a disability into the community. Furthermore, the Ecological Model was created for use with professionals from various disciplines. It is well suited for use at an Individual Educational Program (IEP) team meeting.

The authors of this scholarly project incorporated principles of adult education were incorporated into the workshop in order to meet the learning needs of workshop participants. Berkeland and Flinn (2005) described principles of
adult learning and components of educational programs. There are six principles to consider when working with adult learners. First, adult learners have a need to understand why it is important to learn new material. For example, the workshop begins with a description of current problems experienced by young adults with disabilities. Self-concept is the second principle. Adult learners identify themselves as independent, self-directed, and responsible. When learning new knowledge and skills, adult learners require a balance between active learning and passive learning, where the information is provided by the instructor. The third principle describes the adult learners' need to be ready to learn. This can be facilitated through the instructor identifying the benefits of learning new skills and knowledge in order to solve an identified problem. The fourth principle is orientation to learning. Adult learners are problem-centered rather than subject centered. The motivation to learn is the finding new ways to solve a current problem (Berkeland & Flinn, 2005).

In order to develop a relevant workshop, workshop leaders considered the characteristics and needs of adult learners. Berkeland and Flinn (2005) recognized the importance of using a needs assessment or an evaluation tool prior to beginning an educational program. This avoids repetition of previously learned material and identifies the learner’s interest areas. In addition, the program leader must also assess the learning environment, determine appropriate teaching methods and set relevant goals (Berkeland & Flinn, 2005). Finally, the program should be evaluated by learners to provide leaders with recommendations on the effectiveness of the workshop in order to improve the
workshop. This was accomplished using several different methods: observation, interviews, checklists, and pre/post tests would be used as valuable evaluation tools (Berkeland & Flinn, 2005).

When creating this workshop, the authors consider these basic principles were taken into account. The integration of basic knowledge of the transition process, application of occupational therapy into the transition process, and integration of the key concepts of the transition process with the experiences of the participants (Fink, 2003). Through this workshop, participants should learn about their own personal thoughts and feelings associated with the transition process and gain insight into the importance of collaborating among other professions with also networking among individuals within their own profession (Fink, 2003).

It is the intention of these authors to engage the workshop participants in an active learning process (Fink, 2003). This will occur through experiencing, observing, and reflecting on previous experiences (Knowles, 1980; Fink, 2003). Reflection is connected to the basic human need of making meaning of individual life experiences (Knowles, 1980; Fink, 2003). There are benefits of reflecting individually and with others. During this workshop, participants are encouraged to reflect upon their experiences and discuss them with other workshop participants. The importance of individual reflection will be discussed and encouraged throughout the workshop. While reflecting others, it is anticipated that the participants will enhance their individual experiences by gaining additional insight into the meaning of their experiences (Knowles, 1980; Fink,
2003). Individuals will have opportunities to engage in reflective experiences among other professional in their field which will allow the participants to feel a sense of community, which will enhance their overall experience (Knowles, 1980; Fink, 2003).

Based on a need, supported by evidence-based research, this workshop and resource manual was created with a theoretical foundation to encourage OT personnel to take the knowledge and resources provided through the workshop to their individual practice setting and expand the role of occupational therapy. The content of the workshop consists of facts about life skill development, legislation that supports life skill development, the role of OT in life skill development, the Ecology of Human Performance Model as it relates to the assessment and intervention process, collaboration among other professionals and strategies for life skill development. The resource manual contains an OT Referral Checklist, Collaborative Planning Form, Context Data Worksheet, Therapeutic Interventions Planning Worksheet, Performance Skill Summary Worksheet, Task Analysis Worksheet, Educational Parent Flyer, Educational Professional Brochure, Intervention Inventory, a listing of community and national resources and a certificate of attendance (to account for continuing education units)
CHAPTER IV

PRODUCT

The overall goal of the program is to incorporate occupational therapy throughout the transition process to meet the needs of adolescents with disabilities. As evidenced by the need for structured transitional services provided by skilled professionals, this project plan will be implemented through a full-day workshop provided by registered and licensed occupational therapists. This project will be offered in the fall with a follow-up program evaluation to measure outcomes will be distributed in the spring.

Occupational therapy addresses individuals in a holistic manner taking into account the individual, environmental context, and cognition enabling students with disabilities to benefit from increased occupational therapy services as they transition from adolescence to adult life. Occupational therapists are well placed within public school systems but should be exploring additional ways to collaborate among transitional service teams across the nation (Kardos & Prudhomme White, 2005).

This workshop was created in order to educate occupational therapists, school professionals, parents, caregivers, and community members about the unique skills and knowledge that occupational therapy can provide to a successful transition process. The workshop will provide attendees with information on the following: an overview of the transition process, legislation mandating the transition services, the role of occupational therapy in the transition process, application of the OT Practice Framework, necessary
evaluation/assessment tools that will assist a successful transition, interventions guiding the transition services, measurable goal writing for adolescents, and tips for successful transition programs.

This program plan would be implemented by two Master’s of Occupational Therapy students at the University of North Dakota. This workshop was developed to coincide with the research gathered and the programming developed in their Scholarly Project as required of the University of North Dakota Department of Occupational Therapy graduation requirements. This department is appropriate for developing this workshop as evidenced by the extensive community involvement of faculty and students as well as an understanding of skills and roles of occupational therapy in school systems. Through this programming, the University of North Dakota Department of Occupational Therapy will be collaborating with the Grand Forks Public School System, local businesses, community services, and families to ensure all needs are being met for adolescents with disabilities.
CHAPTER V
SUMMARY

The purpose of this scholarly project was to create a workshop for occupational therapists (OTs) who work with adolescents as they transition from high school to adulthood focusing on life skill development. The review of literature unveiled the need for increased services for adolescents as they transition from high school to adulthood. Adolescents with disabilities have more difficulty developing adult life skills in the areas of social skills, community involvement, employment, postsecondary education, affordable housing, and parental dependence. Legislation from ADA, IDEA, Section 504 and the Fair Housing Act have provided regulations in order to ensure accessibility and reduce discrimination for adolescents with a disability.

As IEP team members, OTs have unique knowledge and skills to facilitate the transition process, increase adolescent independence and participation in meaningful activities. A workshop and resource manual was developed to facilitate the role expansion of OTs in transition programs. The workshop focuses on the transition process, legislation, the role of occupational therapy, occupation based theory, collaboration, and successful transition strategies. A resource manual was also created for workshop participants. This includes an OT referral checklist, collaborative planning form, a series of occupation-based assessments, informational brochure and flyer for parents and
professionals, a list of intervention ideas, and a list of national and local community resources. The workshop is guided by the Ecological Model as it focuses on the context, person, task and the interaction between all three.

Limited research in the area of OT and adolescents with disabilities in the transition process is one of the limitations of this scholarly project. A second limitation is the authors lack of experience. Use of evidence related to concerns and interventions for this population helps to diminish the effect of these limitations.

It is recommended that OTs expand their existing role in the transition process to include life skills development of adolescents who have disabilities. It is likely that this workshop will facilitate this role expansion by providing an opportunity for discussion, problem solving, idea sharing, learning about related legislation and research. It is expected that this workshop will be implemented in public school settings by the year 2012. In order to access a pool of OTs, the workshop will be offered in an urban, public school district and will also be open to surrounding area public school districts.

Continued research is needed in the area of life skill development for adolescents with a disability who are in the process of transitioning to adulthood in order to continue to expand this workshop. Additionally, follow-up studies on the effect the workshop has on expanding OTs role in the transition process and student success rates should be done to establish validity and reliability of the workshop.
REFERENCES


The Urban Institute. Washington DC.


Appendix