Symposium Title: Identifying and Targeting Individual, Family, and Environmental Variables to Improve the Transition from School to Post-School Outcomes among Individuals with IDD

Chair: Marisa H. Fisher¹

Discussant: Dr. Paul Shattuck²

Overview: Transition from school to adulthood is not always easy for youth. For individuals with a disability, such as intellectual and developmental disabilities (IDD), the challenges in transition become exacerbated. In this symposium, we discuss four studies which aim to identify challenges in the transition process from both macro- and micro-system perspectives, determine who involved and most likely to struggle is during this process, and propose and test interventions to facilitate the transitions of individuals with IDD to improve post-school outcomes. Notably, this symposium is unique given the differing perspectives, methods, and proposed variables which influence post-school outcomes. Reflecting a range of research methodologies (from experimental design, mixed-method design to national secondary data analysis) to inform both intervention and descriptive research, this symposium identifies individual, family, and environmental factors that impact the transition process and outcomes. Presentations will proceed from preparing for transition in high school, to identifying the challenges of obtaining and maintaining employment, to identifying the support needs of adults with IDD and their families after high school. Implications for future research, practices, and policy will be discussed by Dr. Paul Shattuck, an expert in systems change.

Paper 1 of 4

Paper Title: COMPASS for Improving IEP Outcomes of Students with ASD

Authors: Lisa Ruble³, John McGrew²

Introduction: The postsecondary outcomes of individuals with autism spectrum disorder (ASD) are significantly worse than peers with other disabilities, including intellectual disability (Cameto, Levine, & Wagner; 2004). One problem is the lack of empirically-supported transition planning interventions to guide services and help produce better outcomes for students with ASD (Wehman et al., 2014). We applied an implementation science approach to adapt and modify an evidence-based consultation intervention called COMPASS and evaluate it for efficacy in a randomized controlled trial (RCT) for transition-age youth with ASD. The purpose of this presentation is to describe our primary findings and teacher variables that explained differences in outcomes for the COMPASS group.

Method: A combination of qualitative and quantitative methods were applied to adapt and test COMPASS. Focus group methodology (n = 40 participants) was used to identify necessary adaptations for COMPASS. After changes were made, an RCT of 20 teachers and a randomly selected student with ASD (18.2 years) from the teacher’s caseload were recruited and randomized to COMPASS or a placebo control condition. We examined between group differences in student goal attainment IEP outcomes, as evaluated by a rater unaware of group assignment (Ruble, et al., 2012), and within-experimental group ratings of consultant fidelity and teacher adherence. We also attempted to reproduce our findings from prior RCTs of COMPASS (Wong, et al., 2017) of significant correlations between teacher stress and student IEP outcomes.

Results: Consistent with our prior studies of COMPASS with younger students with ASD, IEP outcomes were higher for COMPASS compared to a placebo control (d = 2.1). Also consistent with earlier findings, consultant fidelity to the consultation and coaching protocols was high and teacher adherence improved over time. Finally, we replicated our results that students of teachers who reported higher stress (r = -.73, p = .01) made less change in goal attainment IEP outcomes.

Discussion: This small RCT of transition age youth replicates earlier research on the efficacy of COMPASS. We also replicated the finding that teacher adherence to instruction increases over time, reinforcing the need for ongoing teacher coaching. Lastly, the robust association between teacher stress and student IEP outcomes highlights the importance of examining teacher variables as potential moderators in intervention research.

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References/Citations:


Paper 2 of 4

**Paper Title:** Employer and Peers’ Experience, Comfort Level, and Attitudes toward Employees with IDD

**Authors:** Marisa H. Fisher¹, Connie Sung¹, & Lindsay Athamanah¹

**Introduction:** Young adults with intellectual and developmental disabilities (IDD) often face limited employment options, leading to poor psychosocial outcomes (Chambers et al., 2004). Much of the previous research and interventions focusing on employment for individuals with IDD have evolved around the clients (e.g., skills, training and support needs of the clients). To improve outcomes that lead to sustainable employment, it is imperative to take an ecological systems approach by also examining the broader systems that may impact employment opportunities. For example, beyond skills of the employees, poor employment opportunities can be partially attributed to negative societal attitudes toward hiring and/or working with people with IDD (Smart, 2008). Addressing these negative attitudes may create a more welcoming and inclusive corporate culture and may diminish the prejudice and discrimination that has become a barrier for individuals with IDD to obtain and maintain employment in integrated work settings. (Erickson et al., 2014). This study examined the pre-climate data at a new Project SEARCH internship site to understand the pre-intervention environment in which students with IDD are entering the workforce and to identify areas that can be addressed to improve future employment outcomes.

**Method:** A mixed-methods approach was used to assess the current attitudes and knowledge toward individuals with IDD of staff and students on a college campus. As part of a school-to-work transition program (Project SEARCH), internship sites were developed across the campus (sites included office settings, food services, residential facilities, clinics, and linen services) and a peer mentoring program was implemented. Training include how to interact with and strategies to support the youth with IDD. Over the first two years of the program, staff (n = 42) and site supervisors (n = 10) (85.7% female) and 16 peer mentors (mean age 20.06, 75% female) completed surveys on prior experience, comfort level, and attitudes toward individuals with IDD prior to receiving training and interacting with individuals with IDD. Peer mentors and site supervisors also participated in interviews and focus groups related to the experience.

**Results:** All peer mentors had at least one form of previous contact with an individual with IDD (mean forms of contact = 2.00 (SD = 1.60), range = 1-6). The majority of site supervisors (80%) and staff (72.2%) had at least one form of previous contact with individuals with IDD (m = 1.60 (1.50), range = 0-5 for site supervisors; m = 1.17 (1.03), 0-5 for staff). Although not statistically significant, site supervisors and peer mentors had slightly higher positive attitudes toward individuals with IDD (m’s = 126.78 (12.14) and 124.20 (11.53), respectively, with highest possible score = 180) compared to staff (120.57 (13.99)). Notably, the maximum score on the attitude survey is 180, indicating attitudes were not extremely positive overall. Similarly, site supervisors and peer mentors reported, on a 6-pt Likert scale, fewer feelings of discomfort in interacting with individuals with IDD (m = 1.87 (0.47) and 1.63 (0.65)) compared to staff (m = 2.22 (1.19)). During the interviews, peer mentors felt that working and socializing in the community would be a positive experience for both the youth with IDD and the community members who came in contact with the youth. Several peers indicated that their previous interactions with individuals with IDD attributed to their current positive opinions about the inclusion of individuals with IDD in employment settings and the community. Further, the site supervisors expressed excitement toward the program but concerns toward knowing how to interact with and support the interns with IDD.
Discussion: Although school-to-work transition programs, such as Project SEARCH, are preparing individuals with IDD to obtain employment after high school, less work has focused on ensuring individuals with IDD are entering inclusive environments that are ready and willing to support their needs. This study found that while some site supervisors, staff, and peers had positive attitudes toward individuals with IDD, they still expressed discomfort and concerns toward working with individuals with IDD. More work is needed to further improve societal attitudes toward individuals with IDD. Further, the slightly lower scores for staff, versus site supervisors and peer mentors, highlight the need to provide co-workers with additional training and supports in working with individuals with IDD. As such, future research should examine how training education and interactions with individuals with IDD can lead to changes in attitudes, perception, and stigma. Further, future programs should more systematically include staff training and peer mediated supports to enhance the Project SEARCH model.

References/Citations:

participants who were receiving benefits, men were getting more services than women (M=2.75 for men vs. 2.00 for women),
t=2.59, p < .05. Finally, men were more likely than women to be living with their family of origin (31.3% vs. 19.9%), χ²=6.49,
p=.01, and as a result, were receiving more financial support from their families of origin (M=3.79 for men vs. 2.72 for women,
t=2.23, p < .05).

Discussion: These findings point to the subtle differences between men and women with ASD that might help explain different
patterns of employment over time. Women, on average, seemed to receiving less formal and informal support and also to self-
select out of the job market. Findings will be interpreted in the light of other studies examining sex differences in ASD across the
lifespan.

References/Citations:

Paper Title: Comparing Support Needs of Parents of Adults with Down Syndrome (DS), Autism Spectrum Disorder (ASD), and
Cerebral Palsy (CP)

Authors: Chung eun Lee9, Meghan M. Burke8, Catherine K. Arnold10, Aleksa Owen9

Introduction: Parents often face many barriers when taking care of their offspring with disabilities. Such barriers may impact
parent well-being; further, barriers and well-being may vary in relation to the child’s type of disability. For example, parents of
children with DS (versus ASD or other types of ID) report better psychological well-being (Abbeduto et al., 2004). Increased well-
being among families of individuals with DS is often termed the ‘Down syndrome advantage’ (Hodapp et al., 2001). Most studies
about support needs and the DS advantage have focused on families of children (versus adults) with IDD. It is not known how
support needs vary among parents of adults with various types of disabilities; it is also unclear whether the DS advantage persists
among families of adults with DS. To this end, using a national, web-based survey, we compared parents of adults with DS, ASD,
and CP with respect to services, supports, and support needs.

Methods: Participants included 45 parents of adults with DS, 96 parents of adults with ASD, and 44 parents of adults with CP;
the mean age was 55.04, ranging from 31-78. Most participants were mothers (91.3%) and White (85.9%). Participants
completed a survey about their support needs including natural supports for residential, employment, and recreation (Sanderson
et al., in press), future planning (Heller & Kramer, 2009), and future planning barriers (Heller & Kramer, 2009). A MANCOVA was
used to analyze the support needs across disability types. Participants also answered two open-ended questions related to
barriers to accessing supports and support needs; emergent coding was used to analyze the open-ended responses.

Results: After controlling for parent age and the level of independence of the offspring with IDD, there were significant
differences with respect to recreation supports and future planning barriers across disability groups. Specifically, parents of
individuals with DS (vs. CP and ASD) reported significantly greater recreation supports (F = 4.310, p = .015, ES = .03). Post hoc
tests revealed that the CP and ASD groups had significantly fewer recreation supports (M’s = 7.46 and 8.07, respectively) than
the DS group (M = 10.09). Further, parents of adults with DS (vs. CP and ASD) reported significantly less future planning barriers
(F = 10.281, p < .001, ES = .097). Post hoc tests revealed that the CP and ASD groups had significantly greater future planning
barriers (1.03 and 1.06, respectively) compared to the DS group (.49). Open-ended responses revealed some similar barriers
(e.g., lack of appropriate services, lack of qualified staff) and some different barriers across the three disability groups. For
example, parents of adults with CP (vs. DS and ASD) reported more barriers to physical accessibility. Parents of adults with DS (vs.
ASD and CP) reported more informal supports (e.g., parent support groups).

Discussion: It seems that the ‘Down syndrome advantage’ persists in relation to some natural supports and future planning in
adulthood. Given the different needs of families, the type of disability should be considered when creating interventions.

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References/Citations: