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SUCCESSFUL TRANSITION PLANNING FOR INDIVIDUALS DIAGNOSED WITH  
ASD: A COMPARISON OF SENDING AND RECEIVING SCHOOL DISTRICTS

by

Carly J. Olcese

**Thesis**

Submitted to the  
Department of Education  
Rowan University

In partial fulfillment of the requirement

For the degree of  
M.A. Special Education

at

Rowan University

June 6, 2019

Dr. Margaret Shuff

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## Dedication

I want to thank my family and friends who never stopped believing in me. I am so thankful and appreciative of all the support, guidance and love that you have given me throughout my academic career.

## Acknowledgments

I would like to acknowledge everyone who has played a role in my academic accomplishments. I'm beyond grateful for all of the feedback, assistance, and support that I have received over the years and I can't thank you enough.

## **Abstract**

Carly J. Olcese

SUCCESSFUL TRANSITION PLANNING FOR INDIVIDUALS DIAGNOSED WITH  
ASD: A COMPARISON OF SENDING AND RECEIVING SCHOOL DISTRICTS  
2018-2019

Dr. Margaret Shuff  
M.A. Special Education

Research has shown that the successful transition plans can provide students who are diagnosed with Autism Spectrum Disorder (ASD) with increased employment opportunities, independent living options, and most importantly a positive quality of life. Individuals diagnosed with ASD have a variety of symptoms and characteristics that range from moderate to severe. Teachers and parents must work together to provide the child or adult with an education that encompasses their strengths and areas improvement, to allow for independence and future success. The purpose of this study was to examine the importance of the components in the transition process as well as strategies that promote each component for a successful transition for students who are diagnosed with ASD.

## Table of Contents

Abstract.....	1
List of Figures.....	4
List of Tables .....	5
Chapter 1: Introduction.....	6
Chapter 2: Review of Literature.....	10
Self-Advocacy & Self-Determination .....	11
Career Development.....	15
Leisure & Recreation.....	19
Parent Involvement.....	21
Teacher Involvement.....	25
Chapter 3: Methodology.....	31
Participants .....	33
District 1 .....	34
District 2 .....	34
Materials .....	34
Research Design .....	37
Procedures .....	38
Measurement of Procedures .....	38
Data Analysis.....	38

**Table of Contents (Continued)**

Chapter 4: Results.....39

Chapter 5:Discussion.....46

    Findings .....46

    Career Development .....47

    Parent Involvement.....50

References.....54



## List of Figures

Figure	Page
Figure 1. Survey Questions- Rating Scale.....	35
Figure 2. Survey Questions- Checklist.....	36

## List of Tables

Table	Page
Table 1. District 1 .....	40
Table 2. District 2 .....	40
Table 3. District 1 and District 2.....	41
Table 4. District 1 .....	43
Table 5. District 2 .....	44
Table 6. District 1 and District 2.....	44

## **Chapter 1**

### **Introduction**

Individuals diagnosed with Autism Spectrum Disorder (ASD) may face many challenges when it comes to transitioning. Whether the transition is from adolescence to young adulthood or transitioning to adulthood, individuals with ASD may experience discomfort, anxiety, or stress, when there are major life style changes (Hannah, E. & Topping, K. 2013). These changes may include starting at a new school, an employment opportunity, or a small change in a schedule. ASD is a life-long developmental disability that refers to a multitude of conditions ranging from mild to severe, and effects 1 out of 59 children in the United States according to Center for Disease Control and Prevention. An individual with ASD may experience symptoms that include anxiety, irregular reactions to sensory experiences, emotional and social detachment, resistance to change, challenges with social skills, speech and nonverbal communication, and sudden loss of cognitive skills. Children or adults with ASD could also demonstrate aggressive tendencies and repetitive behaviors, more pronounced cognitive and social impairments, and developmental disorders. Preparing individuals with ASD with the appropriate academics and activities will allow for a smooth transition into adulthood, leaving the student feeling comfortable and confident.

Young children with and without developmental disabilities begin a major transition when leaving their home and entering preschool or kindergarten. Children with developmental disabilities are provided with resources such as an Individualized Education

Plan (IEP), as well as other strategies such as visual aides and calm down schedules, to assist them in the classroom and school environment. An Individualized Education Plan (IEP) is used to assist children with exceptional disabilities so they receive an appropriate education based on their learning needs and educational goals and objectives. Educators will accommodate and modify activities, academics and the school environment for the individual student, with the support of parents and other school personnel. During this phase, educators and professionals are creating and implementing goals for the student.

According to the Individuals with Disabilities Education Act (IDEA 2004), transition services must begin at the age of 14-16. Once individuals with ASD transition through middle school and high school, the transition can become more challenging for families, and the student, due to normal aspects of life. Transformations to the body will occur such as puberty, causing a student with ASD to feel immense emotions and physical changes, which could lead to anxiety, stress and discomfort. Educators, parents, and other school personnel will develop a transition plan, that focuses on improving a student's academics and functional skills. Transition plans concentrate on a student's movement from school to coordinated school activities, post-secondary education, employment, vocational education, continuing education, independent living and community participation.

After ageing out of high school at 21, individuals with ASD will transition to adulthood, where they are likely to seek programs that provide resources which are necessary to postsecondary success. Such programs will continue to instill career and life skills, social skills, and academics to prepare individuals for employment. However,

some individuals struggle to find an appropriate placement after graduation due to behavioral issues, lack of self-help, Self-Advocacy, Self-Determination , and independence skills. Communication impairments and lack of social skills will also limit the possibilities of a student with ASD to communicate their wants and needs as well as their interests. The main goal of a successful transition plan is to prepare individuals with the skills that they need to live an independent life post-secondary school. Which means, parents and educators should never underestimate a student's ability to succeed or to over-estimate their abilities. Collaboration between educators and parents is essential in determining the most appropriate placement for their child based on his/her strengths, areas of improvement, interests, daily living skills, social skills, career goals, and ability to function independently in society.

The focus of this study is how teacher's, and teacher assistant's are involved with the transition process and their views on the major components that entail a successful transition. A variety of strategies were also addressed that could be used in a classroom or school setting that promote the major components of successful transition using Quantitative and Descriptive analysis. The five major components that are going to be examined are: Self-Advocacy & Self-Determination , Career Development, Leisure & Recreation Skills, Parent Involvement, and Teacher Involvement. Furthermore, this study will explore if there is a misunderstanding about transition planning and the level of importance in the public-school environment.

The three research questions that are examined in this study are:

- What components of transition planning are supported in classroom and school settings?
- What strategies are used in the classroom and school setting that promote the major components of transition planning?
- Should transition planning begin earlier than 14 years old?

The purpose of study is to look at what challenges school personnel in the public school environment may face while planning and implementing transition plans for individuals with ASD, in preparation for life after 21. Also, to gain a better understanding of what public school educators use in their classroom that promote the skills needed for a successful transition plan. This study will closely look at two school districts and how each school district prepares their students for transition. Each school (District 1 and District 2) is located in two different districts in New Jersey and will be surveyed as single schools within the district.

### **Key Terms**

Autism Spectrum Disorder, Transition, Self-Advocacy, Self Determination, Leisure & Recreation, Career Development, Parent involvement, Teacher Involvement

## **Chapter 2**

### **Review of Literature**

The transition from school to adulthood could be challenging for families and individuals diagnosed with ASD. There comes a time in life where any child turns the legal age and graduates from high school. That child, who is now an adult, will be expected to be independent, attend higher education, or find employment to be able to live an independent lifestyle. However, this is not the case for all individuals diagnosed with ASD. Students with exceptional learning needs who are diagnosed with developmental disabilities are able to attend school until the age of 21 according to the IDEA (2004). ASD is a developmental disability that effects cognitive, communication, and social skills. Individuals with ASD may also experience high anxiety and stress, resistance to change, and repetitive behaviors. Depending on the severity of the individuals ASD, the symptoms could vary, which means that no two individuals will have the same diagnosis or symptoms. A vast majority of the students who are diagnosed with severe ASD, may also portray inappropriate, physical and verbal behaviors that require accommodations and modifications to lesson or manage the particular behavior(s). Some students who exhibit behaviorally tendencies may have physical or verbal outbursts. These behaviors in turn, could limit his/her possibilities of being a candidate for Community-Based Instruction, Job Sampling, Day Programs, or Group Homes.

Being that the autism spectrum is very broad and that no two individuals have the same characteristics, educators and school personnel must ask themselves: how can we

create an environment that promotes independence for all students who are diagnosed with ASD? Written in the IDEA, the purpose of special education services is to successfully prepare each individual for post-secondary, employment and independent living (Test et al., 2014). During the IEP process, professionals, educators, and transition services will assess students' interests, strengths and areas of improvement to determine appropriate placements for the particular student. Despite the fact that skills and goals of an individual diagnosed with ASD are extremely diverse, there are an array of skill sets that go into creating a successful transition plan. Self-Determination & Self-Advocacy, Career Development, Recreation & Leisure Skills, Parent Involvement and Teacher Involvement are all valuable skill sets. Providing adolescents with the skill sets in these five categories will allow for positive learning outcomes and a successful transition to adulthood. Most importantly, the successful transition will allow for the individual to live a happy, and comfortable life post-high school.

### **Self-Advocacy & Self-Determination**

Self-Determination and Self-Advocacy are both essential skills for any individual with or without disabilities to acquire in order to function independently and appropriately in society. Self-Determination is the action of an individual making their own choices without assistance from another person (Bremer et al., 2003). Preparing to graduate from secondary schooling, teachers and trained school personnel can use assessments to determine students' levels of Self-Determination skills. The Arc's Self-Determination Scale is a student self-report for adolescents diagnosed with mild cognitive/intellectual and developmental disabilities and learning disabilities. The scale is based on educational



outcomes that consists of definitional framework that was conducted by Wehmeyer and colleagues (1995).

The Arc Self-Determination scale is a type of assessment used to collect data in specific areas, that depict what area a child should be placed in. The assessment contains 72 questions that also evaluate an individual's strengths, and determining appropriate educational strategies. The study closely looked at a group of students who graduated high school. The participants consisted of 80 students ages 17 to 22 diagnosed with cognitive, intellectual and developmental disabilities. The findings of the study showed that students who scored higher levels of Self-Determination were able to successfully find employment after graduating high school, than those who are not self-determined (Bremer et al., 2003). For example, any individual without a disability might have the opportunity to choose to attend higher education, and find success through academics, athletics, or Vocational Education; leading to employment.

To be a self-determined individual, according to The Arc Scale of Determination, the individual's actions reflect four essential characteristics: (1) the individual possess independence skills; (2) he/she has the skill to self-regulate behaviors; (3) he/she is able to attend and respond in social situations and (4) the individuals acts responsibly and recognizes consequences. (Wehmeyer et al., 1994). The transition to adulthood for individuals with ASD could be more challenging depending on the severity of their symptoms associated with autism. Changes to routine or schedules could cause the individual to feel intense anxiety or stress, which could result in behavioral tendencies that could potentially be harmful to the individual or others around them. Individuals who are diagnosed

with ASD who also have anxiety could experience discomfort while transitioning, especially when the transition is major, resulting in mood disorders and increased behavioral tendencies (Test et al., 2014). When an individual with severe autism portrays signs of anxiety, stress or repetitive behaviors, he/she may be acting out simply because they cannot or do not know how to express themselves and the emotions they are feeling. Students with disabilities are often left out of the decision making process in regards to their educational planning, due to the inability to independently make appropriate decisions based on their skills and areas of improvement (Wehmeyer, 1995). Students with higher functioning levels of ASD, might be able to use their own voice to determine their wants and needs, goals, job choice, activities they want to participate in, or most importantly, where they eventually want to live. Still, students with non-verbal communication may not know how to express these needs, which could cause meltdowns or physical and verbal outbursts. Such behaviors could ultimately lead to the inability for the individual to participate and learn from real life experiences within the community.

An important aspect to achieve Self-Determination skills is the ability to independently make choices and decisions (Wehmeyer, M. L. 1995). For those who are diagnosed with ASD, especially those with lower level functioning ASD, tend to struggle with communication skills. Non-verbal communication, or the lack of social skills could be the cause of this. Students with ASD might struggle with asking questions, answering questions, and identifying their needs and wants. A stronger emphasis has been placed on implementing strategies within the classroom environment to enhance the skills needed to independently make choices and decisions (Wehmeyer, M. L. 1995). For example, a

teacher can provide a student with the opportunity to make their own choices by holding two items up and asking him/her which item they prefer. Teachers can also create choice boards using picture prompts to allow for students with non-verbal communication to indemnify which item interests them according to their preferences.

There are three levels of choice making: 1) simply the act of choosing an item 2) choosing items while promoting decision making based off of student preference 3) choosing items based off of freedom and dignity (Wehmeyer, M. L. 1995). The first component involves that act of choosing items by eliminating behaviors that cause a child to choose more than one option, by teaching him/her to choose only one item. The second component entails students choosing items based off of their preference. Lastly, the third component involves students making appropriate decisions and choices for themselves (Wehmeyer, M. L. 1995). Providing choice making opportunities for students with disabilities has shown increased positive behaviors within the classroom environment, while eliminating problem behaviors (Wehmeyer, M. L. 1995).

Problem solving is another important aspect that should be incorporated into any child's daily routine. The typical developing child can practice problem solving in many areas such as math, art, science, etc. However, problem solving may be more complex for students with autism. By teaching social and interpersonal problem-solving skills, students with ASD have created more appropriate solutions during social interactions with peers (Ibid). Decision making is another aspect of problem solving skills that any individual needs to obtain in order to be self-sufficient and independent in society (Wehmeyer, M. L. 1995). Although choice making and decision making go hand in hand and are

similar, both skills have differences. Decision making is the act of choosing one preferred item, rather than be able to choose from a given selection (Wehmeyer, M. L. 1995). Students with disabilities are sometimes steered away from making their own decisions due to the assumption that they are incapable of indecently making their own choice (Wehmeyer, M. L. 1995). According to Wehmeyer and Metzler, young adults and adults who were diagnosed with developmental disabilities were not provided with the opportunity in making choices in activities they participated in such as events and leisure. Out of 4,544 people, 75% stated that they were able to make their own choices, assisted or unassisted and 83% were involved in making their own decisions regarding what items of clothing they preferred to wear. Yet, these individuals were uninvolved in making major life decisions (Wehmeyer, M. L. 1995).

### **Career Development**

One important aspect of successful transition planning is to make certain that every student with ASD receives the appropriate supports and learning opportunities to be able to obtain independence post-secondary. When developing a transition plan for a student with ASD, a teacher needs to be realistic and mindful about the individual's strengths and areas of improvement. Teachers' should never underestimate a student's ability to obtain specific skills, or goals. As stated in the IDEA (2004), Section 1450, "An effective educational system serving students with disabilities should—promote transition services and coordinate State and local education, social, health, mental health, and other services, in addressing the full range of student needs, particularly the needs of children with disabilities who need significant levels of support to participate and learn in

school and the community”. Students without exceptional learning needs are able to navigate their way within the classroom and are capable of achieving success through academic coursework. Adolescents’ aged from 12-17 who are diagnosed with ASD that attend public school, spend 80% or more of their day in the general education classroom. (Test et al., 2014).

Community based instruction and job sampling are both extraordinary opportunities that a young child with ASD could participate in. Access to community-based instruction and job sampling provides students with real life experiences that they would encounter once entering the real world. Students with ASD participate in community based instruction and or job sampling to determine what jobs interest them, what job-related skills they have, and identifying career paths. Students who receive job sampling or community based instruction is supervised by teachers or other school personnel at the local job site. The time spent in the community varies depending on the child and location of the placement. Skills learned in the community are directly tied with the students goals and objectives written in his/her IEP. To ensure that students with ASD are equipped with the skills they need for life after 21, researchers have suggested that the skills learned should be from real life experiences (Cihak et al., 2004). However, there are a number of challenges that come with successful transition planning and two challenges are the cost of having students involved in community-based supports as well as opportunities being readily available for them. (Volkmar et al., 2009).

The number of individuals diagnosed with ASD continues to grow. According to the United States Department of Education (2006), 194,000 students aged from 6 through

21 receive special education services under the IDEA (2004). Naturally, as an individual moves his/her way through middle school and high school, the transition process becomes more challenging due to the fact that the skills learned in high school become more difficult. A new study that was recently conducted in the United States analyzed 680 adults on the autism spectrum, along with 1,400 individuals with speech and intellectual impairments (Norton, 2018). Out of all of the individuals who participated in the study were aged from 19-23 years old and had previously attended special education programs during their high school career. The results from the study found that 35% of adolescents with ASD were unable to maintain a job after graduating high school (Norton, 2018).

As stated previously, students aged from 12-17 years old spend majority of their day in the general education classroom. If this is so, how are these young adults learning the skills they need to obtain independence, self- determination and Self-Advocacy? The transition to adulthood has yet to be truly examined, however, one study suggests that problem behaviors and symptoms shown improvements while in high school but has declined once entering adulthood (Taylor et al., 2012). For 21 years, students with autism will receive a free appropriate education, along with the services that best fits his/her wants and needs. When graduating high school, these individuals will be expected to live in society independently, without the services they once had.

The National Center for Special Education Research had conducted a survey that was addressed to school personnel during the first Wave of The National Longitudinal Transition Study-2 (NLTS2) (Newman). Participants of the survey were teachers' who were familiar with the students educational and vocational background. The results were

turned into a “Fact Sheet” created by The National Center for Special Education Research, which gave a brief description of secondary school experiences. The fact sheet does not include students with other disabilities or general education students, and it does not go into extreme detail. About 97% of secondary school students diagnosed with autism attend public schools. Eighty-four percent (84%) attend public schools that accommodate students with autism, and about 12% attend special education schools that specifically provide services to students with disabilities. The remaining 4% of students either attend charter, hospital, or alternative schools (Newman).

According to the The U.S. Department of Labor Office of Disability Employment Programs, in May 2017, 9.5% of individuals with disabilities were reported to be unemployed, compared to the 3.9% of those without disabilities. Career development for individuals with autism can consist of Vocational Rehabilitation Education (VR), which prepares individuals to work in environments such as craft, trade or technical work. For individuals who want to obtain and hold employment once graduating post-secondary, vocational rehabilitation can be a tremendous asset in further developing the skills needed in the workplace (Alverson et al., 2016).

Successful transition planning requires school personnel to make certain that every student receives appropriate supports and learning opportunities to be able to obtain independence post-secondary. As stated in the IDEA (2004), Section 1450, “An effective educational system serving students with disabilities should—promote transition services and coordinate State and local education, social, health, mental health, and other services, in addressing the full range of student needs, particularly the needs of children with dis-

abilities who need significant levels of support to participate and learn in school and the community”.

### **Leisure & Recreation**

Participating in leisure and recreation skills at home and in the community are beneficial for adolescents and adults with ASD in increasing their quality of life and also reducing stress and anxiety. Stress and anxiety play a large role in the behavioral tendencies of individuals with ASD and could be a contributing factor as to why individuals with ASD have meltdowns or portray other inappropriate behaviors such as self-injurious behaviors, or physical and verbal outbursts. It's important to recognize the connection between stress, anxiety and autism and that these struggles can affect not only behavioral issues but also delays in learning (Garcia-Villamisar & Dattilo 2010). Leisure and recreation activities promote creativity, problem solving, critical thinking as well as relaxation, while boosting the individual's social communication and Self-Advocacy/Self-Determination skills. The quality of life for any individual is important, especially those diagnosed with ASD. Participation in social, leisure or community functions based on the individuals interests, can increase one's quality of life. (Garcia-Villamisar & Dattilo, 2010). It is also crucial to allow for children to participate in a variety of activities that they can choose from to increase their choice-making and decision-making skills.

For a student to independently make his/her own choices or decisions, he/she has to acquire Self-Determination and Self-Advocacy skills. As previously stated, students who have autism tend to gain a more positive learning experience when learning through real life experiences. Learning from real life experiences will open doors for any individ-



ual, especially those with developmental disabilities because they are able to learn from their mistakes and take risks while discovering their strengths and areas of improvement.

Parents and teachers of individuals with disabilities tend to over protect the child, while disregarding mistakes, avoiding discussions and consequences because of the child's disability.(Bremer et al., 2003). By providing children with the opportunity to make choices for leisure or recreation activities, it will allow for the students to feel that they have control over their own environment (Wehmeyer et al., 2010) During the school day, students should be integrating choice making into their daily routine, so they can determine who they want to engage with, what activity that want to participate in and most importantly if they want to participate in the activity. Research has recently shown that by incorporating choice making into a student's daily routine it will decrease behavioral outbursts and increase adaptive behaviors (Wehmeyer et al., 2010).

Leisure and recreation involvement entails any individual in participating in activities that they have interest in, or prefer to engage in. Leisure activities can include community outings, events, recreational sport teams for students with disabilities. Students with ASD often do not participate in leisure due to behavioral tendencies, or simply because they do not possess the skills to understand their own interests. Family leisure involvement with leisure activities has been proven to reduce stress and increase family function, resulting in a better quality of life (Kim et al., 2018). Families of those who have a child diagnosed with a developmental disability such as ASD that participate in leisure and recreation activities have seen an increase in problem solving skills, confidence, ability to negotiate and reason, and developing support systems (Kim et al., 2018).

Parents have also reported that they have fun while participating in leisure activities with their child, and felt a positive connection while engaging in the activity (Kim et al., 2018).

The Core and Balance Model of Family Leisure Functioning explain two types of family leisure involvement: core family leisure and balance family leisure (Kim et al., 2018 p 145). Core family leisure are typically leisure skills from home, and are easily accessible, also they are low cost. The activities that fall under this category are family dinner, games, and exercise (Kim et al., 2018). Balance family leisure activities are experiences that take place within the individuals community or surrounding area. Activities that fall under the category of balance family leisure are vacations, eating at a restaurant, attending sporting events, going to the movies or other outdoor activities. Findings have shown that the results that come from families being involved in core and balance activities are nothing more than positive, while creating a stronger family bond (Kim, K et al., 2018).

### **Parent Involvement**

Parental involvement plays a vital role in any individuals educational success, especially those who require special education services. A parent is defined as any natural, adoptive or guardian who lives with the child and that is responsible for the child's safety and welfare. In 1975, The Education for All Handicapped Children Act, congress made the decision that all handicapped children have the right to education and are able to receive an education that provides them with services that are free and appropriate for their educational needs (FAPE). Students with disabilities should also be educated in a Least

Restricted Environment (LRE), which requires students with disabilities to be placed in an environment that is appropriate and can be educated with their peers without disabilities (Burke 2013). Before this law came into place, parents had little to no resources on the involvement with their child's education. (Burke 2013). However, the Education for All Handicapped Children Act, ensured that the child and their parents are protected by Due Process Rights and Procedural Safeguards. The EAHCA of 1975, has four categories that include; Notice, Consent, Participation and Challenge. Parents must receive notice of any information regarding their child, such as evaluations, changes, and student progress. A child's parent must also participate in any formal meetings to determine appropriate placement, evaluations, changes, and to discuss student strengths and areas of improvement.

The Individuals with Disabilities Education Act requires parents to provide their input, as well as being fully involved in the development of their child's IEP (Burke 2013). An Individualized Education Plan (IEP) includes goals, and objectives that are measurable and accommodations that are appropriate for a child's educational success. Parents must receive copies of the IEP, any records regarding their child, and most importantly parents are allowed to challenge the schools decision of any content written in the IEP. The IDEA values the attendance of parents during any formal meeting at their child's school and they must be notified of when and where the meeting is going to take place (Burke, M. 2013). If the parents cannot attend the meeting, it's the schools responsibility to make appropriate arrangements to reschedule the meeting or to conduct a teleconference. During the IEP meeting, the IEP team, which includes any teacher working with the

child, therapists, case managers and the parents will discuss information regarding post secondary options and transition for their child. A parents' input also entails decision making for their child to determine what is best for the individual. Students with ASD who have difficulty communicating, especially those who have non-verbal communication, could portray difficulty expressing their likes and dislikes. Decision making is another challenge that an individual with ASD may face, therefore parental involvement is extremely important.

Parents could feel intimidated, stressed, or anxious when speaking in front of their child's educators. There could be multiple factors as to why Parent Involvement declines as a child transitions through high school, or into post-secondary. One of many factors is that both administrators and teachers often report being unsure of how to effectively engage parents in their child's education (Hirano et al., 2016). Prior to IEP meetings, teachers can gather information from parents using questionnaires, parent or student interviews to gain a better understanding of the students needs, goals and options for employment or independent living. However, the severity of the child's behavioral tendencies and level of academic performance are both large contributing factors in Parent Involvement (Syriopoulou-Delli et al., 2016). Parents may find themselves unsure of what to do in these circumstances, and may find it challenging to even attend meetings, conferences or school activities (Syriopoulou-Delli et al., 2016). Furthermore, collaboration will allow for special education teachers, therapists, and parents to think outside of the box, and to develop a plan that fits the students needs; academically and behaviorally.

According to the Division of Developmental Disabilities of New Jersey, once all individuals, including those with developmental disabilities reach the age of 18, parents are no longer responsible in making decisions for their adult child. Before the age of 18 any child with or without a disability either has parent(s), or a guardian that legally represents them and protects them. Being that the severity of ASD varies from person to person, no individual diagnosed with ASD are the same, which means their skills are going to vary. Lower level functioning students diagnosed with ASD, who have non-verbal communication, or other cognitive disabilities could have difficulty with Self-Advocacy or Self-Determination skills. As children with cognitive and developmental disabilities become adults, often parents will continue to make decisions for them. Nevertheless, once a child reaches 18, decisions should be made by the individual (Volkmar, et al., 2009). Alternatively limiting their options to make their own choices and decisions that are best for them.

Guardians of the individual with ASD play an extremely important role in their child's development, specifically decision-making. Volkmar and others, discuss the importance of protections written into the law that include the right of parents to review and receive copies of records, to attend IEP meetings, to participate in decision making, and to consent (or not) to the proposed program (Volkmar et al., 2009). There are factors that do get in the way of Parent Involvement during the IEP process such as parents understanding their rights. Section 11(B) of the IDEA states that "Parent training and information activities assist parents of a child with a disability in dealing with the multiple pressures of parenting such a child and are of particular importance in—ensuring the in-

volvement of parents in planning and decision-making with respect to early intervention, educational, and transitional services” (IDEA, 2004). Under the same statute in section 11(A) of the IDEA, —“playing a vital role in creating and preserving constructive relationships between parents of children with disabilities and schools by facilitating open communication between the parents and schools” (IDEA, 2004). Teacher and school personnel should always be informative to the parents but without using any educational jargon that will prevent any misunderstandings, or miscommunications about the transition process.

### **Teacher Involvement**

There are a variety of options for housing, and vocational programs for students who are diagnosed with ASD. Some adults diagnosed with ASD, who move on from high school to post secondary, may attend 2 year colleges, universities, vocational education programs, day programs, or group homes. All of these options vary depending on the skills of the individual as well as many other factors. On the other hand, many individuals diagnosed with autism will continue to live with their families throughout their adult life (Volkmar et al., 2009). Usually in a general education high school, students are expected to obtain average to above average grades in courses that are based on their skill level and academic strengths to be able to attend colleges and universities. Yet, students with severe ASD may lack the skills they need to be accepted into programs that can accommodate their needs.

Once a child reaches the age of 18, students must be able to self-identify their disability to his/her college, so appropriate accommodations can be made. Accommodations

include tutors, organizational assistance, and testing modifications (Volkmar et al., 2009). Nevertheless, there are students with more severe symptoms of autism that cannot attend colleges or universities due to their skill level and severity of their disability. There are multiple schools and secondary programs that can provide students with these skills so they have the opportunity to live an independent and comfortable life post secondary. Students with severe autism, who portray inappropriate behaviors, and lack the skills needed to be considered an independent individual, may find it difficult to be accepted into day programs, group homes, and especially finding employment.

Adolescents without disabilities who are in middle school and high school develop at higher pace and possess social skills appropriate to their age and grade level. Schools that provide accommodations for students with ASD, who also have difficulty with social skills, should be mindful about what strategies and techniques they are using to increase these skills. The Individuals with Disabilities Education Act (2004) and the No Child Left Behind Act (2001) states that classroom teachers should implement research-based techniques and strategies during their practice. Both the IDEA and NCLB also state that the classroom teachers are responsible for implementing these procedures (Russell et al., 2010). In 'A Practical Guide to Autism', Volkmar and others discuss the development of a child's IEP and the importance of the IEP being followed. Also, if the IEP is written poorly or too lengthy, the IEP becomes more complicated (Volkmar et al., 2009).

Another component of the IDEA (2004) mandates that schools need to provide students with a least restrictive environment (LRE) appropriate to the child's learning.

Providing students with LRE means that students who receive special education services should spend as much time with peers who do not receive special education services as possible. Two issues arose across many states: 1) can a child with special needs be successfully educated within the general education classroom and 2) if the child with special education services is educated within an LRE, how can he/she receive appropriate instruction in the mainstream environment? (Volkmar et al., 2009). Although this issue is controversial, many parents believe that their child will benefit more when in a special education school setting that is appropriate for their needs. Research has shown that some teacher's do not implement strategies that are appropriate for the individual child as well as making changes to research based procedures. For example, one teacher might use positive reinforcers to decrease an inappropriate behavior while also withholding the item from the student. Another teacher may feel that, that Positive Behavior Intervention Support appeals to be "bribery" (Russell et al., 2010).

To ensure children with ASD are receiving an effective education based off of their individual needs, will depend on the extent of support educators receive to implement evidence based assessment and interventions in the classroom environment (Russell et al., 2010). The Regular Education Initiative (REI) involves the merging of special education and general education while ensuring that students are still receiving the appropriate accommodations and modifications. All students in the classroom, regardless of their disability or learning needs, will participate in the same activities and lessons as students who do not require special education services. Some students who require individualized instruction or one to one instruction will still receive that, but it will be inside of the gen-



eral education classroom. In Chapter 9 of ‘A Practical Guide to Autism’, Volkmar and researchers bullet point some challenges that are precedent to seen in both students with and without disabilities:

- Students without autism can function at a very high social level when entering high school. Those with autism often struggle with social skills, causing them to fall years behind and lack the skills needed to tolerate the fast pace and interactions of high school.
- While progressing through high school, course work and academics become more challenging for students with cognitive and developmental disabilities.
- Students with autism may also find it challenging to navigate throughout high school due to large schools, and transitioning from class to class. (Volkmar et al., 2009).

Learning and behavioral challenges can contribute to a lot of other issues for school districts if they aren’t well equipped with highly qualified teachers. As stated previously, a major aspect to student growth and success is the teacher’s efforts in communicating with parents. According to the IDEA, section 11, “Parent training and information activities assist parents of a child with a disability in dealing with the multiple pressures of parenting such a child and are of particular importance in— supporting such parents who may have limited access to services and supports, due to economic, cultural, or linguistic barriers”. For example, if a teacher lacks support from the school and also has a student, whose parents’ do not communicate their child’s needs, wants, expectations or they lack the ability to communicate due to a language barrier; the student could be experiencing emotional and mental distress, resulting in declining academics, social skills, and

inappropriate behaviors. Communication and collaboration between the parent and teacher will allow for the teacher to understand the family dynamic and most importantly will establish a positive support system for the child's academic and behavioral outcomes (Garcia-Villamisar & Dattilo 2010).

Parent and teacher relationships are defined as sharing responsibilities, while supporting the child's educational needs, growth and development (Garcia-Villamisar & Dattilo 2010). Family involvement entails reciprocating what is being done in school, at home as well as communicating with teachers' therapists and other services. Focusing on independent living skills should be heavily targeted. (Volkmar et al., 2009). Which means, if independent living skills should be heavily practiced in school, they should be implemented at home. Independent living skills include self-care, dealing with large crowds in the community or the cafeteria, doing laundry, cleaning up etc. The IDEA also states in section 11(E) "Parent training and information activities assist parents of a child with a disability in dealing with the multiple pressures of parenting such a child and are of particular importance in—assisting such parents in the development of skills to participate effectively in the education and development of their children and in the transitions described in section 1473(b)(6) of this title" (IDEA, 2004).

Teachers' can assist parents in teaching their child important skills that encompass independent living skills. Adolescents with autism may find it challenging to add another routine to their "daily routine." Although bathing, grooming and self-care usually are part of every individual's "daily routine", a person with severe autism, may have sensory issues, challenges with scheduling or motor skills that limit them from participating in self-

care. Integrating and practicing self-care skills at a young age while at home can increase the child's skills in learning how to properly care for them-selves (Volkmar et al., 2009). For any individual, bathing and grooming is important for being socially accepted in society. Poor hygiene can impact any individuals quality of life as well as acceptance from others. The saying "Practice makes perfect" mirrors any aspect of life. Whether it be a sport, a hobby or a simple task such as brushing your teeth, the more a person practices the skill, the better the skill becomes.

## **Chapter 3**

### **Methodology**

District 1 is an elementary public school located in Northern, New Jersey. District 1 is a suburban area which consists of grades Preschool through 6th grade and provides special education services for students with multiple disabilities. There are two Multiple Disabilities classrooms for grades kindergarten through second grade and fourth grade through sixth grade. The K-2 classroom consists of 6 students and the 4th-6th grade classroom consists of 3 students. The students in both classrooms have disabilities such as ADD/ADHD, Behavioral Disorder/Emotional Disturbance, and Autism. According to school digger, District 1 has a student to teacher ratio of 11.2 and a number of 359 students. District 1 consists of 49.0% White, 36.5% Hispanic, and 6.1% Asian. There are 27.3% of students who receive free/discounted lunches. The community that surrounds District 1 consists of a population of 3,609. The community consists of 66% White, 4% Black, 7% Asian and 22% Hispanic. There are 7% of children under 18 years old who are below the poverty line in this community. Students in this district also receive free lunch.

District 1 has three behavioral specialists that are members of the district. Two out of the three behavioral specialists are hired through an agency, while the other is permanently located in the school. All behavioral specialists visit the classroom at least once a week or according to the students IEP. District 1 also has speech therapists, occupational therapists and physical therapists who are hired through agency that visit this location at least 2-3 times week. The classroom that will be examined in District 1 consists of 3 students; all boys aged from 10-11 years old. Two out of 3 students are diagnosed on the

autism spectrum and receives special education services in a self-contained classroom environment and both students are in the fourth grade. Students receive speech, occupational therapy and physical therapy. The students in the classroom receive special services within the self-contained classroom for the whole day, however transition to specials twice a day. For the first three periods, which are 45 minutes long (135 minutes), students participate in social studies, reading and writing. Fourth period of the day, students then transition to specials, which include gym, music, art, computers and Spanish. Students also transition to the cafeteria, where they eat with three grades (4th, 5th and 6th). After lunch, students have recess inside or outside, depending on the season and weather. Students' then return to the self-contained classroom for the rest of the day and participate in two periods of math and writing. On Friday's one of the two students participate in a social group, where they practice social conversations in a natural contrived setting.

District 2 is a receiving school district that provides services and programs that meet the needs of sending school districts. District 2, located in North New Jersey, serves students who primarily have autism, cerebral palsy, emotional/behavioral disorders and other cognitive, intellectual disabilities. A vast majority of the students who attend District 2 portray inappropriate, physical and verbal behaviors that require accommodations and modifications to lesson or manage a particular behavior. District 2 consists of students aged from 12-21. District 2 is a diverse school with about 205 students enrolled. In 2015, 58.5% of students are white, 16.1% are African American, 14.1% are Hispanic and 10.1% are Asian. The teacher to student ratio is 4.6 and 15.6% of students receive free/discounted lunches. The community that surrounds District 2 consists of a

population of 15,998. The community consists of 73% White, 1% African American, 18% Native, 2% Other, and 6% Hispanic. There are 2% of children under the age of 18 who are below poverty line.

District 2 has Transition Coordinators readily available on school grounds, along with therapists; behavioral therapists, speech therapists, occupational therapists, and physical therapists. Every classroom in District 2 are self-contained, with 8-9 students in each class. There is 1 teacher and 6-7 teacher assistants. The classroom that will be examined in District 2 consists of 9 students; all boys aged from 18-21 years old. All students are on the autism spectrum, but others have cognitive, intellectual and emotional/behavioral disorders, which all require individualized accommodations and modifications to ensure each student is receiving what they need. The classroom environment focuses on each individual students needs. Each day staff is rotated with each student, so the student becomes familiar with every staff in the room, as well as staff becoming familiar with what each student needs. Depending on the student, the teacher and student ratio is 2:1, unless the student is an approved 1:1 by their sending district. The staff member will work with the assigned student for the day and will assist that student(s) with academic programs, vocational tasks, daily living skills, job sampling, community based instruction, and transitioning throughout the day. Students transition to specials throughout the day, which consist of gym, and vocational education.

**Participants:**

District 1 is a sending school district and will be compared to District 2, which is a receiving school district. Both school districts are located in New Jersey. Although, both

districts have students with multiple disabilities, the participants will provide answers based on the students who are diagnosed with ASD.

### **District 1**

The lead teacher of this group has had prior experience teaching general education for 25 years and this is the first year working in a special education environment. One of the two teacher assistants has been working in this school district for 15 years, and the other has been a member of the district for 2 years. Teachers' and teacher assistants' in the classroom are CPI certified, which is an intervention program that provides tools and strategies in assisting an acting out individual in deescalating their behaviors and decreasing anxiety using approved techniques and strategies.

### **District 2**

The lead teacher of this group has 25 years of teaching experience, as well as experience as vocational education, and behavior specialist. Both teacher assistants have had prior experience working with special needs students and have been teacher assistants in this district for five and ten years. Every adult in the classroom is required to be certified with Crisis Prevention Intervention (CPI), which is an intervention program that provides tools and strategies in assisting an acting out individual in deescalating their behaviors and decreasing anxiety using approved techniques and strategies.

### **Materials**

The materials that are going to be used to conduct the research is a closed ended questionnaire survey with two parts. The first part is based on the importance of each

component of the transition process and the second part is strategies that are used in the classroom that promote each component.

<b>1. How important do you consider Self-Advocacy and Self-Determination ?</b>
0 not important 1 somewhat important 3 very important
<b>2. How important do you consider Career Development?</b>
0 not important 1 somewhat important 3 very important
<b>3. How important of you consider Leisure and Recreation activities?</b>
0 not important 1 somewhat important 3 very important
<b>4. How important do you consider Parent Involvement?</b>
0 not important 1 somewhat important 3 very important
<b>5. How important do you consider Teacher Involvement?</b>
0 not important 1 somewhat important 3 very important

*Figure 1.* Rating Scale



**Which of the following do you use to promote Self-Advocacy and Self-Determination in your classroom? Check all that apply.**

Providing student(s) with choices  
Encourage student(s) to make decisions  
Provide student(s) with opportunities for choice making  
Clear communication regarding limitations for choice making  
Teach consequences of choices and decisions making  
Providing opportunities to practice communication skills  
Teaching Problem-solving skills  
Identifying student(s) consequences and actions  
Responsibilities  
Use of strategies to self-regulate frustration and stress

**Which of the following are provided to promote Career Development? Check all that apply.**

Access to Community Based Instruction  
Access to Job Sampling  
Access to Transportation (CBI, Job Sampling)  
Career based Clubs  
Vocational Education  
Field Trips  
Job Fairs  
Career Day  
College Fair  
Career exploration activities (surveys, questionnaires)

Puzzles  
Games  
Art and Crafts  
Relaxation (Meditation, mindfulness, yoga)  
Extra curricular activities (clubs, social groups, sports)  
Walking (gym, or within school building)  
Computer/Ipad (music, games)  
Physical education equipment (floor scooters, basketballs etc.)  
Social interactions with peers  
Sensory items (play dough, sand)

*Figure 2. Checklist*

**Which of the following best describes Parent Involvement in your classroom? Check all that apply.**

Participation of educational planning (Transition planning, IEP meetings etc)  
Attends Formal Meetings (IEP, Transition)  
Attends school related meetings (back to school night)  
Communicates with teacher regarding child's needs (journal, phone conference, meetings)  
Identify child's interests, strengths, weaknesses and preferences  
Recognizing student hopes and dreams  
Understanding of student needs and wants  
Identifying student goals  
Reciprocating strategies from school to home  
Frequently asks questions

**Which of the following best describes your involvement in the classroom? Check all that apply.**

Knowledge of transition process  
Identifying student(s) goals  
Logging student(s) goals  
Developing objectives to meet student goals  
Track student(s) progress  
Adjusting goals as needed  
Collaboration and communication with Teacher Assistants  
Use of appropriate supports  
Implementing effective Research Based Strategies  
Recognizing student(s) physical and psychological needs

*Figure 2. Checklist Continued*

**Research Design**

The research design that will be used is a closed ended survey with Quantitative and Descriptive Analysis.

## **Procedures**

Participants of the survey will choose their answers based off of the students in their classroom that are diagnosed with ASD. Participants will check all answers that are appropriate to them and what they use in their classrooms on a daily basis.

## **Measurement Procedures**

Once data is gathered, measurement procedures will take place. The group mean and standard deviation will be found by using finding the mean (average) of each group, as well as using the standard deviation formula. Standard deviation is found by taking the group mean, and subtracting it from the individuals score, and then squaring the result.

## **Data Analysis**

Data is then analyzed by placing the information into charts to organize and to determine the differences between groups, while also comparing the two groups and their deviations. Data was also described in a descriptive manner as well as comparing each group numerically.

## Chapter 4

### Results

In this study, two school districts were examined to determine how teacher's, and teacher assistant's are involved with the transition process and their views on the major components that entail a successful transition. The first district (District 1) is an elementary school setting, which is the sending school district. District 2 is a special education school and is a receiving school district. Participants from District 1 and District 2 were asked to fill out the survey based on the students in their classroom who are diagnosed with Autism Spectrum Disorder. There were a total of 3 participants from each school setting; 1 teacher and 2 teacher assistants. Data was gathered by using a closed ended survey, which incorporated components of transition, as well as strategies to promote each component. The research questions that were answered were:

- What components of transition planning are supported in classroom and school setting?
- What strategies are used in the classroom and school setting that promote the major components of transition planning?
- Should transition planning begin earlier than 14 years old?

The first table describes District 1 and the second table will describe District 2. The first set of data will be analyzed by using quantitative analysis. Participants were asked to answer the importance of each component that entails successful transition on a 0 - 3 scale; 0 = not important, 1= somewhat important and 3= very important. The components that are being analyzed on a 0-3 scale are, Self-Advocacy & Self-Determination ,

Career Development, Leisure & Recreation, Parent Involvement, and Teacher Involvement.

Table 1

*District 1*

	<b>Teacher 1</b>	<b>Teacher Assistant</b>	<b>Teacher Assistant</b>	<b>Mean</b>	<b>Standard Deviation within District</b>
<b>Q1</b>	3	3	3	3%	0
<b>Q2</b>	3	3	3	3%	0
<b>Q3</b>	3	3	3	3%	0
<b>Q4</b>	3	3	3	3%	0
<b>Q5</b>	3	3	3	3%	0

Table 2

*District 2*

	<b>Teacher 2</b>	<b>Teacher Assistant</b>	<b>Teacher Assistant</b>	<b>Mean</b>	<b>Standard Deviation within District</b>
<b>Q1</b>	3	3	3	3%	0
<b>Q2</b>	1	3	1	1.6%	1.15
<b>Q3</b>	3	3	3	3%	0
<b>Q4</b>	3	3	3	3%	0
<b>Q5</b>	3	3	3	3%	0

The third table describes the standard deviation between both districts (1 and 2). The data was calculated by using both the standard deviation from within each district, 1.15 and 3 which is a 0.98.

Table 3

*District 1 and District 2*

<b>Standard Deviation of District 1 and District 2</b>	
<b>Q1</b>	0
<b>Q2</b>	0.98
<b>Q3</b>	0
<b>Q4</b>	0
<b>Q5</b>	0

The second part of the survey consisted of a checklist of 10 strategies that are used in the classroom that support each component of transitioning. Participants from each school selected the appropriate strategies that applied to them. The first component is Self-Advocacy and Self-Determination which included strategies such as, Providing student(s) with choices, Encourage student(s) to make decisions, Provide student(s) with opportunities for choice making, Clear communication regarding limitations for choice making, Teach consequences of choices and decisions making, Providing opportunities to practice communication skills, Teaching Problem-solving skills, Identifying student(s)

consequences and actions, Responsibilities, and Use of strategies to self-regulate frustration and stress.

The second component is Career Development which included strategies such as, Access to Community Based Instruction, Access to Job Sampling, Access to Transportation (CBI, Job Sampling), Career based Clubs, Vocational Education, Field Trips, Job Fairs, Career Day, College Fair and Career exploration activities (surveys, questionnaires). Leisure and recreation is the third component of the survey and consisted of leisure and recreation activities that are appropriate within a school setting. The activities that were selected for the survey are, Puzzles, Games, Art and Crafts, Relaxation (Meditation, mindfulness, yoga), Extra curricular activities (clubs, social groups, sports), Walking (gym, or within school building), Computer/Ipad (music, games), Physical education equipment (floor scooters, basketballs etc.), Social interactions with peers, and Sensory items (play dough, sand).

Parent Involvement and Teacher Involvement are the fourth and fifth categories of the survey. Parent Involvement consisted of strategies such as, Participation of educational planning (Transition planning, IEP meetings etc), Attends Formal Meetings (IEP, Transition), Attends school related meetings (back to school night), Communicates with teacher regarding child's needs (journal, phone conference, meetings), Identify child's interests, strengths, areas of improvement and preferences, Recognizing student hopes and dreams, Understanding of student needs and wants, Identifying student goals, Reciprocating strategies from school to home and Frequently asks questions. Teacher Involvement which is the last question of the survey consisted of strategies of, Knowledge of

transition process, Identifying student(s) goals, Logging student(s) goals, Developing objectives to meet student goals, Track student(s) progress, Adjusting goals as needed, Collaboration and communication with Teacher Assistants, Use of appropriate supports, Implementing effective Research Based Strategies and Recognizing student(s) physical and psychological needs.

The third table represents data gathered from the sending school district (District 1) and the fourth table represents data gathered from the receiving school district (District 2). Both tables include the group mean, and standard deviation of within each district.

The third table will represent the standard deviation of both school districts.

Table 4

*District 1*

	<b>Teacher 1</b>	<b>Teacher Assistant</b>	<b>Teacher Assistant</b>	<b>Mean</b>	<b>Standard Deviation within District</b>
<b>Q1</b>	70	100	100	90%	17.2
<b>Q2</b>	30	30	30	30%	0
<b>Q3</b>	100	100	100	100%	0
<b>Q4</b>	50	70	50	56.6%	11.54
<b>Q5</b>	100	100	100	100%	0



Table 5

*District 2*

	<b>Teacher 2</b>	<b>Teacher Assistant</b>	<b>Teacher Assistant</b>	<b>Mean</b>	<b>Standard Deviation within District</b>
<b>Q1</b>	80	100	80	86.6%	11.54
<b>Q2</b>	50	70	50	56.6%	11.54
<b>Q3</b>	100	100	90	96.6%	5.77
<b>Q4</b>	80	100	20	66%	41.63
<b>Q5</b>	100	100	70	90%	17.32

Table 6

*District 1 and District 2*

	<b>Standard Deviation of District 1 and District 2</b>
<b>Q1</b>	2.4
<b>Q2</b>	18.8
<b>Q3</b>	2.4
<b>Q4</b>	7.0
<b>Q5</b>	7.0

After calculating the standard deviation of both school districts, District 1 and District 2, it was analyzed that there is a deviation from questions 2, 4 and 5, which are Career Development, Parent Involvement and Teacher Involvement. The biggest deviation was seen in question 2, Career Development, which is an 18.8. Both parent and

Teacher Involvement have a deviation of 7. However, looking at both school districts separately, the group mean of question 4 and question 5 portrays differences. Parent Involvement showed a bigger deviation between both school districts. District 1 had a mean of 56.6% and a deviation of 11.54. District 2 had a mean of 66.% and a standard deviation of 41.63. Although District 1 and District 2 both showed a standard deviation of a 7 from table 3, looking at the districts separately, District 1 and District 2 had similar percentages from their group mean. The questions showing the most deviations are Career Development and Parent Involvement.

## **Chapter 5**

### **Discussion**

This study compared sending and receiving school districts, and the importance of the components in the transition process as well as strategies that promote each component for a successful transition with students who are diagnosed with ASD. There were two groups who participated in this study, District 1 and District 2. In each District there were 1 lead teacher and 2 teacher assistants who participated in the survey. The survey consisted of closed ended questions based on a 0-3 scale and a checklist of strategies that applied to their classroom dynamic. Participants of the study had prior experience teaching and working with students who require special education services. District 1 will be compared to District 2. District 1 is a public school setting and is a sending school district. District 2 is a special education school and a receiving school district. Participants were instructed to take the survey based on students in their classroom who are diagnosed with ASD. The research questions that were answered:

- What components of transition planning are supported in classroom and school setting?
- What strategies are used in the classroom and school setting that promote the major components of transition planning?
- Should transition planning begin earlier than 14 years old?

### **Findings**

After analyzing the data, the findings showed that there was a deviation in questions two and four of the checklist section of survey. For question number two which is “Which of the following are provided to promote Career Development?” District 1 had a

mean of 30% and a standard deviation of 0. For the same question, District 2 had the mean of 56.6% and a standard deviation of 11.54. When comparing both school districts the standard deviation was found by taking the group mean from both districts. The standard deviation from both districts is a 18.8. Question number 4 from the checklist stated “Which of the following best describes Parent Involvement in your classroom?”. District 1 had a mean of 56.6% and the standard deviation of 11.54. District 2 had the mean of 66% and a standard deviation of 41.63. When comparing both school districts, the standard deviation was 7.

The components that are supported in the classroom and school setting of District 1 and 2 were Self-Advocacy and Self-Determination , Career Development, Leisure & Recreation, Teacher Involvement and Parent Involvement. District 1 scored a 100% on the first section of the survey which equals a 0 for standard deviation. However, District 2 scored a 0.98 on question two on the first part of the survey, which is the importance of Career Development.

### **Career Development**

The category Career Development showed results with the mean of 56.6% and the standard deviation of 11.54. District 1 had a mean of 30% with the standard deviation of 0. There were two out of the three participants who selected the same strategies such as access to community based instruction, access to job sampling and vocational education. The other participant selected field trips and vocational education. District 2 results showed some differences in agreement in this category with one of the participants answers. Job fairs, field trips and career based clubs were selected by one of the partici-

pants. The two other participants selected access to community based instruction, access to job sampling, access to transportation for CBI and job sampling, and vocational education.

Individuals who are diagnosed with ASD could find it challenging to seek employment post secondary due to behavioral tendencies, social and communication difficulties, and adapting to change. Individuals with lower level functioning ASD may also struggle with self-care and hygiene, following directions, and transitioning throughout the work place. These challenges can bring on an immense amount of stress and anxiety for any individual diagnosed with ASD, especially if they are not prepared for employment. Students' who have the opportunity to attend a school that provides services to practice the skills needed for career development, typically have a Job Coach or a Teacher Assistant who is there with them to help guide them during the school day, or through Community Based Instruction and Job Sampling. However, once a student turns 21, these services will be taken away, which means they will not have the guided instruction that they may need in the workplace, leaving families to navigate on their own (Shattuck, et al 2012). An individuals school and the IEP team should create a transition plan that best suits the students needs. Nevertheless, not all schools provide transition services and some students do not receive transition planning until high school, which by that time, it's too late to successfully prepare an individual with ASD for adulthood (Shattuck, et al 2012).

According to the Individuals with Disabilities Education Act, transition services begin at the age of 14-16 years old for students with disabilities. A transition plan must

include specific goals, objectives, strengths and areas of improvement that are geared towards the individual's needs to assist him/her in preparing for employment and independent living (Shattuck, et al 2012). While preparing for transition, instruction provided by schools plays an important role in the transition process (Wilczynski, et al 2013). Teachers' and teacher assistants can provide supports for students with ASD to enhance the skills they need for employment. Social interaction and communication are vital skills to obtain for any individual in the work place as well as being able to successfully adapt to change in scheduling or routine. The United States Department of Labor shows the unemployment rate among youth, which rose from 458,000 to 567,000 from April to July 2019 (United States Department of Labor). This does not include individuals with disabilities. Recent research has shown the unemployment and underemployment rate for adults with ASD as high as 90% (Autism Speaks). The IEP team must collaborate with each other and most importantly the individual's parents to ensure that the transition plan is designed for student success and growth to prepare for successful transition to adulthood.

Although the percentage of unemployed individuals with ASD is high, this does not reflect on the individual with ASD inability to perform a certain job (Autism Speaks). There are a variety of jobs that an individual with ASD can hold such as working in a vocational setting or stores and restaurants within the community, but it's still difficult for individuals to obtain employment. Unfortunately opportunities for individuals with ASD are just not available for them (Shattuck, et al 2012). The Employment Tool Kit is designed by members at Autism Speaks to help family members, service providers,

business leaders or anyone who is assisting an individual with ASD to locate and retain a job (Autism Speaks). The toolkit includes fifteen sections that focus on skills needed and tips on finding a job. Some topics that are covered in the toolkit are Self-Advocacy, Accommodations and Disclosure, My Employment Rights, Transportation Options, Success Stories, and Step-by-Step Guide to Your Employment Search.

### **Parent Involvement**

The category of Parent Involvement for District 1 had the mean of 56.6% and the standard deviation of 11.54 for question four. Two out of the three participants scored a 50% on this category and both selected Participation of educational planning (Transition planning, IEP meetings etc), Attends formal meetings (IEP, Transition), Attends school related meetings (back to school night), Communicates with teacher regarding child's needs (journal, phone conference, meetings) and Identifying student goals. The last participant scored a 70% in this category, selecting Participation of educational planning (Transition planning, IEP meetings etc), Attends formal meetings (IEP, Transition), Attends school related meetings (back to school night), Communicates with teacher regarding child's needs (journal, phone conference, meetings), Identifying student goals, Reciprocating strategies from school to home, and frequently ask questions.

District 2 had the mean of 66% and the standard deviation of 41.63. Question 4 stated, "Which of the following best describes Parent Involvement in your classroom?". One out of the three participants scored a 100%, selecting all options in the category. The second participant selected only two of the options, Participation of educational planning (Transition planning, IEP meeting etc) and Attends Formal Meetings (IEP, Transition.)

The third participant selected eight options in the category; Participation of educational planning (Transition planning, IEP meetings etc), Attends formal meetings (IEP, Transition), Attends school related meetings (back to school night), Communicated with teacher regarding child's needs (journal, phone conference, meetings), Identifies child's interests, strengths, areas of improvement and preferences, Understanding of student needs and wants, Identifying student goals, Reciprocating strategies from school to home, and frequently ask questions.

Multiple comprehensive studies show that Parent Involvement in their child's education can benefit them in a variety of ways (Hirano et al., 2016). Parents can be involved in their child's education in ways such as; collaborating with teachers, therapists and other school personnel during their child's IEP meeting. Also, teachers can communicate and collaborate with parents about their child's strengths, areas of improvement, specific goals and objectives for school and most importantly transitioning to adulthood. The more parents are involved in their child's education, more positive outcomes will occur in the child's educational experience once reaching adulthood (Hirano et al., 2016). Teachers can also communicate with parents through email, communication journals, phone calls, or requested in school meetings. Communication and collaboration with parents will open doors for the student, parent and teacher; leading to positive adult outcomes post graduation.

Communication is essential in designing and implementing formal plans, especially during the IEP process. An IEP incorporates goals, objectives and targets that are measurable and appropriate for the student. According to the IDEA (2004), parent partic-



ipation plays a vital role in making appropriate decisions for their child, especially if the child has non-verbal communication. Research has shown that majority of parents that attend their child's IEP meetings provide little to no input on IEP goals, which leads to the assumption that the Parent Involvement is not detailed or helpful (Hirano et al., 2016). Being that there are parents who want to be involved in their child's education, some parents may not understand the process themselves, which could be the cause of declining parent involvement.

Although the importance of parental involvement is heavily encouraged and required, parents of individuals diagnosed with ASD, may also encounter difficulty understanding their rights, procedural safeguards and the special education system (Burke, M. M 2013.). With a lack of parental involvement in a child's education, the child's education will stifle. This will lead to inappropriate planning, and poor educational programs for students diagnosed with ASD (Burke, M. M 2013.). Not only does a lack of parental involvement effect decision making for an individual diagnosed with ASD, it will greatly effect academic achievement (Burke, M. M 2013.). For example, parents who are not involved in their child's educational experience, might not attend back to school night, collaborate and openly communicate with teachers and the school.

Special Education Advocates are individuals with training to help support parents through the IEP and special education process and have knowledge of both special education law and advocacy skills (Burke, M. M 2013.). In order to improve parental involvement in the area of special education, individuals who are interested in becoming special education advocates can register for advocacy training. SEAT training, also known as

Special Education Advocacy Training is a year long course with a required practicum that provides participants with information, training, and practical experience to become advocates in special education (SEAT- Council of Parent Attorneys and Advocates, Inc). In order to complete the course and to become a certified Special Education Advocate, the participant must complete the required tests, assignments, readings and practicums, which is led by practicing advocates and attorneys (SEAT- Council of Parent Attorneys and Advocates, Inc). Some of the topics covered in SEAT training that participants will be required to take are, Sources of Special Education Law, Civil/Education Rights for People with Disabilities, Overview Fundamentals of IDEA, Procedural Safeguards: Meaningful Parental Participation and Informed Consent, Post Secondary Transition, Ethics of Special Education Advocacy, Partnering with Families, Anatomy of an IEP, and Overview of Special Education Services and Accommodations (SEAT- Council of Parent Attorneys and Advocates, Inc).

## References

- Bremer, C. D., Kachgal, M., & Schoeller, M. (2003). Self-Determination Supporting Successful Transition. Research to Practice Brief. S.l.: Distributed by ERIC Clearinghouse.
- Burke, M. M 2013. (2013). Improving Parental Involvement. *Journal of Disability Policy Studies*, 23(4), 225-234. doi:10.1177/1044207311424910
- Centers for Disease Control and Prevention. (n.d.). Retrieved from <https://www.cdc.gov/>
- Cihak, F. D., Alberto, A. P., Kessler, B, K., Taber, A, T. (2004). An Investigation of instructional scheduling arrangements for community-based instruction. *Research in Developmental Disabilities* (25)(1), January-February 2004, 67-88. doi: 10.1016/j.ridd.2003.04.006
- Employment. (n.d.). Retrieved from <https://www.autismspeaks.org/employment>
- Employment and Unemployment Among Youth Summary. (2018, August 16). Retrieved from <https://www.bls.gov/news.release/youth.nr0.htm>
- Frank, F., Jablotschkin, M., Arthen, T., Riedel, A., Fangmeier, T., Hölzel, L. P., & Tebartz van Elst, L. (2018). Education and employment status of adults with autism spectrum disorders in Germany - a cross-sectional-survey. *BMC psychiatry*, 18(1), 75. doi 10.1186/s12888-018-1645-7
- García-Villamizar, D. A., & Dattilo, J. (2010). Effects of a leisure programme on quality of life and stress of individuals with ASD. *Journal of Intellectual Disability Research*, 54(7), 611-619. doi:10.1111/j.1365-2788.2010.01289.x
- Hannah, E. and Topping, K. (2013) Anxiety levels in students with autism spectrum disorder making the transition from primary to secondary school. *Education and Training in Autism and Developmental Disabilities*
- Hirano, K. A., Garbacz, S. A., Shanley, L., Rowe, D. A., (2016). Springer Science and Business Media. *Parent Involvement in Secondary Special Education and Transition: An Exploratory Psychometric Study*. 25:3537-3553 doi: 10.1007/s10826-016-0516-4
- Howlin P, Alcock J, Burkin C. An 8 year follow-up of a specialist supported employment service for high-ability adults with autism or Asperger syndrome. *Autism*. 2005;9(5):533–549

- Individuals with Disabilities Education Act. (2004). Retrieved from <https://sites.ed.gov/idea/.statute-chapter-33/subchapter-IV/1450>
- Kim, Kiboum; Kim, Junhyoung; Voight, Alison; Ji, Minjoon; National Library of Medicine. International journal of qualitative studies on health and well-being Vol. 13, Iss. 1, (December 2018): 1479585.
- Lembke, Erica S. (2005) Psychology in the schools ISSN: 0033-3085., 42(8) 761-763., 10.1002/pits.20110
- Mgryczon. (n.d.). Official Site of The State of New Jersey. Retrieved from <https://www.state.nj.us/>
- Norton, A. (2018, September 05). Young adults with autism lag in school, work. Retrieved from <https://www.chicagotribune.com/living/ct-xpm-2012-05-15-sns-rt-us-adult-autismbre84e13t-20120515-story.html>
- Russell L., O'Reilly M. F., Sigafoos, J., Machalicek, W., Rispoli, M., Shogren, K., Chan, J. M., Davis, T., Lancioni, G., and Hopkins, S, (2010). Division on Autism and Developmental Disabilities, *Review of Teacher Involvement in Applied Intervention Research for Children with Autism Spectrum Disorders*. Education and Training in Autism and Developmental Disabilities, 45(2), pp. 268-283. <https://www.jstor.org/stable/23879811>
- SEAT - Council of Parent Attorneys and Advocates, Inc. (n.d.). Retrieved from <https://www.copaa.org/page/SEAT>
- Shattuck, Paul T., Rast, Jessica E., Roux, Anne M., Anderson, Kristy A., Benevides, Teal, Gareld, Tamara, McGhee Hassrick, Elizabeth, and Kuo, Alice. *National Autism Indicators Report: High School Students on the Autism Spectrum*. Philadelphia, PA: Life Course Outcomes Program, A.J. Drexel Autism Institute, Drexel University, 2018.
- Shattuck P, Narendorf S, Cooper B, Sterzing P, Wagner M, Taylor JT. Postsecondary education and employment among youth with an autism spectrum disorder [published online ahead of print May 14, 2012]. *Pediatrics*. 10.1542/peds.2011-2864
- Syriopoulou-Delli, C. K., Cassimos, D. C., and Polychromopoulou, S. A., Collaboration between teachers and parents of children with ASD on issues of education. (2016, May 25). Retrieved from <https://www.sciencedirect.com/science/article/abs/pii/S0891422216300816?via=ihub> , (55)330-345

- Taylor, J. L., McPheeters, M. L., Sathe, N. A., Dove, D., Veenstra-Vanderweele, J., & Warren, Z. (2012). A systematic review of vocational interventions for young adults with autism spectrum disorders. *Pediatrics*, *130*(3), 531-8.
- Taylor JL, Seltzer MM. Changes in the autism behavioral phenotype during the transition to adulthood. *J Autism Dev Disord*. 2010;40(12):1431–1446
- Test, D. W., Smith, L. E., & Carter, E. W. (2014). Hammill Institute on Disabilities. *Equipping Youth With Autism Spectrum Disorders for Adulthood: Promoting Rigor, Relevance, and Relationships, Vol. 35*(2), Page 80-90. doi: 10.1177/0741932513514857
- Volkmar, F. R., Wiesner, L. A., & Wiesner, L. A. (2009). A practical guide to autism : what every parent, family member, and teacher needs to know. Retrieved from <http://ebookcentral.proquest.com>
- Wehmeyer, M. L. (1995). *The Arc's Self-Determination Scale: Procedural Guidelines*. The Arc of the United States and Michael Wehmeyer
- Wehmeyer, M. L., Shogren, K. A., Zager, D., Smith, T. E. C., and Simpson, R., (2010) Division on Autism and Developmental Disabilities, *Research Based Principles and Practices for Educating Students with Autism: Self-Determination and Social Interactions*. *Education and Training in Autism and Developmental Disabilities*, *45*(2). pp. 475-486, <https://www.jstor.org/stable/23879754>
- Wilczynski, S. M., Trammell, B., & Clarke, L. S. (2013). Improving Employment Outcomes Among Adolescents And Adults On The Autism Spectrum. *Psychology in the Schools*, *50*(9), 876-887. doi:10.1002/pits.21718
- Alverson, C. Y., & Yamamoto, S. H. (2016). Employment Outcomes of Vocational Rehabilitation Clients With Autism Spectrum Disorders. *Career Development and Transition for Exceptional Individuals*, *40*(3), 144-155. doi 10.1177/2165143416629366