Collaborative consultation is presented as a model for vocational education programming for mildly handicapped adolescents, in which the teacher-consultant and the parent-consultee cooperatively solve problems through their shared expertise. A nine-step behavioral consultation model is described which facilitates collaborative consultation between parent and special educator. The nine steps are preentry, entry, gathering information, defining the problem, determining solutions, stating objectives, implementing the plan, evaluating the plan, and terminating consultation. Opportunities for implementing collaborative consultation during vocational program planning are described, and include consultation sessions designed to: inform parents of vocational opportunities, plan vocational assessment and collect vocationally relevant information, develop the vocational component of the individualized education plan, and develop plans for transition from school to employment or postsecondary training. Includes 30 references. (JDD)
Facilitating Successful Vocational/Special Education Programs for Mildly Handicapped Adolescents Through Collaborative Consultation with Parents

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Abstract

Parental involvement is critical to ensure the development of appropriate vocational and special education programming for mildly handicapped adolescents. Collaborative consultation is a model in which the teacher-consultant and the parent-consultee cooperatively solve problems through their shared expertise. This model enables special educators to meet PL 94-142 and PL 98-524 mandates. A nine step behavioral consultation model is described which facilitates collaborative consultation between parent and special educator. Opportunities for implementing collaborative consultation during vocational program planning are described. These opportunities include consultation sessions designed to inform parents of vocational opportunities, plan vocational assessment and collect vocationally relevant information, develop the vocational component of the individualized education plan, and develop plans for transition from school to employment or postsecondary training.
FACILITATING SUCCESSFUL VOCATIONAL/SPECIAL EDUCATION PROGRAMS
FOR MILDLY HANDICAPPED ADOLESCENTS
THROUGH COLLABORATIVE CONSULTATION WITH PARENTS

The importance of parental involvement in the education of handicapped children has long been acknowledged by special education professionals (Kroth & Simpson, 1977; Heward, Dardig, & Rossett, 1979). Students whose parents are involved in their education tend to make greater gains in school and parents can ensure that academic and social skills generalize from school to home settings (Simpson, 1982; Turnbull & Turnbull, 1985). The importance of parental involvement is further underscored by legal mandates set forth in the Education for All Handicapped Children Act (i.e., PL 94-142, 1975). Much of the literature has focused on the effects of parental involvement on the education of young handicapped children. We contend that parents are instrumental in ensuring that older mildly handicapped students are provided with appropriate career and vocational education. The Carl D. Perkins Act (i.e., PL 98-524, 1984) includes provisions for the involvement of parents in the vocational education of their handicapped children:

Each local educational agency shall . . . provide information to handicapped and disadvantaged students and parents of such students concerning the opportunities available in vocational education at least one year before
the students enter the grade level in which vocational education programs are first generally available in the State, but in no event later than the beginning of the ninth grade, together with the requirements for eligibility for enrollment in such vocational education programs" (p. 2454).

In the remainder of this paper we will describe the collaborative consultation model and discuss ways this model can be utilized by parents and professionals when planning vocational programs for mildly handicapped adolescents.

**Collaborative Consultation in Special Education**

Dissatisfaction with special education identification practices and services provided for handicapped children has led to a renewed interest in school-based consultation (Friend, 1984; Haight, 1984; Nevin & Thousand, 1986). The primary goals of consultation are to solve presenting academic and behavior problems and to increase the skills of the consultee so that he or she can respond appropriately to similar problems in the future (Gutkin & Curtis, 1982). Recently, collaborative consultation between special and general education teachers has been advocated as a process which facilitates the successful mainstreaming of handicapped students (Adamson, Cox, & Schuller, 1989; Huefner, 1988; Stainback & Stainback, 1988; Zins, Curtis, Graden, & Ponti, 1988). **Collaborative consultation** is defined as "an interactive process that enables people with diverse expertise to generate creative solutions to mutually defined problems" (Idol, Paolucci-Whitcomb, & Nevin, 1986, p. 1). When collaborative consultation occurs, both consultant
and consultee assume the role of problem-solver (Elksnin & Elksnin, 1989). Engaging in Collaborative Consultation with Parents to Effectively Plan Vocational Education Programs

The vehicle for working with parents in educational settings is the parent-teacher conference. Traditionally, the special education teacher has assumed the role of expert during the conference. During collaborative consultation, the teacher-consultant relinquishes the role of expert and accords the parent-consultee equal status. Both the consultant and consultee are recognized as having areas of expertise which will be shared during consultation. Rather than assume a passive role, the parent becomes actively involved in the consultation process and retains the right to reject consultant suggestions. Ely, Conoley, and Rosenthal (1985) stress that teachers must acknowledge three assumptions if they wish to enter into collaborative relationships with parents. First, most parents are concerned about their handicapped child's welfare to a greater degree than any professional. Secondly, parents have useful information about their child that professionals do not possess. Finally, when all the important individuals in the child's life become involved in the educational planning process, the handicapped child's needs are better met.

Although collaborative consultation primarily has been used by regular and general educators to solve academically-related problems, we propose that special educators at the secondary level adopt collaborative consultation as a model for working with parents to plan mildly handicapped adolescents' vocational programs. Educators can implement collaborative consultation with parents using a nine-step behavioral model described by
Heron and Harris (1987).

**Step One: Preentry**

Although proponents of collaborative consultation caution against steering the consultee down a path in accordance with a preestablished agenda, some planning is critical. During the preentry stage, the consultant examines his or her perceptions toward the problem-solving situation. For example, the teacher-consultant may discover that she has ambivalent feelings about the parent; or that she is intimidated by the parent’s social position in the community but she feels the parent has unrealistic vocational goals for his educable mentally retarded son. During the preentry step, the teacher-consultant formulates a plan for working collaboratively with the parent-consultee.

**Step Two: Entry**

There are several goals during the entry step of consultation. Of paramount importance is for the teacher-consultant to establish rapport with the parents. The consultant attempts to establish an open, trusting relationship. At this point, the consultant should explain the collaborative problem-solving process and let the parent know that he or she is an equal and highly valued participant during consultation. For example, the teacher-consultant might stress that the parent-consultee is able to provide information about the handicapped student’s long-term and short-term outside interests which may provide clues regarding the student’s career and vocational interests.

**Step Three: Gathering Information**

Because the model proposed by Heron and Harris is of a behavioral
nature, information gathering is dependent upon defining target behaviors which are observable, measurable, and defined in such a way as to increase the probability of agreement between observers (Alberto & Troutman, 1986). Of specific interest is the collection of data related to the type, frequency, magnitude, or duration of the problem. For example, during consultation a potential problem behavior identified by teacher and parent is "chronic tardiness." The teacher-consultant and the parent-consultee both express concern that this behavior may adversely affect the mildly handicapped adolescent's ability to gain and retain employment. Collection of data may include the number of times the student arrived late for class during the last nine week grading period. At the same time, the parent may agree to count the number of times the student failed to show up on time for family appointments (i.e., meals, visits with relatives, etc.).

**Step Four: Defining the Problem**

This step is the most critical component of the process. Without accurate problem-identification, problem resolution becomes impossible. The problem (e.g., unrealistic career goals, chronic tardiness) as initially perceived by either the teacher-consultant and parent-consultee may not be the problem identified during collaborative consultation. In some cases, several potential problems are identified which may need to be prioritized. For example, during consultation several problems may be identified as adversely affecting the student's vocational education: poor job-related academic skills, low level of motivation, and inability to accept criticism. It becomes the job of the teacher-consultant and parent-consultee to decide which of the identified problems should be solved first. Prioritization may
be made based upon impact level, feasibility, or relatedness (Elksnin &
Elksnin, 1989). The degree to which problem resolution positively affects
the vocational education of the mildly handicapped student is the impact
level. Feasibility refers to the probability for successful resolution of
the problem. Relatedness acknowledges the fact that some problems represent
"behavioral clusters;" when one problem is resolved there is a spill-over
effect to other related areas. For example, increasing the student's level
of motivation may result in a concomitant improvement in job-related social
skills performance.

Step Five: Determining Solutions

Once the problem(s) has been correctly identified, the teacher and
parent collaboratively generate solutions. In the case of the previous
example, the teacher-consultant and parent-consultee may develop a plan
which involves the teacher providing instruction in job-related social
skills such as accepting negative feedback, asking for help, and maintaining
conversation and the parent creating situations at home which require use of
the newly taught social skills. Heron and Harris suggest that the "doctrine
of least restrictive alternative" (i.e., choose the most powerful, but least
intrusive intervention) govern choice of solution.

Step Six: Stating Objectives

The objective generated by the teacher-consultant and the
parent-consultee should include these components: the target behavior, the
conditions under which it will occur, and the criteria for acceptable
performance:

The student will come to class and to family activities
at preestablished arrival times when provided with
a behavioral contract 100% of the time on 7
consecutive days.

In the above example, the behavior is "come to class and to family
activities at preestablished arrival times;" "when provided with a
behavioral contract" forms the conditions, and "100% of the time on 7
consecutive days" constitutes the criteria for acceptable performance.

Step Seven: Implementing the Plan

During this phase in the process, the teacher-consultant and the
parent-consultee reach consensus with regard to how and when the plan will
be implemented and who will be responsible for components of the plan. For
example, the teacher and parent may decide to develop a contract with the
student's input the next afternoon. The teacher may agree to monitor the
student's "on-time" behavior for the next 5 days at school and the parent
may agree to record "on-time" behavior at home for 5 days. The teacher and
parent agree to meet on day six to evaluate the student's performance.

Step Eight: Evaluating the Plan

Evaluation becomes a relatively easy task if the objective includes
criteria for acceptable performance and the plan includes provisions for
on-going data collection. In the case of our example, teacher-consultant and
parent-consultee easily can determine if the student has come on-time to
classes and family activities with 100% accuracy for 5 consecutive days.

Step Nine: Terminating Consultation

Consultation is not terminated until both the teacher-consultant and
the parent-consultee agree to end the process. Termination should be a
positive activity, with both parties satisfied with regard to the outcomes of the consultation process. Teachers should be sensitive to the parent's need for ongoing support and should provide it until the parent feels that the consultant's services are no longer needed.

Opportunities for Collaborative Consultation with Parents

During Special Education/Vocational Program Planning

At various points during the special education referral, assessment, and placement process as delineated by PL 94-142 there are opportunities to involve parents. Similarly, parental involvement becomes critical during vocational assessment, planning, and program implementation as outlined by PL 98-524. Table 1 includes parent-teacher collaborative consultation opportunities during special education and vocational program planning.

**Vocational Opportunities Information**

Just as parents are informed of special education services provided under PL 94-142; parents must be made aware of vocational opportunities and program requirements for their mildly handicapped child under PL 98-524. This Perkins mandate can be expanded from an informational session to a collaborative consultation conference. The teacher-consultant may begin the conference by saying that she would like to tell the parent-consultee about vocational training programs available in the district and that she would like to work cooperatively with the parent to identify an appropriate vocational program for the mildly handicapped student. If parents previously
**OPPORTUNITIES FOR COLLABORATIVE CONSULTATION WITH PARENTS**
**DURING SPECIAL EDUCATION/VOCATIONAL PROGRAM PLANNING**

<table>
<thead>
<tr>
<th>PL 94-142</th>
<th>PL 98-524</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>SCREENING/CHILD FIND</strong></td>
<td><strong>VOCATIONAL OPPORTUNITIES INFORMATION</strong></td>
</tr>
<tr>
<td>* Parents informed of EHA programs available.</td>
<td>* Parents informed of vocational opportunities and program requirements (by 9th grade).</td>
</tr>
<tr>
<td><strong>ELIGIBILITY</strong></td>
<td></td>
</tr>
<tr>
<td>* Assessment by multidisciplinary team (including parents) to determine if child is handicapped.</td>
<td>* Assessment of interests, abilities, and special needs for successful completion of vocational program.</td>
</tr>
<tr>
<td><strong>INDIVIDUALIZED EDUCATION PLAN</strong></td>
<td><strong>VOCATIONAL COMPONENT OF IEP</strong></td>
</tr>
<tr>
<td>* Plan developed to meets student's needs, including:</td>
<td>* Plan developed to enable student to successfully complete vocational program via adaptation of:</td>
</tr>
<tr>
<td>- academic needs</td>
<td>- curriculum</td>
</tr>
<tr>
<td>- behavior needs</td>
<td>- instruction</td>
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<td>and through provision of</td>
<td>- equipment/facilities</td>
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<tr>
<td>- related services</td>
<td>and through provision of</td>
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<tr>
<td></td>
<td>- guidance, counseling, and career development activities</td>
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<tr>
<td><strong>TRANSITION FROM SCHOOL TO POST-SECONDARY EMPLOYMENT AND CAREER OPPORTUNITIES</strong></td>
<td></td>
</tr>
<tr>
<td>* Counseling services designed to facilitate transition.</td>
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Table 1. Opportunities for Collaborative Consultation with Parents During Special Education/Vocational Program Planning
were not involved in on-going career development planning, this conference might focus on identifying the parent’s career/vocational expectations for the student and parent-perceived barriers to career/vocational goals. An interview form such as one developed by Project VOC-AIM (1982) could be used to provide structure during the conference. Relevant questions might include the following:

* What kind of high school program would you like your child to take?
* What kind of skills would you like your child to learn in school (e.g., math, reading writing, spelling, job-seeking skills, job keeping skills, etc.)?
* If a 1/2 day class-1/2 day work program was recommended for your child during high school would you consider such a program?
* What do you see your child doing after high school? (e.g., college, junior college, military, trade school, skilled employment, semi-skilled employment)
* List two jobs at which you think your child could enjoy and succeed. (Project VOC-AIM, 1982, p. 92).

**Vocational Assessment**

Collaborative consultation enables parents and educators to share knowledge or to obtain diagnostic information. PL 94-142 ensures that assessment information be gathered from a variety of sources, including parents. The purpose of vocational assessment is to effect a match between the handicapped student’s preferences, interests, and abilities and the
world of work. The Carl D. Perkins Act mandates the assessment of the handicapped student's interests, abilities, and special needs for the successful completion of the vocational program. The types of information which can be gathered during the vocational assessment process include medical information, educational information, personal/social information, interests, work habits and attitudes, and aptitude information (Sitlington, 1980). A rehabilitation model of vocational assessment may be adopted which includes the administration of work samples, dexterity and coordination tests, and vocational counseling in a comprehensively equipped vocational evaluation center (Southern, Raley, & Peterson, 1981). An alternative model is curriculum-based vocational assessment which seeks to match the existing vocational curriculum with the handicapped student's interests and abilities (Abrinkt & Cobb, 1988; Ianacone & Leconte, 1986; Stodden, Ianacone, Boone, & Bisconer, 1987). Parents can provide valuable information regarding the handicapped student's vocationally-related interests and abilities. Collaborative consultation between parent and teacher can serve as the vehicle for developing an individual vocational evaluation plan for the mildly handicapped adolescent. The cooperatively developed plan might include these components: assessment questions, assessment methods, resources, plan evaluation, assessment results.

Vocational Component of the Individualized Education Plan

Parent input in the development of the handicapped student's individualized education plan (IEP) is required under PL 94-142. Parents also should be involved in developing a plan to enable the handicapped student to successfully complete the vocational program as mandated by PL
98-524. The Perkins Act specifies that adaption of curricular, instructional, and/or equipment/facilities by vocational education may be required to ensure program completion. Parents' knowledge of their adolescent's abilities will enable the teacher-consultant to identify areas requiring adaptation.

Facilitating Transition

Although PL 94-142 requires review of the IEP on at least an annual basis, the issue of transition from school to post-secondary settings is not addressed directly by the IEP. PL 98-524 takes a more direct approach to transition and requires provision of counseling services designed to facilitate transition from school to post-school employment and career opportunities. Collaborative consultation between parent and teacher is a means of facilitating transition planning (Anderon, 1985; Wehman, Moon, Everson, Wood, & Barcus, 1988; Hanline & Halvorsen, 1989; Tindall & Gugerty, 1989). The transition plan components identified by Albright, Cobb, Safarik, Elksnin, and Sarkees (1987) may provide the structure needed during the parent-teacher collaborative consultation process. Goals, activities, person(s) responsible (i.e., parent/guardian, school/adult service agencies), and timelines are identified which address four transition concerns: vocational education and training experiences in high school; post-secondary/vocational placement following graduation or exit from high school; residential concerns; social/recreational concerns. The teacher-consultant should recognize that transition from secondary to post-secondary settings may be stressful for both parents and their handicapped adolescents (Ness, 1989).
Summary

In this paper we presented a nine-step model of collaborative consultation which can be used to enable parents and teachers to plan appropriate vocational programs for mildly handicapped adolescents. Opportunities for implementing collaborative consultation during vocational program planning include sessions designed to inform parents of vocational opportunities, plan vocational assessment and collect vocationally relevant information, develop the vocational component of the individualized education plan, and develop plans for transition from school to employment or postsecondary training. We feel that collaborative consultation with parents meets mandates set forth in both PL 94-142 and PL 98-524. Perhaps more importantly, collaborative consultation effectively facilitates problem-solving by special education teachers and parents of mildly handicapped adolescents.
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