Helping High School-Aged Military Dependents With Autism Gain Employment Through Project SEARCH + ASD Supports

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ABSTRACT Introduction: Youth with autism spectrum disorder (ASD) face high rates of unemployment, with unique challenges for military-dependent and -connected youth with ASD. This paper reports preliminary findings from Year One of a randomized waitlist controlled trial investigating the efficacy of the Project SEARCH + ASD Supports (PS + ASD) intervention model for military-dependent and -connected youth with ASD. Methods: Treatment group participants (n = 6) participated in internships at a military installation in the southeastern United States; waitlist group participants (n = 8) received special education transition services at their local high schools. Employment outcome data were collected at 12 months for both groups. Results: Fourteen unique internship experiences were developed across seven business partner organizations on the military installation during Year One. Five of six PS + ASD treatment group participants obtained competitive integrated employment for an overall employment rate of 83.3%. Four of the positions were federal jobs. None of the waitlist group participants obtained competitive integrated employment during the same period. Conclusions: Initial results are promising and suggest that the PS + ASD model may help to meet the transition needs of military-dependent and -connected youth with ASD and the employment needs of local military communities.

INTRODUCTION

The transition from school to work is often difficult for youth with autism spectrum disorder (ASD). Compared to peers with other types of language-based disabilities, transitionaged youth with ASD have the lowest employment rates in the six years following high school and are at the highest risk of having no employment experiences two years postschool.¹ Once educational services end, youth with ASD experience high rates of involvement in segregated programs (eg, day support programs, sheltered workshops), while youth with ASD without co-occurring disabilities (eg, intellectual disability) face a heightened risk of noninvolvement in any type of activities outside of home.² Negative employment outcomes also extend to youth with ASD who are actively seeking employment through involvement with state vocational rehabilitation (VR) agencies. Burgess and Cimera's analysis of VR employment outcomes from 2002 to 2011 using the Rehabilitative Services Administration 911-Case Service Report found only 36% of transition-aged youth with ASD had VR cases closed with successful employment outcomes, although the number of transition-aged individuals with ASD accessing VR services increased substantially during that same time period.³

Research conducted thus far identifies several protective and risk factors associated with employment outcomes for transition-aged youth with ASD. A literature review of employment outcomes for individuals with ASD found several types of factors associated with unemployment including diagnostic factors and severity of symptoms; personal factors (eg, female gender, lower intelligence quotient, poor language abilities, presence of maladaptive behavior, lack of social skills and empathy, lower levels of personal independence); and external factors (eg, lower family income and support, disturbed family situation, history of mental illness in parents, prior institutionalization of the individual with ASD).⁴ More recent research has emphasized the impact of comorbid anxiety, depression, and obsessive-compulsive disorders on poor employment outcomes for youth with ASD.⁵ Even so, research has identified that work experiences while in high school, receipt of VR job placement services, and participation in postsecondary education are all correlated with improved employment outcomes for youth with ASD.^{6–10}

Despite this increase in research, there has been a paucity of research regarding the needs of military-dependent and -connected youth. Findings thus far indicate that militarydependent children with ASD often experience unique challenges in accessing and maintaining critical disabilityrelated services. For example, frequent moves may disrupt, delay, or limit access to local resources to support youth with ASD.¹¹ In a Department of Defense funded survey of five states with large military populations, school districts reported no differences in the availability of special education services for military-dependent students with ASD but acknowledged challenges related to frequent moves, such as obtaining complete educational records, lack of continuity in services, increasing parental involvement in school activities, and implementing individualized educational programs originally written in other locations. 12 Davis and Finke found that military dependents with ASD did not consistently

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receive the depth of supports and services recommended as evidence-based practices. ¹³ Families also reported delays in accessing needed supports and services for their children with ASD because of frequent moves. Findings from research conducted thus far suggest that military-specific experiences (eg, deployments, relocations) may lead to increased stress, lower social skills, and increased maladaptive behavior for individuals with ASD over time. To date, however, no intervention studies have investigated the efficacy of treatment models to improve employment outcomes for military-dependent or -connected youth with ASD.

Project SEARCH + ASD Supports (PS + ASD) is a research-based transition to employment intervention for transition-aged youth with ASD, which has promising applications for military-dependent and military-connected youth with ASD. In the PS + ASD model, high school students with ASD participate in a 9-month, communitybased internship program hosted at a local business. The PS + ASD model utilizes a wide range of ASD-specific, evidence-based practices to increase students' accuracy and independence at work and develop workplace-appropriate skills and behaviors. 14 The PS + ASD model relies heavily on principles of applied behavioral analysis (ABA) to address problem behaviors and teach skills. ABA uses behavioral principles to guide techniques and instructional procedures for teaching specific behaviors, while simultaneously evaluating the effectiveness of these techniques through data collection. 15 In two randomized clinical trials, PS + ASD resulted in significantly better employment outcomes and reduced support needs up to 12 months after completion of the intervention. 15-17 Participants with ASD and significant impact randomly assigned to the PS + ASD condition were able to acquire and maintain competitive integrated employment (CIE) upon graduation from high school when provided with intensive internships and applied behavior analytic instruction. 15–17

The purpose of the current study is to investigate the effects of the PS+ASD model, modified for military-dependent and -connected youth with ASD on employment outcomes. This paper reports preliminary outcomes following the first year of PS+ASD implementation at a military installation in the southeastern United States. It describes internship experiences and initial employment outcomes to date for the first cohort of study participants.

METHODS

This paper reports preliminary outcomes from Year One of a Congressionally Directed Medical Research Programs funded study examining the efficacy of the PS + ASD on the employment outcomes of 18- to 22-year-old military-dependent and military-connected youth with ASD. The study was supervised by the Virginia Commonwealth University Institutional Review Board, the U. S. Army Medical Research and Development Command Human Research Protection Office, and the Virginia Department for Aging and

Rehabilitation Services Human Research Review Committee. All participants provided informed consent and, when applicable, assent before participating in any study procedures. This study is registered at clinicaltrials.gov under the identifier NCT04001790.

Research Design

The study utilizes a randomized, waitlist controlled trial. Over the course of the 3-year study, approximately 38 subjects will be enrolled and randomized in a 1:0.8 ratio to treatment or waitlist control condition. During Year One, 14 participants were enrolled with six randomized into the treatment group and eight participants randomized into the waitlist control group.

Waitlist control group participants received public schoolbased, special education transition services, that is, "business as usual," including participation in hands-on work training in community and/or school settings and classroom-based instruction on functional and academic skills. Waitlist participants remain in the control condition for 12 months postenrollment.

This paper represents a preliminary descriptive review of findings from the first year of implementation. Future analyses will include discussion of the impact of the waitlist control condition on outcomes. Even so the strength of findings from previous research with a conservative odds ratio of the PS + ASD group achieving CIE at 4.5 times the rate of the control condition, ethical practice demanded a randomization scheme favoring access to the treatment condition for participants.

Intervention

The Project SEARCH model is an intensive 9-month job training program for youth with developmental disabilities in their last year of high school. Instead of attending assigned high schools, Project SEARCH students are embedded in a large community business such as a hospital, government complex, or banking center, where they rotate through three 10- to 12-week internships within the business in order to learn marketable skills, social communication, and adaptive behavior for employment. Over the course of a school year, students complete three internships based on their individualized interests and strengths, while also participating in daily classroom-based instruction on employability skills.¹⁸ In order to better meet the unique needs of youth with ASD, Wehman et al. enhanced the Project SEARCH model by adding autism-specific supports: (a) onsite, intensive, systematic instruction using ABA principles; (b) onsite support and consultation from a behavior/autism specialist; and (c) intensive staff training in ASD and the Project SEARCH Model. 15-17

Participants

Study participants were recruited from three school districts and a regional public day school program for students with

ASD, all of which surrounded the military installation hosting the PS + ASD program. Inclusion criteria required participants to be a military-dependent or -connected youth between the ages of 18 and 21 and have a medical or educational diagnosis of ASD. Accepted diagnoses include autism, pervasive developmental disorder—not otherwise specified. Diagnoses were confirmed through reviews of educational and/or medical records. Participants with comorbid disorders, including intellectual disability, behavioral challenges (eg, clinical histories significant for elopement, aggression, verbal outbursts, compulsive behaviors), and other medical and mental health disorders (eg, seizure disorder, anxiety disorders), were also included in this study. In addition, participants had to be entering their final year of high school in one of the participating school districts, be eligible to receive VR services, and be independent in self-care (able to use the toilet, eat, and transition between locations with minimal assistance). Participants were identified as military-dependent youth if their parents or legal guardians were active duty military members, served in the military reserves, or were military retirees. Participants were identified as military-connected youth if they had immediate family members who were military veterans or were civilians who worked for the military.

This group of participants were mainly male (78%) and ethnically diverse with 43% Caucasian, 50% African American, and 7% Hispanic. Their ages ranged from 18 to 21. All study participants were working toward high school special education certificates of completion versus standard diplomas. Participants required significant support in requesting help, problem solving, and adjusting to changes in established routines and schedules. Although all participants had established systems of communication, their verbal communication skills were limited. The majority of participants used single words or short phrases to communicate their wants and needs to others. Participants also demonstrated difficulties in critical work-related social communication skills, including interacting with coworkers and customers, accepting supervision, accepting correction, and understanding workplace social expectations.

Setting

The setting for the study is an army installation located in the southeastern United States. The PS + ASD program is housed on the installation and includes dedicated space within the installation's education center for daily classroom instruction. All internship sites are located within a 1.2 mile radius of the education center, and participants walk back and forth to their assigned internships from the education center each day. During Year One of implementation, multiple organizations located on the installation hosted PS + ASD participants in internship experiences, including the commissary, department store, food court, outpatient medical center, fitness center, restaurant/event venue, and hotel.

Modifying the Intervention for the Military Environment

In order to meet the needs of military dependents and military installation businesses, the PS + ASD intervention required some adjustment for this environment. Specifically, command approval and support were keys in implementing this intervention on a military instillation. Thus, several factors facilitated development of multiple internship opportunities across businesses on base for treatment group participants. First, a Memo of Understanding was created with and approved by the installation's commander, school district partners, the state department of VR, and the university. The Memo of Understanding provided clear guidance regarding each entity's responsibilities and rights and also signaled the installation's support of the program. Second, the installation commander scheduled an introductory meeting with researchers and the installation's leadership team, which included managers from the various business organizations on post. At this meeting, researchers described the study, the structure of the PS + ASD program, and business responsibilities when hosting interns. This meeting led to multiple follow-up meetings with specific business organizations to discuss internships. Managers and frontline supervisors learned about supports and services available to interns and participating businesses from PS + ASD staff and how hosting interns could bring value to their businesses (eg, new recruitment pool for entry-level positions, support in addressing unmet business needs, benefit to local military families). Addressing unmet business needs, in particular, is associated in the research literature with successful job development for individuals with significant disabilities by learning about the business through careful observation and discussions with key stakeholders and then identifying how the individual with a disability could help the business improve efficiency, productivity, and/or quality. ^{19,20}

In addition, the PS + ASD intervention required the implementation of individualized evidence-based instructional strategies. The PS + ASD staff utilized a variety of ASD evidence-based practices on internships to increase workplace-appropriate behaviors and build employment skills. For example, participants were taught to use visual schedules, visual cues, and video prompts to complete internship tasks accurately and independently. Importantly, the PS + ASD model incorporates ABA techniques and positive behavior supports to address problem behaviors occurring within workplace settings.¹⁵ Multistep work processes were task analyzed in order to facilitate participants' acquisition of complex work skills. In the current study, individualized behavioral assessments and context-specific behavioral interventions were implemented in order to decrease problem behaviors and increase workplace-appropriate replacement behaviors. 15-17 Participants were also matched to internships based on individualized strengths and interests, which likely increased student motivation and success within the workplace setting. 14,15 Finally, the intensity of the internship model, in which students participated in a series of internships 4 hours a day for 10 to 12 weeks, provided multiple, sustained opportunities in real-life settings to acquire a wide range of essential employment skills. [15–17] (Supplementary Table S1) describes several autism-specific supports used in internship settings with Year One treatment group participants.

Measures and Data Collection

Data were collected at baseline, 12 and 18 months postenrollment into the study. As this is a preliminary review of findings, this review only includes data collected at baseline and 12 months postenrollment. At baseline, demographic data are collected on participants' age, gender, and race. Descriptive data are also collected on military dependents with ASD's parents' military status and participants' work, internship, and educational experiences.

The primary measure described in this paper is the CIE outcomes of Year One participants. CIE was defined as the acquisition of paid employment in a community business where (a) wages were at least minimum wage or higher; (b) wages were scaled to the same wage as nondisabled workers performing the same or similar tasks; and (c) the employee with ASD interacted with other employees, and where appropriate to the work performed, other persons who were not individuals with disabilities.¹⁵ Preliminary CIE outcome data were reported by all participants and/or their family members at the 12-month postenrollment data collection point using the Vocational Index for Adults with Autism Spectrum Disorders. 21 Employed participants also provided information on (a) the name of the business where they were employed, (b) hire date, (c) job title, (d) hourly pay rate, (e) weekly hours worked, (f) main tasks performed at work, and (g) benefits received through work (ie, health insurance, life insurance, employer sponsored retirement funds).

RESULTS

Internship Experiences

During the first year of intervention implementation, 14 unique internship experiences were developed across seven business partner organizations on the joint base military installation. All PS + ASD participants completed three different internships over the course of the school year; a few students worked at the same internship location at different points in time (ie, one participant worked at the grocery store during the first internship cycle; another participant worked there during the second internship). Internship partner organizations included a grocery store, an outpatient medical center, a department store, a food court, a restaurant/event venue, a fitness center, and a hotel. Internship experiences focused on the development of skills needed for successful entry-level employment in a variety of fields. The PS + ASDparticipants gained real-life experience and skills in stocking and organizing, merchandising, office support/clerical work,

basic patient care, food service, event setup, customer service, and housekeeping. Please see (Supplementary Table S2) for additional information on internships offered during Year One.

Each internship site had specific prescreening requirements that had to be completed before internships began. The PS + ASD staff worked collaboratively with business partners to identify and complete all prescribed business screening processes. For example, in the food court, all interns had to complete a food handler's course. The PS + ASD staff worked with the installation's occupational health staff to arrange for interns to complete the food handler's certification course offered by the installation. Next, PS + ASD staff assisted interns in completing employment paperwork and a background check through the food court's human resources department. Finally, interns were provided instructional support for a series of online training modules that had to be completed before starting work. In each instance, PS + ASDstaff assisted interns to successfully navigate prescreening processes while coordinating with partners to ensure that all business-related requirements were met before the internship starting.

Preliminary Employment Outcomes

At the 12-month postenrollment data collection point, five out of six PS + ASD treatment group participants had accepted employment offers at some point since completing the program, for an overall employment rate of 83.3%. Four of the five positions were competitive, integrated federal positions, the fifth position was CIE in the individual's home community. All four of the federal positions resulted from internship experiences within the hiring businesses. The PS + ASD treatment group participants obtained positions in the hospitality, retail, grocery, and fitness sectors. Weekly hours worked ranged from 20 to 40 hours per week. Earned hourly wages ranged from \$8.00/h to \$11.00/h. Finally, three out of five of the employed treatment group participants were offered benefits (ie, health insurance, paid leave, investment opportunities for retirement) through their employers. None of the control group participants gained CIE at the 12-month postenrollment data collection point. One participant was working in a sheltered workshop for \$7.25 per hour 16 hours a week. Table I summarizes preliminary employment outcomes for Year One participants.

DISCUSSION

This paper reports preliminary results following Year One of a 3-year study comparing the implementation of PS + ASD for military-dependent and -connected youth with ASD on a military installation with business as usual. Fourteen unique internship experiences were developed across seven business organizations on that military installation. This intervention may have resulted in high CIE outcomes for the treatment

Position Title Duties Hourly Wage Weekly Hours Federal Position Benefits \$8.31 25 Laborer Inventory and deliver clean linen to hotel floors, inventory and ship out dirty linen to be cleaned \$9.08 25 Custodian Clean and maintain inside common areas and Yes Yes outside grounds of the hotel \$8.00 20 Bagger Bag groceries, retrieve shopping carts, assist No No customers with groceries 25 Store Associate Sort, hang, and organize clothes \$8.00 Yes No 40 Recreation Assist with front desk operations, clean and check \$11.00 Yes Yes Assistant equipment

TABLE I. Preliminary Employment Outcomes for Year One Treatment Group Participants

group participants (5/6 gained CIE) while the waitlist control group reported a much lower employment rate (1/8 employed, but not in CIE). PS + ASD is comprised of five important elements that may increase its success in preparing militarydependent and -connected youth with ASD for communitybased integrated employment. They are (a) community-based, intensive, integrated internship experiences; (b) direct instruction in work skills that are in high demand and employer valued social behavior; (c) delivery of instruction through the use of evidence-based practices in ASD; (d) direct and regular collaboration between school and adult service agencies to deliver the intervention; and (e) providing the intervention on a military base, which allows for generalization to other bases as the family is relocated or deployed. These five aspects of the intervention might result in providing transition-aged military-dependent and -connected youth with ASD the necessary skills to gain competitive, integrated employment. Considered in total, the sustained practice opportunities youth in the PS + ASD treatment group had to acquire a variety of reallife entry-level work skills and make professional connections with multiple potential employers, as compared with youth in the waitlist control group, may account for the differences in preliminary employment outcomes between the two groups.

Successful Employment Outcomes

Although recent estimates suggest individuals with disabilities are more likely to be employed in the government sector than individuals without disabilities, the overall federal government employment rate for persons with any type of disability is $2.8\%.^{22}$ The number of federal employment positions obtained by Year One PS + ASD treatment group participants is very promising and suggests that military-dependent and connected youth with ASD may be an untapped labor pool for federal employers seeking entry-level employees.

Several possibilities may explain the high federal employment rate of treatment group participants. First, federal positions frequently require specific skills and work experiences. Through internship experiences, participants may have gained the necessary skills and experiences to successfully compete for open positions. Second, because participants completed a

series of internships on the military installation, it may have been easier to match participants with federal jobs utilizing their unique strengths and skills. Third, the employment specialist involved in the study was skilled in providing supported employment services to young adults with ASD and familiar with military organizations and federal hiring systems. Highly skilled and trained employment specialists are essential in increasing successful employment outcomes for individuals with significant disabilities. 19,23,24 The expertise and experience of the PS + ASD program's employment specialist may have contributed to the successful employment outcomes described here. Finally, internships may have allowed employers to get to know participants personally and see their value as future employees. Prior research indicates that employers with familiarity in working with individuals with disabilities are more likely to hire individuals with disabilities.²⁵ The PS + ASD internship model may have reduced stigma and challenged stereotypes around disability, especially ASD, while highlighting participants' capacity to perform essential skills and functions of entry-level work within those business organizations.

Limitations

There are several limitations to the results reported here. Most significantly, these findings describe preliminary results from 1 year of a 3-year study. It will be critical to compare these results to outcomes in subsequent years with different students. Analysis of data collected at the 18-month mark will also be useful in determining if participants maintain employment over time. Comparing treatment and waitlist control group outcomes will be needed to determine the efficacy of the PS + ASD model. Finally, while military deployments and relocations are a common part of military family life, there were no deployments or relocations for treatment group participants during the first year of the study. It remains to be seen how relocations or deployments may affect employment outcomes for military-dependent youth with ASD.

CONCLUSIONS

This paper describes preliminary outcomes from Year One implementation of the PS + ASD model for

military-dependent and -connected youth with ASD. The results, both in terms of internships developed and work outcomes, suggest that the PS + ASD model may be well suited to meet both the broader needs of military communities and the more specific needs of military-dependent and -connected youth with ASD as they make the transition from high school to work. Preliminary employment outcomes thus far highlight the importance of integrated work experiences during high school to improve employment outcomes; increasing knowledge of ASD by family members, caretakers, service providers, and employers; increasing knowledge of the needs of military-dependent and -connected youth with ASD; and providing consistent implementation of research-based practices.

SUPPLEMENTARY MATERIAL

Supplementary material is available at MILMED online.

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