
Special Section

A Model of Career Development for Disabled Adults

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Abstract

While the definitions of job placement constitute a broad range there is considerable agreement on the fact that it is an integral part of the rehabilitation process. This article extends the concept of placement to a theory of career counseling for disabled adults. A review of the history of placement in rehabilitation and a consideration of several theories of career counseling are offered. Following a discussion of a model of career development for disabled adults with components of self-understanding, self-acceptance including acceptance of disability, career exploration, career self-concept, career selection and career reevaluation, are implications for rehabilitation counselors.

Introduction

The assertion that job placement differs from career counseling for disabled persons, as applied by rehabilitation counselors, certainly is not new. Dunn (1974), among others, noted the emphasis on the former in the rehabilitation process, and further stated that "a shortcoming with the current vocational rehabilitation program is the lack of emphasis upon client careers. Traditionally, not much attention has been paid to the long run" (p.25). A variety of efforts to foster a career development perspective in rehabilitation have been developed (e.g., Crites, 1981; Vandergoot & Worrall, 1978).

The intent of this article is to provide another perspective on this crucial element of rehabilitation for disabled persons, that of a developmental career/life planning process.

The methodology includes first, a review of the history and current status of placement in rehabilitation, followed by a summary of the history, development and current status of career counseling. A model for integration of these two approaches is proposed, with an emphasis on holistic decision making and life planning.

Job Placement in Rehabilitation

Historical Roots

The many existing descriptions and definitions of job placement in rehabilitation share one common aspect - all consider placement to be an integral part of the rehabilitation process. These descriptions range along a continuum which, at one extreme, holds placement as the sole viable desired end product and outcome measure of rehabilitation efforts. Those adhering to this position stress the complexity and importance of placement, and many assume it to be a process that begins at the time of the initial interview and terminates at the 26 closure. The need for placement specialists is stressed.

At the other extreme is the viewpoint that placement, obviously a significant aspect of rehabilitation, will occur when other barriers to normalization of disabled persons have been removed, and sufficient counseling and guidance provided to make independent job finding by disabled persons a real and reachable goal. Placement is a much discussed topic in rehabilitation, and is perhaps best understood by viewing its historical roots.

Placement has been the focus of rehabilitation since the inception of federally funded programs in the United States.

The Soldiers Rehabilitation Act, passed in 1917, was designed to help disabled war veterans obtain employment and independence. The Smith-Fess Act of 1920 had the same goal for civilians, and provided for four services, including placement. The expansion of the program made possible by the Barden-LaFollette Act of 1943 specified the inclusion of "any services necessary for employment," including placement. The 1954 VR Act Amendments provided for training of rehabilitation counselors in vocational aspects of disability, including placement. The Rehabilitation Act of 1973 stated, in Section 102-C, that "primary emphasis (be) placed upon determination and achievement of a vocational goal." The 1978 Amendments include numerous references to placement personnel, training and services.

The continued expansion of rehabilitation programs since 1917 has been justified on both humanitarian and economic bases. The motto of services, "rehabilitation doesn't cost, it pays," has led to increasing appropriations for services. The cornerstone of this claim is placement--clients pay taxes rather than receive benefits from tax supported programs. This emphasis has led, quite naturally, to immediate and successful placement as the outcome measure defining successful completion of the rehabilitation process. Although this sounds fairly straightforward, the achievement of a single, comprehensive, commonly held view of successful placement has been, at best, elusive.

What is "Placement"?

Definitions of placement range from viewing it narrowly as a point in time to broader perspectives that incorporate the entire rehabilitation process. Most are in agreement that it represents the logical conclusion of all rehabilitation efforts. Definitions of placement directly affect client services and personnel training. The more weight assigned to this service goal, the more extensive most curricula become to assure counselor competencies in this area.

Following an extensive review of the literature, Dunn (1974) noted two possible definitions for placement. The first describes it as a broad general goal for vocational rehabilitation activities. The second indicates placement as "a specific activity or set of activities involved in locating a suitable job for clients and getting them into it" (p.2).

Bissey (1978, p.2) cites a broad definition of placement as "the available optimal vocational positioning of a person consistent with (his or her) existing abilities and interests." To effect or facilitate placement, counselors must possess knowledge of the client, the immediate economic community and conditions, and their own strengths, needs and limitations.

A major philosophical issue in the placement literature centers on responsibility for job search activities. Should this be primarily the client's responsibility? Should the counselors be most responsible for job development and referral? Should placement specialists take over casework needs for "job ready" clients? Whatever the orientation chosen, there seems to be increasing recognition of the clients' responsibility in the placement process. A variety of approaches to maximize clients' self placement have been advocated, including work adjustment training (Keith, Engelkes, & Winborn, 1977) and job finding clubs (Azrin, Flores, & Kaplan, 1975) to name a few.

As client input has been increasingly stressed, the issues of job satisfaction and job maintenance after closure have become increasingly important. For too long rehabilitants have been placed in low earning first jobs, which, as Dunn

(1974) notes, sets the stage for much of the rehabilitants' lifelong earning capacity. Rehabilitants are placed in disproportionate numbers in the secondary labor market, in readily available, entry level, unskilled, low paying positions. Obviously, the approach used is to change the client, as needed, to fit the available job (Dunn, 1974). Access to the primary labor market, though desired, is left to the individual client sometime "down the road," if at all. The opposite idea, that of changing jobs to fit the requirements and capabilities of disabled persons, enhances access to the primary labor market for rehabilitants (Dunn, 1974).

In an ideal sense, the placement of clients in the primary labor market has the potential for optimal use of their skills over their working lives. Rather than placing clients in the first available position, it is important to recognize that "the type of position the client is placed in will play a role in subsequent career development" (Vandergoot & Worrall, 1979). It is entirely possible for counselors to facilitate placements having optimal long range appeal, while still addressing the three basic placement processes: preparing for, finding, and keeping a job. Major reasons for counselor resistance to such efforts include the incentive system (e.g., 26 closures) and the lack of a career development theory specific to disabled persons. The latter issue is addressed in the following section.

Career Counseling: A Review

The fact that Frank Parsons is the primary originator of the vocational guidance movement in the United States is probably undisputed. Living during a time of rapid industrial development, Parsons recognized the need for providing assistance to youth in the selection of a career. Interestingly enough, Parsons (1909) identified a three-step vocational guidance process, "True Reasoning," which in many respects is still applicable today. These three steps included:

1. Gaining a clear understanding of one's interests, aptitudes and abilities.
2. Gaining knowledge about a variety of occupations.
3. Applying true reasoning to these two sets of facts.

Following Parsons' initial thrust a major trend emerged in the vocational guidance movement which emphasized the study of occupations rather than the study of the individual. Vocational educators and vocational guidance practitioners were viewed as associates until sometime in the 1920s or 1930s. During this period a transition occurred in which two divergent approaches resulted. School counselors emphasized individual differences and a developmental approach in the practice of vocational guidance and counseling. On the other hand, vocational educators continued to view the process as one of matching the person to the job. Job training remained the prime factor (Crites, 1969). These differences still exist today.

In the 1950s, the vocational guidance movement itself underwent significant changes. The National Vocational Guidance Association's definition of vocational guidance, developed in 1937, which essentially stressed helping the individual select and progress in an appropriate occupation, later was amended by Super (1951, p.92). His definition identified vocational guidance as the process of helping a person to develop and accept an integrated and adequate picture of himself and of his role in the world of work, to test this concept against reality, and to convert it into a reali-

ty, with satisfaction to himself and to society. Super's explanation of available occupations by disability placed emphasis on the psychological nature of vocational choice. Many new theories with a career rather than an occupational thrust resulted; thus the transition from vocational guidance to vocational counseling to career counseling.

Career Development Theories

The literature is replete with information on the wide variety of career development theories which are available for consumption today. Tolbert (1980) has neatly categorized them in the following way: Trait Factor or Actuarial Developmental, Needs, Psychoanalytical, Sociological, Decision Making and Social Learning. Three theories from the myriad which are available are discussed below, including the attention given by each one to the needs and concerns of persons having disabilities. These were chosen for their divergent approaches, current popularity among counselors and applicability to persons having disabilities.

Trait-and Factor. While many of the more recent career development theories include a psychological emphasis, the trait-and-factor or actuarial approach is based on Parsons' model for vocational guidance. Miller (1974) has explained the trait-and-factor approach as a cognitive process in which reasoning is used for decision-making. Moreover, there is a "right" choice for everyone in the vocational development process. Williamson (1939), a principal spokesperson for this approach, has proposed six developmental steps in the career decision-making process: Analysis, Synthesis, Diagnosis, Prognosis, Counseling, and Follow-Up. These combine to produce the central theme of trait-and-factor career counseling, differential diagnosis, which has been defined by Williamson (1939, pp.102-103) as

a process of logical thinking or the "teasing out," from a mass of relevant and irrelevant facts, of a consistent pattern of meaning and an understanding of the (client's) assets and liabilities together with a prognosis or judgment of the significance of this pattern for future adjustments made by the (client).

Crites (1981) suggests that the trait-and-factor model is built on two major philosophical and psychological propositions. First, except for the fact that it does endorse the concept of individual differences, it is largely atheoretical. It does not present hypothetical concepts as do many of the other career development theories. Second, it is analytical and atomistic in its orientation in that the client's "traits and factors" as measured by standardized tests are presented on a psychograph.

Career Typology. In contrast to the trait-and-factor approach is Holland's (1973) career typology theory of vocational choices. Interest inventories are really personality inventories, according to Holland. Members of a vocation will have similar personality characteristics and will, therefore, select career environments that are compatible with these qualities. Holland has identified the following six classes of personality types and occupational environments, which include 456 common occupations comprising about 95 percent of the labor force in the United States:

1. **Realistic type** - Deals with the environment in an objective, concrete and physically manipulative manner - includes skilled trades, many technical and some service occupations.

2. **Investigative type** - Deals with the environment by manipulating ideas, words and symbols - includes scientific and some technical occupations.
3. **Artistic type** - Deals with the environment by creating art forms and products - includes artistic, musical and literary occupations.
4. **Social type** - Deals with the environment by using skills in dealing with others - includes educational and social welfare occupations.
5. **Enterprising type** - Deals with the environment through enthusiastic, dominant, adventuresome qualities - includes managerial and sales occupations.
6. **Conventional type** - Deals with the environment by choosing activities that are socially approved - includes office and clerical occupations.

Developmental Psychology

Yet another divergent approach to career counseling is that proposed by Super (1957) in which aspects of developmental psychology and self-concept theory are inter-related. Super's developmental emphasis is unique in that he accentuates the total life span of career development from childhood through late adulthood. It is an ongoing process which moves ahead toward specific results and centers around four major elements: career life stages, career maturity, translating the self-concept into a career self-concept and career patterns. Super has identified twelve propositions which summarize his view of the vocational development process. Further, he has suggested the following career development life stages (appropriate age spans are provided for each):

1. **Growth Stage** - birth to age fourteen
Identification with significant others provides the basis for career development
2. **Exploration Stage** - ages fifteen to twenty-four
Career exploration in school and part-time work, role try-out and self-examination are dominant during this period
3. **Establishment Stage** - ages twenty-five to forty-four
Having found an appropriate field, an effort is made to establish a permanent place in it
4. **Maintenance Stage** - ages forty-five to sixty-four
The concern is how to maintain one's defined position in the world of work
5. **Decline Stage** - age sixty-five plus
Work activities decline and eventually cease as physical and mental powers change

Additional concepts from Super's theory are included in later section of this paper. At this point it may be useful to consider how each of these theories has addressed the needs of disabled persons.

Career Development Theories and Needs of Disabled Persons

After reviewing several standard textbooks in the area of vocational guidance, the authors concluded that none of the major vocational theories specifically address concerns related to handicapped persons. Certainly there is merit to this finding, in that disabled persons are the same as other individuals, except for their disability. Such a normalizing approach currently is in vogue; however, today's career development theories were proposed prior to the advent of concepts such as mainstreaming. The application of each theory to disabled persons has been left to the discretion and

interpretation of the individual counselor. It may be surmised that many of the practical applications of the National Rehabilitation and Career Options are seen as being limited on superficial applications in daily work settings, i.e., based on convenience for the professional with less regard for client needs.

The trait and factor theory, for example, readily has lent itself to practical application in the rehabilitation process. The need to match the capabilities of disabled people to the requirements of jobs is, in fact, one of the most often stressed factors in the placement literature. Techniques of job analysis, job modification, job restructuring and job engineering, so vital to placement in rehabilitation, all have been developed from the trait-factor orientation.

Holland's career typology is not so different from the trait-factor approach when applied to disabled individuals. Here we are looking essentially at a matching of people characteristics to job settings. What differs, however, is the incorporation of personal needs into the worker-job matching process. Traits become personality types, job requirements are interpreted in terms of occupational environments. Disabled people are not differentiated from others in terms of either personality types or job sites. Indeed they could not be; but the point to be made here is that this theory does not allow for possible differences in needs owing to the onset of a disability condition. No attention is given to potential personality change, or even disruption, owing to disability.

Super's developmental theory lends itself much more readily to application to disabled individuals, both from a placement aspect as well as from a career development perspective. Primarily this is because Super addresses the self-concept, a critical factor in relation to disability and handicap, and life span development, which allows for changing needs due to changing life circumstances. One such circumstance could be a disability. Again, the application of this theory to handicapped persons is left largely to the discretion of the individual professional.

If we look carefully at each theory, then, it becomes apparent that the career development needs of disabled individuals have not been addressed. The lack of theoretical base, combined with the economic realities of the state-federal VR system, certainly has fostered the emphasis of rehabilitation specialists on placement, and has contributed to a neglect of the developmental needs of disabled workers. Any attempt to remedy this situation that is to be of use to practicing rehabilitation professionals must incorporate known facts about disabled people and interpret them in light of the realities of placement combined with the career development needs of disabled persons. Three approaches to accomplishing this are discussed below.

Model for Comprehensive Career Counseling With Disabled Persons

A major assumption underlying the development of career counseling approaches for use with disabled persons is that the career development needs of disabled people are somehow different from those of non-disabled persons. Osipow (in Crites, 1981) discussed a variety of assumptions about career development among disabled persons that are widely accepted, though not necessarily accurate. These include the assumptions that, for disabled persons as opposed to nondisabled, career development is unsystematic; not psychological or subjective, not important, retarded and always stressful. In addition, the disability itself is seen as

the most important, overriding determinant of behavior, Another model of career development for disabled persons is provided by Hershenson (in Crites, 1981). This is a developmental, interactive system with mutually influential components and a feedback loop allowing for continual interplay between work personality, work competencies and work choice. The disabled person's total background, including both physical and psychosocial factors, is input into this cyclical system, and work adjustment is the eventual hoped-for outcome.

Perhaps the most recent and comprehensive effort to achieve a career development perspective for disabled persons may be found in the model that has been created by Vandergoot and Swirsky (1980). This model has three major components: 1) career preparation which emphasizes productivity enrichment through developing information, developing strategy and implementing strategy; 2) placement preparation which emphasizes motivating job search activity, acquiring labor market orientation, developing job openings and accepting a job; and 3) career enhancement productivity utilization which is employer oriented and client oriented. Vandergoot and Swirsky believe that for the rehabilitation system to adequately prepare individuals for careers, it must first prepare them to compete in the labor market. In addition, the rehabilitation process must produce enough labor market information so that job-seeking efforts are successful. In this light, career development is defined as "a process people use, over the extent of their lives, to receive the financial and monetary rewards from society which they desire" (Vandergoot, Jacobsen, & Worrall, 1978).

This approach has much to offer, and it goes further than most in explicating the important factors in the career development and job placement processes. It is weighted towards job placement, and hence serves as a useful model for rehabilitation professionals concerned with employment of disabled persons. It is also process oriented.

For the practicing counselor, however, this model could prove less than optimum, in light of current career development concepts and theory. In particular, the definition of career in monetary terms seems more oriented to placement than to career development. Many rewards accrue as a result of a career, including but not necessarily primarily monetary, particularly for the most severely handicapped individuals. For many disabled people, Super's definition of a career as a process wherein the self-concept is implemented and enhanced in a work setting seems of great value and relevance. The following model of career development for disabled persons draws heavily on Super's concepts, and relates them to life span development for disabled persons as well as to job placement in the rehabilitation process.

A Model of Career Development for The Disabled Adult

The model presented in Figure 1 is comprised of six components that represent sequential steps in the career development of disabled persons. The process is cyclical, allows for continual growth and change throughout the lifespan, and it may be entered at any point, allowing for the expression of needs, growth and change at any point in time, including prior to or any time after the onset of disability. A more detailed exploration of each aspect of this process follows.

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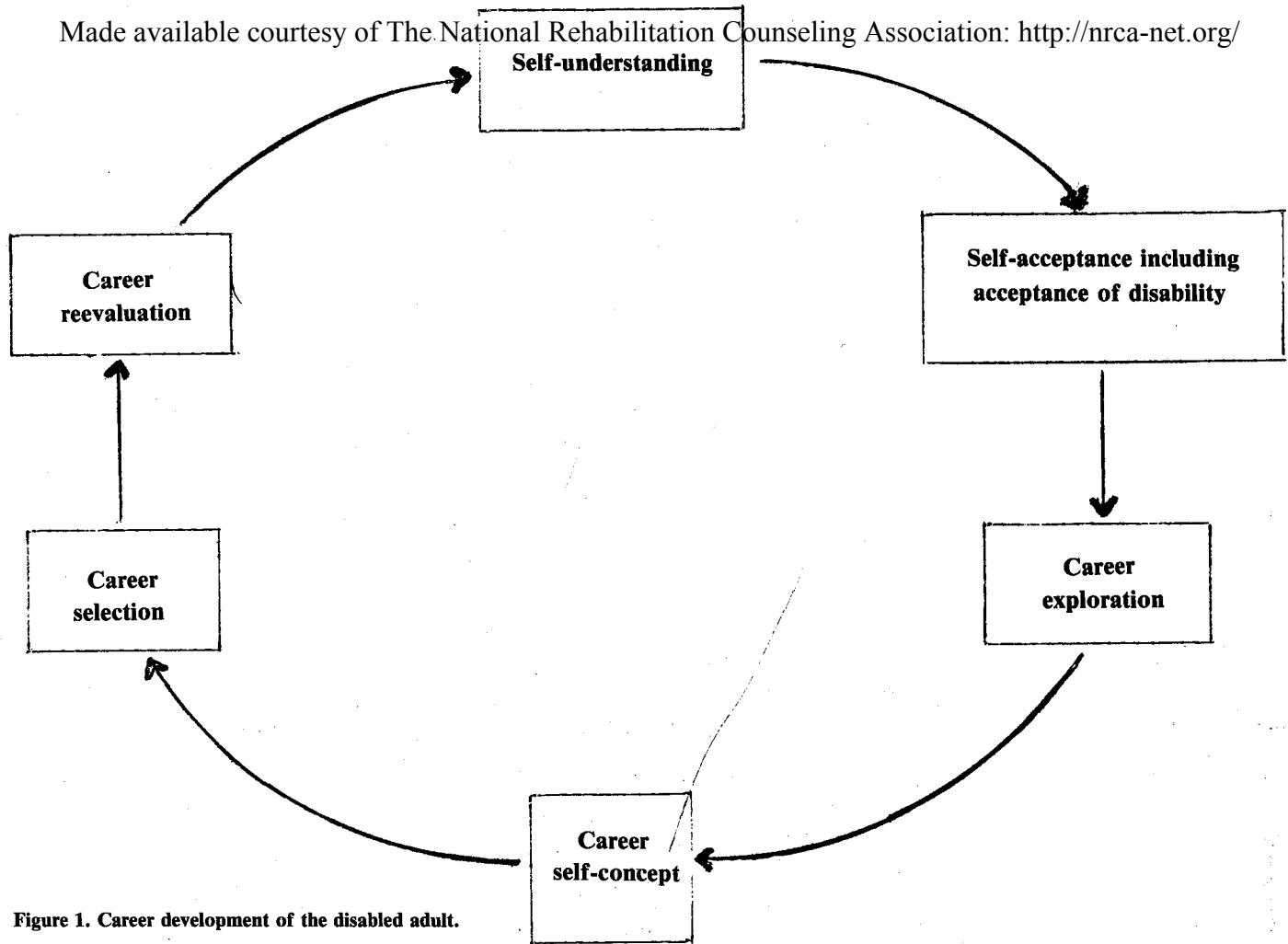


Figure 1. Career development of the disabled adult.

Self-understanding and self-acceptance. The model presented in Figure 1 is based on Super's developmental approach to career maturity. Central to the concept is the notion of self-understanding. Before one can make a sound career decision, understanding of one's self is essential. The self-concept is continually developing and changing. One needs to recognize and be aware of these changes as well as the differences and similarities one has with others. Self-acceptance should follow self-understanding. This process becomes more complex for the disabled adult because acceptance of the handicap is necessary as well.

The orderly and perhaps individually planned sequence of career life stages may be disrupted by the onset of a disability. For persons congenitally disabled, or those disabled prior to achieving working age, it may (and, in fact, it should!) be possible to follow a "normal" career life stage sequence. For those who acquire a disability of traumatic onset in adulthood, the phenomenon of disability may critically alter the normal life stage pattern. This individual may need to revert to a former stage of development in order to reformulate a positive self-concept and a new self-acceptance.

Career exploration. The career exploration process is influenced by numerous conditions: socioeconomic status, mental ability, personality characteristics and available opportunities. This typically occurs for non-disabled persons in adolescence, and involves a continuing process of self-examination and experimentation with a variety of work

roles in the school setting, in leisure activities or part-time work.

Initially, some tentative choices are made and tried out through fantasy or discussion. Ideally the individual's needs, interests, capacities and values will be taken into consideration. Following what Super (1957) calls the tentative period is one in which the crystallization of a vocational preference takes place. A generalized choice is transformed into a specific one. The attempt to implement a career self-concept begins. The final step in the exploration process is that of a trial commitment. An appropriate career is identified, the first job is located and tried out as potential life work. However, if after trial, the work does not seem appropriate the individual may need to return to the crystallization substage and initiate this process again.

Handicapped persons should be involved in numerous career exploration activities along with their peers if possible. In fact, special consideration should be extended these persons to ensure that the proper experiences are provided. However, if the disability occurs in later life, the adult may be unable to engage in career exploration until satisfactory resolution of the preceding stage, self-acceptance, is achieved. After gaining new self-understanding and acceptance, the disabled adult will be equipped to become involved in realistic career exploration.

Career self-concept and career selection. The career self-concept presumably develops in much the same manner as the total self-concept; through self-understanding and ac-

ceptance of oneself as a worker the career self-concept emerges. At this point, a career is selected, and the individual settles in and attempts to maintain a position in that career field. The extent to which a positive career self-concept is maintained will depend on the degree to which the individual finds satisfactory outlets for his or her abilities, personality traits, interests and values. This process will likely be much the same for disabled adults as it is for others.

Career reevaluation. All persons should be involved in frequent career reevaluation procedures. Because the self-concept is constantly changing, the selected career may no longer meet one's needs or be compatible with one's values and interests. If this is the case, then the individual will need to begin the career development process anew.

Disability, in particular, is a factor that often leads to career reevaluation, since many times it prevents the continuation of a previous job or occupation. When this occurs, it becomes necessary to reevaluate oneself and achieve a new understanding of one's physical, mental and emotional being. The cyclical model presented in Figure 1 reflects the potential for re-achievement of career satisfaction after the disability has been considered.

Implications for Rehabilitation Counselors

Counselors should be devoting more energy in working with clients on self-acceptance, acceptance of disability and vocational exploration. Acceptance of oneself is, at best, a difficult task for many individuals. Most of us do not reach this stage until we are well into our adult years. Thus, the timing of the onset of the disability is critical. If the individual is in any of the developmental stages of childhood or adolescence then the problem becomes twofold: self-acceptance and acceptance of self as a disabled person. Counselors need to be skilled in techniques for assisting their clients in reaching some degree of actualization.

If the disability occurs in adulthood then perhaps the individual has previously reached some degree of comfort with the self. The task then becomes one of assisting the client in reaching some degree of acceptance of the disability. Again, counselors should be trained in dealing with these specialized techniques. Providing assistance to individuals with a handicap of any nature is indeed demanding. Not every counselor can expect to be successful in this area. A great deal of time and effort is necessary to assist these clients in reaching some measure of acceptance of their life circumstance.

Rehabilitation counselors need to develop career exploration programs for handicapped adults. These could be modeled after those programs which have been created for high school youth. The techniques of shadowing or role try-out as well as other successful exploration procedures clearly would be beneficial to anyone in the career exploration stage of development. However, because career exploration is not a readily accepted activity for most adults, public acceptance would need to be encouraged. Counselors should be prepared to deal with resistance to their efforts here.

Clients should be encouraged to spend more time in trying out a variety of work roles. Depending on the age of onset of the disability the individual may have a future working career of as many as forty years. To expect the client to remain in a first level placement clearly is unfair. However, the impatience of both counselor and client for closure coupled with economic pressures of life often result in such a circumstance.

We need to move beyond simply providing service, and encourage the disabled individual to the extent possible and securing work. A long-range perspective needs to be accepted by both the client and the counselor. This need can be most clearly underscored by time demands. It simply takes time to integrate a disability into a new internalized concept of oneself as a capable individual, fully choosing an occupation that will maximize one's potential and result in job and career satisfaction. Trying out numerous roles is an obvious necessity if such satisfaction is to be attained.

A final implication for counselors is the fact that this model, in contrast to others, allows for consideration of the impact of disability at any point in the career development process. It allows the counselor to assess variables in helping the client resolve appropriate concerns at each stage. But, perhaps most important of all, it encourages the client to move forward toward satisfying adjustment both now and over the span of a career.

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