EMPOWERING PEOPLE WITH DISABILITIES THROUGH VOCATIONAL REHABILITATION COUNSELING

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As a result of systemic “castification” processes and the rapidly changing world of work, assisting people with disabilities with obtaining and maintaining high-quality employment is an increasingly difficult task. Vocational rehabilitation (VR) counseling thus can be instrumental for enhancing the career success and quality of life of consumers with disabilities. In this article, a framework that describes how effective VR counseling promotes the empowerment of consumers with disabilities is presented. Following a description of the primary model constructs of working alliance, informed choice, self-determination, and empowerment, the implications of the framework for VR counselor training and practice are discussed.

The world of work is changing at a rapid pace, and the changes are likely to accelerate during the 21st century. Employment arrangements such as temporary employment, short-term hires, contractual positions, leased workers, and on-call and part-time workers have and will continue to influence the career development of all workers (Institute on Rehabilitation Issues, 1999). These changes are having a substantial impact on the life roles of individuals with disabilities, the settings in which they live and work and the events that occur in their lives. At the same time, current disability policy in the United States focuses on the inclusion, independence and empowerment of people with disabilities (Kosciulek, 2000). Thus, vocational rehabilitation (VR) counseling with people with disabilities must be a dynamic, creative and highly individualized process. Effective VR counseling can be instrumental for empowering the life choices, inclusion and independence of people with disabilities. In turn, empowerment, inclusion and independence will lead to high-quality employment and fulfilling careers for individuals with disabilities (O’Day, 1999).

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Employment and Career Challenges Encountered by People With Disabilities

The ever-changing nature of work presents new problems for people with disabilities in finding and maintaining suitable employment. Major trends such as globalization of the American economy, technology and population shifts are changing the nature of work and worker skill requirements (Ryan, 1995). Despite rehabilitation efforts, a majority of Americans with disabilities between the ages of 16 and 64 are not employed and that disparity has not changed since 1986, despite the fact that a majority of non-employed people with disabilities in the working age population want to work (National Organization on Disability, 2000). In general, the vocational adjustment of people with disabilities has been characterized by limited salable work skills, low income, underemployment and unemployment (Bruyere et al., 2002; Curnow, 1989).

In addition, according to Harrington (1997), high school students with disabilities frequently leave school without marketable skills or the ability to function independently. Given that work is a central force in people’s lives, dramatically high rates of unemployment and underemployment can adversely affect not only the economic and social status of individuals with disabilities, but also their self-image. Given that work is a central force in people’s lives, dramatically high rates of unemployment and underemployment can adversely affect not only the economic and social status of individuals with disabilities, but also their self-image. Given that work is a central force in people’s lives, dramatically high rates of unemployment and underemployment can adversely affect not only the economic and social status of individuals with disabilities, but also their self-image. Given that work is a central force in people’s lives, dramatically high rates of unemployment and underemployment can adversely affect not only the economic and social status of individuals with disabilities, but also their self-image.

Decision-Making Ability. Lack of opportunities to participate in decision making, to form a perception of oneself as a worker and to test self-competencies can be the outcome of limited early experiences and can impede career development. The poorly defined self-concept, ambivalence about obtaining work and limited occupational information reported by people with disabilities is indicative of distortions that could result in unrealistic vocational aspirations or decisions. Harrington (1997) and Parent (1993) have aptly described how many individuals with disabilities have had little opportunity for successful experience in decision making and, therefore, lack competence in making decisions.

Negative Worker Self-Concept Resulting from Castification Processes. Lack of experience and difficulty in decision making are not solely the result of disability, but also an outcome of social attitudes and stereotypes. Social attitudes toward disability may be as important as the disability itself in that the negative attitude of others plays a part in shaping the life role of the individual with disability (Fitch, 2002). The outcome of this long-term exposure to prejudicial attitudes may result in a negative self-appraisal and a negative worker self-concept.

Society generally holds diminished expectations for people with disabilities (Schroeder, 1995). These attitudes are pervasive; they influence all of us to some degree. As a class, people with disabilities have suffered discrimination. Individuals with disabilities face common social problems of stigma,
marginality and discrimination, similar to those faced by members of racial and ethnic minority groups (Fine & Asch, 1988). Further, given that disability rates among racial and ethnic minority group members are proportionally higher than rates in the U.S. population overall, many individuals with disabilities face double jeopardy (Trueba, 1993).

Szymanski and Trueba (1994) maintained that at least some of the difficulties faced by people with disabilities are not the result of functional impairments related to the disability, but rather are the result of castification processes embedded in societal institutions for rehabilitation and education and enforced by well-meaning professionals. Castification processes have their roots in a determinist view in which people who are different are viewed as somehow less “human” or less capable (Trueba, Cheng & Ima, 1993). Problems of castification plague services to people with disabilities because the same categories of impairment and functional limitation (constructed mostly by people without disabilities) are used to determine eligibility for services, to prescribe interventions and, on occasion, to explain failure. The constructs and those who use them become agents of castification.

The disempowering nature of these classification systems is often all too apparent to people with disabilities applying for rehabilitation services in an effort to enhance self-sufficiency and personal independence (Scotch, 2000). Rather than being treated as adults with free or equal status, they may be confronted by persons asserting a right to determine what kinds of services they need. Thus, it is critically important that VR counselors reject paternalistic castification processes and actively work to foster empowerment among consumers with disabilities during the VR process (Kosciulek, 2003). To accomplish this important task, we need conceptual frameworks useful for understanding and guiding empowering VR counseling approaches.

In this model, it is hypothesized that the development of an effective counselor-consumer working alliance is a prerequisite for facilitating consumer informed choice and self-determination during the VR process. Further, the framework posits that proficient informed choice and self-determination are necessary for increasing consumer empowerment. In order to enhance reader understanding and application of the VR counseling empowerment framework, each of the model constructs is defined and described in detail below.

**Counselor-Client Working Alliance.**

The central factor in all successful counseling processes, including VR counseling, is an effective working alliance. Researchers estimate that as much as 30 percent of the variance in counseling outcome can be attributed to the counselor-client working alliance (Lambert, 1992). As one of the essential components for success in counseling, an effective working alliance is represented by a positive collaboration between a consumer and a counselor (Kosciulek, Chan, Lustig, Strauser & Pichette, 2001). The working alliance is comprised of the following components: tasks, bonds and goals (Horvath, 1994).

**Tasks** are those in-counseling behaviors and cognitions that form the substance of the counseling process. In VR counseling, the goal aspect of the working...
alliance is clear and specific: the attainment of an employment outcome.

**Bonds** are the positive interpersonal attachments between a consumer and counselor that include such aspects as mutual trust, acceptance and confidence.

Consistent with the working alliance concept, counseling in VR is the collaborative process between the individual consumer and counselor in which they assess the individual’s strengths, resources, priorities, abilities, capabilities, interests and rehabilitation needs. In this process, the counselor and consumer also explore, clarify and assess employment and career options, address barriers to be overcome, and develop and carry out a plan of action that will result in meaningful employment for the individual based on his or her informed choice. In discussing the working alliance in the VR process, Lustig, Strauser, Rice and Rucker (2002) noted that the two most significant factors in this realm are the quality of the consumer’s participation and the degree to which the consumer is motivated, engaged and joined in the VR process. Consumers with disabilities who are engaged and connected with counselors will benefit most from VR counseling (Chan, Shaw, McMahon, Koch & Strauser, 1997).

The working alliance can be most beneficial and an excellent predictor of outcome for consumers with disabilities when:

- counselors and consumers agree on goals and preferred outcomes,
- counselors collaborate with consumers on tasks to accomplish those goals and preferred outcomes (Lustig et al., 2002), and
- consumers have a favorable view of the counselor-consumer relationship (Bertolino & O’Hanlon, 2002).

An empowerment approach to forming an effective VR counselor-consumer working alliance includes elements that both consumers and counselors bring to the relationship. Primary elements for consumers include taking responsibility for their own decision making and for their own actions and consequences of their actions. Key elements for counselors include the following: knowing and admitting their limitations (e.g., lack of knowledge of a specific disability condition) and displaying unconditional positive regard for the consumers they serve (National Institute on Disability and Rehabilitation Research [NIDRR], 1994).

Specific counseling techniques that contribute to the development of an effective working alliance and consumer empowerment include the following:

- treating all consumers as adults regardless of the severity of the disability,
- using age-appropriate language and techniques,
- placing emphasis on consumer strengths, and
- respecting consumer values and beliefs.

**Consumer Informed Choice.** As employment is a key to independence and improved quality of life for people with disabilities, choice in the selection of employment goals and rehabilitation services necessary to meet those goals is a critical element for empowering persons with disabilities (Kosciulek, 2000). In the VR counseling empowerment framework it is hypothesized that an effective counselor-consumer working alliance leads to productive informed choice in the VR process. Consumer choice in vocational goals and services emerged as an important component of VR in the 1990s. However, choice is not a new concept in the field. Over 40 years ago, Levine (1959) described the partnership between the consumer and counselor and the counselor’s role in assisting the individual in making choices and decisions. During this same time period, Patterson (1960) encouraged counselors to facilitate independence by helping consumers “go through the process” of deciding what they should have and should do. He noted, “The counselor can have no stereotypes of occupational choices” (p. 115). Both of these examples fo-
Focus on vocational choice and, although they go back more than 40 years, they are consistent with current principles related to enhancing the counselor-consumer partnership, facilitating empowerment and fostering choice and independence in the rehabilitation process.

The philosophy behind informed choice is that people with disabilities should have control over the processes and services that affect their lives, and that those who have control over their own VR planning will experience better employment outcomes than those who do not. Informed choice is practiced when VR counselors give consumers with disabilities the tools to learn how to make choices, and the information they need to make their own choices.

Informed choice is the process by which individuals participating in VR programs make decisions about their assessment services, vocational goals, the services and the service providers that are necessary to reach those goals and how those services will be procured. The informed choice process begins with the individual’s values, interests and characteristics and proceeds to an evaluation of availability of resources and alternatives, including the labor market. Implementing informed choice requires that the VR counselor listens carefully, communicates clearly and gathers and analyzes information without bias. The VR counselor works with the consumer to make choices and to evaluate their impact. Finally, in an informed-choice model of VR, the counselor supports the individual in setting goals, making plans and following through with decisions, with the aim of achieving meaningful employment.

It is presumed that a consumer’s skills and abilities to exercise informed choice can be developed through use of self-assessment techniques, training and experience in goal setting and decision making, and consumer education. In this manner, skills in exercising informed choice could grow in a parallel fashion along with growth of specific vocational and employment skills, enabling the individual to continue making important, informed life decisions following the completion of VR services. The application of the concept of consumer informed choice in the context of VR services involves a conscious process of choice making with the following typical elements:

- analyzing needs,
- gathering information,
- evaluating the information,
- describing options,
- selecting from among the options and making a choice,
- accepting the risk of failure,
- assuming responsibility for the outcome of the choice, and
- evaluating the results of choice making and using the information in future choice-making experiences.

Consumer Self-Determination. In addition to facilitating informed choice in the VR process, an effective VR counselor-consumer working alliance will enable the development of consumer self-determination skills. Self-determination, a concept and process that has emerged from the fields of rehabilitation counseling, special education and disability studies, provides the basis for an empowerment approach to VR counseling. Field, Hoffman and Spezia (1998) have defined self-determination as a multidimensional concept that includes:

- attitudes, abilities and skills that lead people with disabilities to define goals for themselves and to take the initiative to reach these goals,
- the capacity to choose and to have those choices be the determinants of one’s actions,
- determination of one’s own fate or course of action without compulsion, and
- the ability to define and achieve goals based on a foundation of knowing and valuing oneself.

Promoting self-determination should be a primary effort of VR counselors working with consumers with disabilities.
greater self-awareness and by teaching decision making, goal-setting and negotiation skills, which will enable them to exercise greater control during the VR counseling process (Kosciulek, Bruyere & Rosenthal, 2002). The steps in the self-determination development process for consumers include consumers knowing and valuing themselves, consumer planning, consumer action, experiencing outcomes and learning, and making adjustments. Consumer self-knowledge can be facilitated by encouraging individuals to expand their thinking about the possibilities in their life, deciding what is truly important to them, having a keen sense of their strengths, limitations and preferences and knowing what options are available. VR counselors can promote consumer self-valuing by assisting consumers with accepting themselves as they are, admiring their strengths that come from uniqueness, and recognizing and respecting their rights and responsibilities.

The next step in the consumer self-determination process is the development of effective planning skills. Effective planning involves a process of setting goals, identifying action steps to meet goals, anticipating results and visually and orally rehearsing potentially stressful events such as job interviews. In addition to planning, VR counselors can facilitate consumer self-determination by encouraging individuals to act. Consumer self-determined action may include dealing directly with conflict and criticism (e.g., with a family member or coworker) and accessing resources and supports such as assistive technology devices and recreation and leisure services.

As a result of planning and acting, consumers with disabilities will have the opportunity to experience positive outcomes and to learn more about themselves. VR counseling that promotes self-determination can enable individuals to compare performance and outcomes to their expectations and realize successes. In the final step toward enhancing consumer self-determination, VR counselors can assist individuals with disabilities to adjust their self-perception and expectations with regard to future planning and actions.

**Consumer Empowerment.** As illustrated in the VR counseling empowerment framework (Figure 1), informed choice and self-determination influence the level and quality of consumer empowerment resulting from the VR process. Emener (1991) described the philosophical tenets necessary for an empowerment approach to rehabilitation. These tenets provide a useful foundation for the provision of VR counseling services to people with disabilities. The four tenets are paraphrased as follows:

- Each individual is of great worth and dignity.
- Every person should have equal opportunity to maximize his or her potential and is deserving of societal help in attempting to do so.
- Most people strive to grow and change in positive directions.
- Individuals should be free to make their own decisions about the management of their lives.

**Definition of empowerment.** Empowerment is the process by which people who have been rendered powerless or marginalized develop the skills to take control of their lives and their environment (Lee, 1997). As such, in order to begin to improve rehabilitation services and outcomes, empowerment has become the operative term in disability policy development and rehabilitation service delivery. The field of rehabilitation continues to place an increasing emphasis on the construct of empowerment as a conceptual cornerstone of identity (Banja, 1990; Zimmerman & Warschausky, 1998) and critical variable in rehabilitation research (National Institute on Disability and Rehabilitation Research [NIDRR], 1991).

Empowerment is conceptualized as involving both internal or psychological aspects and situational or social aspects. Internal or psychological factors include a sense of control, competence, confidence, responsibility, participation, solidarity and community. Additional psychological aspects of empowerment include flexibility, initiative and future orientation (Stein, 1997). In this manner, the psychological facet of empowerment entails the acquisition of values and attitudes that are incorporated into the individual’s worldview and constitute a foundation for action (Bolton & Brookings, 1996).

Situational or social aspects of empowerment include control over resources; interpersonal, work and organizational skills; decision-making powers; self-sufficiency; mobility; and "savvy" or an ability to “get around” in society (Stein, 1997). Additional situational factors include improved living conditions, increased social status, financial and social support, autonomy, access to information and income. The situational aspects of empowerment are concerned with the interdependence between people’s behaviors and their environment. These situational or social factors also suggest that the lack of social, economic, or political resources in the environment is a major contributor to human dysfunction (Rappaport, 1987). Thus, it is argued here that when people with disabilities have control over important resources, they are better able to determine the course of their lives, solve their problems and develop adaptive social networks.

**Empowering VR counseling.** Empowerment of individuals with disabilities means that they have the same degree of control over their lives and the conditions that affect them as is generally possessed by people without disabilities (Harp, 1994). It entails the transfer of power and control over their lives from external entities, such as VR counselors, to the individuals themselves (Bolton & Brookings, 1996). Thus, as hypothesized and tested by Kosciulek and Merz (2001), the VR counselor committed to an empowerment approach to service delivery should facilitate and maximize oppor-
opportunities for individuals with disabilities to have control and authority over their own lives.

From an empowerment perspective, VR counseling is not something that can be done to or for a consumer. Rather, it is a process in which consumers must become active, informed participants who learn and control a planning process that they use for short- and long-term career development (Szymanski, Hershenson, Enright & Ettinger, 1996). In addition, the lifelong, developmental nature of the process means “unless we plan to work with an increasingly dependent consumer again and again across the decades, our professional responsibility is to assure that each person learns the [career planning] process” (Mastie, 1994, p. 37).

Active consumer involvement is the key element of successful VR counseling interventions (Ettinger, Conyers, Merz & Koch, 1995). In an empowerment approach to VR counseling, consumers are actively involved in:

- gathering information, including self-assessment, and learning about occupations and the labor market;
- generating alternative courses of action and weighing those alternatives; and
- formulating a plan of action.

**Implications for Vocational Rehabilitation Counselor Training and Practice**

The VR counseling empowerment framework suggests three important implications for VR counselor training and practice.

First, in both pre-service counselor education and in-service counselor training programs, curricula must focus on the development of effective vocational counseling techniques. In this manner, new and practicing VR counselors will possess the tools necessary for developing effective working alliances with consumers with disabilities.

Second, both new and experienced VR counselors must be knowledgeable of the state-federal VR system informed choice mandates. Further, counselors must be fully informed regarding those models demonstrated to be useful for enhancing informed consumer choice in the VR process. The informed-choice/best-practice methods described in the Choice Demonstrations Projects Operations Manual (InfoUse, 1999) may be helpful in this regard.

Third, in accordance with the VR counseling empowerment framework, the development of consumer self-determination skills must be a goal of the VR counseling process. As such, VR counselor training programs of all types should direct resources toward increasing counselor knowledge and skill in the area of consumer self-determination. As described earlier in the discussion of Consumer Self-Determination, Field et al. (1998) provided a valuable guide that outlines the steps in the self-determination development process.

**Conclusion**

Due to the ever-changing nature of the world of work and service-system castification processes, assisting people with disabilities to achieve positive, meaningful and stimulating career development can be a challenging task. Effective VR counseling can be instrumental for enhancing the career success and quality of life of consumers with disabilities. Full implementation of the VR counseling empowerment framework presented in this article will enable consumers with disabilities to become active, informed participants who learn and control a planning process that they use for both short- and long-term career development. In this manner, VR counseling will promote the empowerment of individuals with disabilities.

**Note**

1. Castification is fundamentally an institutionalized way of exploiting one social group (ethnic, racial, low-income or other minority group), thus reducing this group to the status of a lower caste that cannot enjoy the same rights and obligations possessed by the other groups (Trueba, 1993, p. 30).
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