

Transition Supports to Students with Mental Retardation: An Examination of Data from the National Longitudinal Transition Study 2

Antonis Katsiyannis
Clemson University

Dalun Zhang
Texas A&M University

Nancy Woodruff and April Dixon
Clemson University

Abstract: Effective transition planning is of paramount importance in maximizing post school outcomes for students with disabilities. The purpose of this study is to examine data from the National Longitudinal Transition Study – 2 regarding the transition planning for students with mental retardation. In addition, for comparison purposes, data on transition planning for emotional/behavioral disorder (E/BD) and learning disabilities (LD) students were also examined. Findings from this study indicate that (a) nearly 60% of students with mental retardation (MR) had their transition planning begun by age 14; (b) students with MR were less involved in their transition planning (about 10% did not participate at all), less likely to provide input (less than half of those participating), and more likely to report no progress towards transition goals than the other two groups of students; (c) general educators' involvement in MR students' transition planning was minimal though related service personnel was more involved; (d) a small percentage of students with MR had postsecondary education as a transition goal, while more of them had sheltered and supported employment as a transition goal; (e) students with MR were more likely to have other agency personnel involved in transition planning.

Although access to educational services for students with disabilities has been realized as the result of federal legislation, the nature of services provided and in particular, specific post school outcomes have been subject to controversy and generally considered inadequate (see Blackorby & Wagner, 1996; Finn, Rotherham, & Hokanson, 2001). Youths and young adults with disabilities continued to experience high school failure and dropout, lower employment rates, lower participation in post-secondary education, and lower satisfaction with their adult lives. Researchers, disability advocates, and practitioners indicate the fragmented system of services within high schools and adult services contribute to the failure of special education to prepare these

youths for their future (Hanley-Maxwell, Pogoloff, & Whitney-Thomas, 1998).

In order to improve outcomes, transition planning that effectively assesses individual needs, results in development of an individualized transition plan, ensures coordination with adult service agencies, and involves parents is necessary (Hardman, Drew, & Egan, 2002; McDonnell, Hardman, & McDonnell, 2003). Models, such as Teaching All Skills for Employment and Life, which provides a comprehensive approach to transition planning by incorporating these components, have been well perceived by consumers (Aspel, Bettis, Quinn, Test, & Wood, 1999).

The literature emphasizes the importance of student-centered planning in the transition process (Benz, Lindstrom, & Yovanoff, 2000; Hughes & Carter, 2000; Wehmeyer et al., 1998). Ingredients of effective practice involves a strength-based assessment, which directs the professional to identify and build on the existing strengths and skills that the child and family present (Epstein, Rudolph, & Ep-

Correspondence concerning this article should be addressed to Dalun Zhang, Department of Educational Psychology, 4225 Texas A&M University, College Station, TX 77843-4225.

stein, 2000); a career assessment plan based on individual needs and circumstances (Rojewski, 2002); and parent and student active participation in the IEP meeting (Field, Martin, Miller, Ward, & Wehmeyer, 1998; Roessler, Shearin, & Williams, 2000; Thoma, 1999). Typical transition support by educators appears focused on ensuring that students successfully completed the appropriate academic and vocational course work (Powers, Turner, Matuszewski, Wilson, & Loesch, 1999). While in high school, participation in work experiences, occupational education, and receiving special education services in integrated settings were associated with post-school employment (Colley & Jamison, 1998). Karpinski, Neubert, and Graham (1992) also found that graduates had worked proportionately more time since high school than drop-outs and had been employed in their current job more than twice as long (phone interviews were conducted 21 and 28 months after leaving school).

To maximize involvement of parents, Hutchins and Renzaglia (1998) suggest use of the *Family Vocational Interview*, a means for communicating with family members and exploring their concerns and issues related to current and future vocational instruction and experiences on a continuous basis. The questionnaire has six parts: parental expectations, experiences and preferences, personal needs, family support, transportation and wages and benefits. Such interactions need to be personalized to gain family trust and meetings should bridge family and professional orientations (Cooney, 2002). Indeed, parents of adolescents with disabilities consistently identified the quality of the relationship they had with service providers as the key factor that effected their involvement in the transition planning (deFur, Todd-Allen, & Getzel, 2001).

A school-based interagency transition team is the strongest predictor of policy compliance and best practice (McMahan & Baer, 2001). Although most students and parents expected professionals from adult service agencies to assist students after graduation, these professionals were rarely involved in the transition planning process (Thompson, Fulk, & Piercy, 2000). Rehabilitation counselors often are not being invited to transition planning and stu-

dents with disabilities infrequently use rehabilitation services, particularly in the transition planning process (Agran, Cain, & Cavin, 2002). Further, available school-based resources, such as school counselors, tend to be underutilized, particularly in identifying student needs and facilitating success in post-school settings (Fox, Wandry, Pruitt, & Anderson, 1998). Finally, effectiveness of these meetings may be compromised by gaps in knowledge and involvement in transition planning and service delivery among teachers of students with disabilities (Knott & Asselin, 1999).

Ultimately, effective planning will likely result in establishing a formal working relationship between students, parents and postschool case managers and adult service providers (prior to graduation); (b) identification of the services and resources that will facilitate employment and community participation; and (c) identification of systems that will ensure the maintenance of needed services (McDonnell et al., 2003). Unfortunately, addressing these key components in the transition process has often been challenging. Consequently, given the importance of transition planning in improving outcomes for students with disabilities, it is important that the adequacy of transition planning is examined. Available literature generally involves qualitative studies of small groups and position papers focusing on a single disability and a specific geographic region (e.g., Frank & Sitlington, 2000; Harvey, 2002). Availability of national data may enhance our understanding of current practice and may provide guidance for addressing areas of need. The purpose of this study was to examine National Longitudinal Transition Study – 2 (NLTS2, 2003) data regarding transition planning practice for students with mental retardation (MR). In addition, for comparison purposes, data on transition planning for emotional/behavioral disorder (E/BD) and learning disabilities (LD) students were also examined.

Method

Data Source

Data were drawn from tables reported by NLTS2 on its website (2003). Data tables in-

cluded four surveys: Wave 1 Parent Survey, Wave 1 Student School Program Survey, Wave 1 School Characteristics Survey, and Wave 1 Teacher Survey. For purpose of this examination, we extracted transition support data from the Wave 1 Student School Program Survey, which is available on the website (NLTS2). Types of data extracted included respondents' demographic information, focus students' information, and responses to questions in the "transition to adult life" category. Original data tables reported percentages of respondents in each different choice for every survey item, listed by each disability category. Number of individuals who responded to each item was also reported, listed separately by disability categories. We extracted data about students with mental retardation (MR). For comparison purpose, we also included data for students with learning disabilities (LD) and students with emotional/behavioral disorder (E/BD).

Respondents' and Focus Students' Information

There were 550 surveys completed for students with mental retardation, representing 10% of all 5481 respondents to the survey study. Among these respondents, 79.9% were Caucasians, 13.8% were African Americans, and 3.3% were from other ethnic backgrounds. These respondents' roles included (some with multiple roles) general education teacher (2%), special education teacher (81%), resource room teacher (17%), related service provider (2%), program specialist (7%), case manager (24%), speech psychologist (2%), guidance counselor (5%), administrator (2%), and other (14%). They were involved in a number of different services to the focus students: 71% in providing direct instruction to the focus students, 14% in related services, 37% in consultation services, 46% in case management, 13% in program administration, and 25% in supervising para-educators.

Results

Ages When Transition Planning Began

For the 519 respondents answering the question "Has there been planning for transition

to adult life for this student?", 87.8% of the students with MR had transition plans, compared to 89.3% for students with LD and 89.0% for students with E/BD. In terms of when transition planning began, more than half (57.7%) of students' with MR transition planning began when they reached 14 years of age. This was somewhat similar to students with LD (54.7%) and students with E/BD (53.9%). However, only 7.8% of students' with MR transition planning began before age 14, while 10.2% of students with LD and 11.3% of students with E/BD had their transition planning started before age 14.

Students' and Others' Participation in Transition Planning

Students' participation in their transition planning varied between students with MR and students with LD, as well as between students with MR and students with E/BD. Students with MR were less involved in their transition planning than the other two groups of students. Nonparticipation rate for students with MR was 10.6%, comparing to 3.8% and 6.0% for students with LD and E/BD, respectively. Students with MR were also less likely to provide input in discussing their transition plans (48.7% versus 60.5% for LD and 52.8% for E/BD) or take leadership during transition planning process (3.3% versus 14.6% for LD and 10.8% for E/BD).

Participation rates for others involved in student transition planning are summarized in Table 1. General education teachers' participation in transition planning for students with MR was substantially lower than for students with LD and E/BD. In contrast, related service personnel, vocational rehabilitation counselor and staff from other agencies' participations were substantially higher for students with MR than for students with LD and E/BD. Parent/guardian participation rates were similar across all three disability categories.

Post-High School Goals, Transition Instruction, and Linkages to Other Agencies

Post-high school goals are summarized in Table 2. Attending college was a goal for more than half of students with LD and nearly half

TABLE 1

Percentages of Parents and Professionals who Participated in Transition Planning

<i>Role</i>	<i>MR</i> <i>(n = 450)</i>	<i>LD</i> <i>(n = 426)</i>	<i>ED</i> <i>(n = 275)</i>
General education teacher	39.0	62.8	56.5
Special education teacher	99.3	97.3	99.4
School administrator	61.5	53.8	58.5
School counselor	54.5	61.8	71.4
Related service personnel	29.6	12.1	14.9
Parent/Guardian	83.1	84.5	83.7
Vocational rehabilitation counselor	22.6	12.8	12.4
Staff of other agencies	15.1	3.0	5.6

of students with E/BD, but was a goal for only 9.8% of students with MR. The percentage of students with MR who had a goal to attend postsecondary vocational training program was much higher than the percentage for attending college, but still a lot lower than students with LD and E/BD. More students with MR than those with LD and E/BD set goals to attain sheltered and supported employment.

Of the 427 respondents for students with MR responding to the question “Has this student received instruction specifically focused on transition planning?”, 75.8% of students with MR received instruction specifically focused on transition planning, while these numbers for students with LD and students with E/BD were 63.0% and 64.7%, respectively. In addition, 72.1% of 451 respondents reported that the transition plan for students with MR specified course of study to achieve

transition goals, while 75.6% of students with LD and 72.8% of students with E/BD had course of study specified. In terms of whether the student’s school program is well suited for preparing him or her to achieve transition goals, 452 respondents for students with MR reported: 37.7% very well suited, 41.8% fairly well suited, 17.1% somewhat well suited, and 3.4% not at all well suited. Similar pattern was also reported by respondents for students with E/BD (32.6% very well suited, 43.1% fairly well suited, 17.1% somewhat well suited, and 3.8% not at all well suited). The numbers for students with LD were higher (39.6% very well suited, 44.2% fairly well suited, and 14.6% somewhat well suited).

Table 3 contains percentages of students with MR who had contacts made to other agencies, listed comparatively with data for students with LD and E/BD. As indicated in

TABLE 2

Post-High School Primary Goals of Students’ Educational Programs

<i>Post-High School Goal</i>	<i>MR</i> <i>(n = 447)</i>	<i>LD</i> <i>(n = 417)</i>	<i>ED</i> <i>(n = 270)</i>
Attend a 2- or 4-year college	9.8	54.3	44.2
Attend a postsecondary vocational training program	25.5	43.3	44.2
Get competitive employment	44.1	57.1	57.8
Get into sheltered employment	19.9	*	*
Get supported employment	34.3	1.6	8.7
Live independently	51.4	49.8	53.3
Maximize functional independence	48.3	12.5	20.7
Enhance social/interpersonal relationships	45.6	16.2	45.4

* indicates there were not enough cases to accurately report percentages.

TABLE 3

Percentages of Students with MR, LD, and ED Who Had Contacts Made to other Agencies

<i>Agency</i>	<i>MR</i>	<i>LD</i>	<i>ED</i>
College (2- or 4-year)	10.9 (169)	26.4 (284)	17.7 (177)
Postsecondary vocational schools	16.5 (232)	26.2 (290)	23.4 (188)
State Vocational Rehabilitation agency	55.7 (316)	33.6 (275)	37.2 (186)
Other vocational training programs	33.5 (303)	26.7 (265)	21.5 (186)
Potential employers	28.6 (293)	17.2 (274)	24.4 (204)
Job placement programs or agencies	32.9 (301)	21.4 (265)	29.1 (201)
Supported employment programs	36.0 (294)	6.5 (193)	12.6 (153)
Sheltered workshops	23.9 (255)	*	*
Mental health agencies	21.3 (237)	*	16.5 (159)
Social Security Administration	29.9 (247)	5.4 (190)	9.7 (145)
Supervised residential support agencies	17.7 (250)	*	*
Adult day programs	17.1 (249)	*	*
Other social service agencies	32.2 (271)	12.4 (177)	21.4 (125)
Congregate care facilities or institutions	5.8 (219)	*	*

Note. Numbers in parentheses are numbers of respondents to that particular item.

* indicates there were not enough cases to accurately report the percentages.

Table 3, students with MR had fewer contacts made to post-secondary education, including both college and post-secondary vocational schools. However, substantial numbers of students with MR had contacts made to employment related agencies and programs, including vocational rehabilitation agencies, other vocational training programs, potential employers, job placement agencies, and supported employment. There were five types of agencies or programs that contacts were not made for students with LD and four were not made for students with E/BD.

Post-High School Services and Needs

In response to the question “Has information about services available after high school related to this student’s kind of disability been provided to his or her parents/guardians from or through the school system”, 61.6% of 418 respondents for students with MR reported yes, compared to 53.8% of 358 respondents for students with LD and 61.5% of 225 respondents for students with E/BD. Respondents also reported post-high school needs identified for the focus students. A comparative summary of these identified needs is shown in Table 4.

Student Progress toward Post-School Goals

Respondents reported the focus students’ progress toward goals for the transition to adulthood in four levels: no progress, a little progress, some progress, and a lot of progress. These data for students with MR, along with data for students with LD and E/BD are summarized in Table 5. As shown in Table 5, progress made by students with MR toward their transition goals was substantially slower than students with LD, but similar to students with E/BD across all goals. This is especially clear when combining some progress with a lot of progress. Percentages of no progress were higher for students with MR than for students with LD as well.

Discussion

In the 2002-2003 school year, 5,946,2002 students with disabilities age 6 to 21, received services across the states in regular (48.22%), resource (28.73%), and separate classrooms (19.02%). In the same year, 590,410 students with mental retardation received services in regular (10.94%), resource (30.52%), and separate classrooms (52.63%) (U.S. Department of Education, 2003). Overall, more than half of students with MR received services in

TABLE 4

Percentages of Students with Post-School Service or Program Needs Identified

<i>Post-High School Needs</i>	<i>MR</i> (<i>n</i> = 419)	<i>LD</i> (<i>n</i> = 392)	<i>ED</i> (<i>n</i> = 255)
Postsecondary education accommodation	23.0	55.0	41.6
Behavioral intervention	6.1	4.1	20.8
Mental health services	6.8	*	12.2
Occupational therapy	4.2	*	*
Physical therapy	3.2	0.0	0.0
Social work services	16.3	3.2	11.0
Speech/communication therapy or services	9.5	*	*
Supported living arrangement	20.3	*	*
Transportation assistance	23.1	*	*
Vocational training, placement, or support	65.9	32.4	38.7

* indicates there were not enough cases to accurately report percentages.

separate classes and about 10% received services in regular classrooms. In contrast, about half of students with all disabilities received services in regular classrooms with about 20% of them receiving services in separate classes. In the 2001-2002 academic year, students with MR exited special education with a diploma (17,660), certificate (12,120), or dropped out (9,290).

Findings from this study indicated that students with MR were less involved in their transition planning (about 10% did not participate at all), less likely to provide input (less than half of those participating) than the other two groups of students, and more likely to report no progress towards transition goals. Students, however, should be the “center” of

the transition process. According to Thoma, Rogan, and Baker (2001) teachers and parents made little investment in preparing students for their transition planning meetings; school personnel controlled meetings and interacted primarily with parents and other professionals. Wehmeyer (1998) pointed out that (a) active participation in the IEP process makes the student more motivated to pursue goals that they have helped select and (b) students who are involved in setting goals have more positive outcomes related to achieving those goals than with goals selected by others. Indeed, student involvement will enable students to see the connection between the present transition planning process and desired outcomes for the future (i.e., annual

TABLE 5

Percentages of Students Who Made Progress toward Transition Goals

<i>Goal</i>	<i>MR</i>				<i>LD</i>				<i>ED</i>			
	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>
How to leave school	5.9	32.8	44.3	17.0	2.8	15.6	46.9	34.7	8.3	31.4	34.8	25.4
Vocationally oriented goals	6.5	28.5	46.0	19.0	4.7	22.7	47.5	25.1	9.8	31.2	41.8	17.3
Postsecondary education	21.8	28.9	37.8	11.5	9.2	22.1	43.4	25.3	19.8	27.5	36.8	16.0
Independent living	6.4	32.0	40.5	21.1	3.9	12.3	41.7	42.2	8.3	25.5	38.2	28.0
Behavioral management	7.3	30.3	34.9	27.6	3.9	14.6	51.2	30.3	10.0	22.6	34.1	33.3
Social/interpersonal	4.8	28.4	43.9	22.9	3.0	11.8	50.5	34.7	9.6	22.9	42.2	25.3
Self-advocacy	11.2	37.0	37.8	14.0	3.7	20.5	46.4	29.4	12.5	26.8	38.6	22.2

1 = no progress, 2 = a little progress, 3 = some progress, 4 = a lot of progress.

goals and short-term objectives) and enhance the sense of ownership (Steere & Cavaiuolo, 2002).

Further, the need for sustained efforts beyond the confines of the IEP meeting should be emphasized. Devlieger and Trach (1999) argued that planning transition outcomes within the confines of the IEP meeting is too limited. This process assumes that transition outcomes can be determined within the confines of a meeting that includes all the important stakeholders. Often, school and agency efforts most often resulted in sheltered employment whereas personal or parent mediation resulted more often in self-employment and continuous education outcomes. Similarly, particularly with minority populations, Geenen, Powers, and Lopez-Vasquez (2001) reported that culturally and linguistically diverse (CLD) parents are active in the transition process and, in some instances their level of reported participation surpassed that of European-American parents in the majority of transition activities. Specifically, CLD parents were more heavily involved in talking to their children about post high school life (e.g., helping their children prepare for post secondary education, teaching their children to care about their disability). However, participation in school-based planning was low.

Findings also indicated that students with MR had fewer contacts made to post-secondary education, including both college and post-secondary vocational schools. However, substantial numbers of students with MR had contacts made to employment related agencies and programs, including vocational rehabilitation agencies, other vocational training programs, potential employers, job placement agencies, and supported employment. This is consistent with traditional belief and practice that focus transition planning on seeking employment and independent living for students with MR. Another reason for this was the common practice of involving related service personnel, vocational rehabilitation counselor and particularly, staff from other agencies. Research findings have consistently documented that effective transition programs involve a strong collaboration component. Such collaboration and cooperation among agencies serve several purposes such as eliminating service gaps, avoiding service duplication, in-

creasing efficient use of scarce resources, reducing professional territoriality, and increasing comprehensive planning and service delivery (Kohler, 1998).

Findings from this study should be viewed with caution as analyses were based on secondary data. These data, although drawn from a national sample, were already summarized (frequency rates) with minimal information about individual student characteristics. Future research is needed to examine the link between the transition planning process and specific post school outcomes. Indeed, identifying (and implementing) public school practices that are likely to result in improved post school outcomes in areas such as independent living, employment, post secondary education and training, and community involvement is needed to meet both legal mandates and professional responsibilities.

References

- Agran, M., Cain, H. M., & Cavin, M. D. (2002). Enhancing the involvement of rehabilitation counselors in the transition process. *Career Development for Exceptional Individuals, 25*, 141–155.
- Aspel, N., Bettis, G., Quinn, P., Test, D. W., & Wood, W. M. (1999). A collaborative process for planning transition services for all students with disabilities. *Career Development for Exceptional Individuals, 22*, 21–42.
- Benz, M. R., Lindstrom, L., & Yovanoff, P. (2000). Improving graduation and employment outcomes of students with disabilities. *Exceptional Children, 66*, 509–529.
- Blackorby, J., & Wagner, M. (1996). Longitudinal post-school outcomes of youth with disabilities: Findings from National Education Longitudinal Study. *Exceptional Children, 62*, 399–413.
- Cooney, F. B. (2002). Exploring perspectives on transition of youth with disabilities: Voices of young adults, parents, and professionals. *Mental Retardation, 40*, 425–435.
- Colley, D. A., & Jamison, D. (1998). Post school results for youth with disabilities: Key indicators and policy implications. *Career Development for Exceptional Individuals, 21*, 145–160.
- deFur, S. H., Todd-Allen, M., & Getzel, E. E. (2001). Parent participation in the transition planning process. *Career Development for Exceptional Individuals, 24*, 19–36.
- Devlieger, P. J., & Trach, J. S. (1999). Medication as a transition process: The impact on postschool employment outcomes. *Exceptional Children, 6*, 507–523.

- Epstein, M. H., Rudolph, S., & Epstein, A. A. (2000). Using strength-based assessment in transition planning. *Teaching Exceptional Children, 32*(6), 50–54.
- Field, S., Martin, J., Miller, R., Ward, M., & Wehmeyer, M. (1998). *A practical guide for teaching self-determination*. Reston, VA: The Council for Exceptional Children.
- Finn, C. E., Rotherham, A. J., & Hokanson, C. R. (Eds.). (2001). *Rethinking special education for a new century*. Washington, DC: Thomas B. Fordham Foundation and the Progressive Policy Institute.
- Fox, R. W., Wandry, D., Pruitt, P., & Anderson, G. (1998). School to adult life transitions for students with disabilities: Forging a new alliance. *Professional School Counseling, 1*(4), 48–52.
- Frank, A. R., & Sitlington, P. L. (2000). Young adults with mental disabilities- Does transition planning make a difference? *Education and Training in Mental Retardation and Developmental Disabilities, 35*, 119–134.
- Geenen, S., Powers, L. E., & Lopez-Vasquez, A. (2001). Multicultural aspects of parent involvement in transition planning. *Exceptional Children, 67*, 265–282.
- Hanley-Maxwell, C., Pogoloff, S. M., & Whitney-Thomas, J. (1998). Families: The heart of transition. In F. Rusch & J. G. Chadsey (Eds.), *Beyond high school: Transition from school to work* (pp. 234–264). Belmont, CA: Wadsworth.
- Hardman, M. L., Drew, C. J., & Egan, M. W. (2002). *Human exceptionality: Society, school and family* (7th ed.). Boston: Allyn & Bacon.
- Harvey, M. W. (2002). Comparison of postsecondary transitional outcomes between students with and without disabilities by secondary vocational education participation: Findings from the national education longitudinal study. *Career Development for Exceptional Individuals, 25*, 99–121.
- Hughes, C., & Carter, E. W. (2000). *The transition handbook*. Baltimore: Brookes.
- Hutchins, M. P., & Renzaglia, A. (1998). Interviewing families for effective transition to employment. *Teaching Exceptional Children, 30*(4), 72–78.
- Karpinski, M. J., Neubert, D. A., & Graham, S. (1992). A follow-up study of postsecondary outcomes for graduates and dropouts with mild disabilities in a rural setting. *Journal of Learning Disabilities, 25*, 376–385.
- Knott, L., & Asselin, S. B. (1999). Transition competencies: Perception of secondary special education teachers. *Teacher Education and Special Education, 22*, 55–65.
- Kohler, P. D. (1998). Implementing a transition perspective of education: A comprehensive approach to planning and delivering secondary education and transition services. In F. R. Rusch & J. G. Chadsey (Eds.), *Beyond high school: Transition from school to work* (pp. 179–205). Belmont, CA: Wadsworth.
- McDonnell, J., Hardman, M. L., & McDonnell, A. (2003). *Introduction to people with severe disabilities* (2nd ed.). Boston: Allyn & Bacon.
- McMahan, R., & Baer, R. (2001). IDEA transition policy compliance and best practice: Perceptions of transition stakeholders. *Career Development for Exceptional Individuals, 24*, 169–184.
- National Longitudinal Transition Study – 2 (2003). *Student school program survey*. Retrieved November 16, 2003, from <http://www.nlts2.org/>
- Powers, L. E., Turner, A., Matuszewski, J., Wilson, R., & Loesch, C. (1999). A qualitative analysis of student involvement in transition planning. *The Journal for Vocational Special Needs Education, 21*(3), 18–26.
- Rojewski, J. W. (2002). Career assessment for adolescents with mild disabilities: Critical concerns for transition planning. *Career Development for Exceptional Individuals, 25*, 73–95.
- Roessler, R., Shearin, A., & Williams, E. (2000). Three recommendations to improve transition planning in the IEP. *The Journal for Vocational Special Needs Education, 22*(2), 31–36.
- Steere, D., & Cavauiuolo, D. (2002). Connecting outcomes, goals, and objectives in transition planning. *Teaching Exceptional Children, 34*(6), 54–59.
- Thoma, C. A. (1999). Supporting student voice in transition planning. *Teaching Exceptional Children, 31*(5), 4–9.
- Thoma, C. A., Rogan, P., & Baker, S. R. (2001). Student involvement in transition planning: Unheard voices. *Education and Training in Mental Retardation and Developmental Disabilities, 36*, 16–29.
- Thompson, J. R., Fulk, B. M., & Piercy, S. W. (2000). Do individualized transition plans match the postschool projections of students with learning disabilities and their parents? *Career Development for Exceptional Individuals, 23*, 3–25.
- U. S. Department of Education. (2003). *Individuals with Disabilities Education Act (IDEA) data*. Retrieved November 30, 2003 from <http://www.ideadata.org/PartBReport.asp>
- Wehmeyer, M. L. (1998). Student involvement in education planning, decision-making, and instruction: An idea whose time has arrived. In M. Wehmeyer & D. Sands (Eds.), *Making it happen: Student involvement in educational planning, decision-making and instruction* (pp. 3–23). Baltimore: Brookes.

Received: 30 December 2003
 Initial Acceptance: 23 February 2004
 Final Acceptance: 1 June 2004