This monograph provides a review of the literature on the transition of students with disabilities into the adult world and an analysis of various models of transition that have emerged in western Europe in comparison with those in the United States. An introduction identifies key definitional issues in transition: defining the population, transition, integration, and paid work. The second section looks at approaches to transition policy and planning, including components of U.S. transition models and transition models from the following western European nations: Switzerland, United Kingdom, Holland, France, Italy, and Denmark. The third section discusses issues in transition policy. These include the extent of school integration, coordinated planning and follow-up from school to work and community living, the extent of integration in the post-school work and community living options, and the attainment of some form of competitive employment. (Contains 58 references.)

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TRANSITION IN THE U.S. AND WESTERN EUROPEAN NATIONS

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RUNNING HEAD: Transition in the U.S. and Western Europe

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I. INTRODUCTION

A. Background: OECD/CERI and International Perspectives on Transition

For the past six years, the Office of Economic Cooperation and Development's Centre for Educational Research and Innovation (OECD/CERI), based in Paris, has undertaken a series of studies that are intended to advance the base of knowledge worldwide concerning the movement of disabled persons from the schooling years to the period of adult life and postschool circumstances. The general term "transition" has come to stand for the myriad of models and circumstances that characterize social and economic policies in the various countries that have been participating in these studies, as these bear on the entry of disabled people into adult circumstances. Much of the result of this effort to date has been disseminated in various research reports and OECD working papers, and has been presented at various conferences throughout the world under OECD sponsorship. The following are sources that were used, in part, in the preparation of this chapter:


(1985, August). *The transition of handicapped adolescents to adult and working life: A report of a seminar held in Cork, Ireland* (CERI/HA/86.03).

(1986, February). *Two case studies on independent living programmes* (CERI/HA/86.02). Prepared by John V. LeBreton, N.S.W., Australia.


(1987, February). *Transition to adult and working life for young people who are handicapped: Towards a unified concept of transition* (CERI/HA.86.05).


(1987, April). *Active life for young people with disabilities: Programme for action.* (CERI/HA 87.02)

It is my intention in this chapter to review and summarize this work on transition as it exists to date, and to provide an analysis of various models of transition that have emerged around the world to date. As an American, my perspective on the issue is necessarily heavily colored by my own work and experience with transition models as they are emerging in the U.S. I shall, therefore, in this chapter and in the next, present my analysis of transition in other countries from a comparative perspective of the prevalent U.S. models. In so doing, I shall attempt to represent transition models in other countries as I understand them from written materials distributed through OECD, published materials that are available in the English language, conferences on transition that I have attended, and from my experiences in visiting transition programs in some Western European countries.

I recognize here a danger of misrepresentation. Transition in the U.S., as in virtually every country with which I am familiar, is, from the standpoint of social policy, a very actively developing and changing concept. Therefore, models of transition with which I am familiar may not be representative of the planning and policies of the countries in which they were found, but rather may be particular "experiments" in transition that are peculiar to a region of the country. To compensate for this difficulty, I am attempting here to draw the reader's attention to particular transition projects rather than to the individual country in which they are found.
B. History of the Transition Project

In 1978, OECD/CERI with the assistance from a grant provided by the U.S. Department of Education, initiated a project on adolescents with disabilities, with a particular focus on their integration into the social mainstream during the final years of their schooling. The transition from school to working life was one of the four foci of this project. The project produced four books (CERI 1981; 1983, 1985; 1986). The 1983 text, titled The Education of the Handicapped Adolescent: The Transition from School to Working Life, summarized by drawing particular attention to the need "...to ensure that all handicapped young people are able to live the fullest achievable lives in the 'least restrictive environment.'" (p. 192). Recognizing that the least restrictive environment for young adults of postschool age is the arena of integrated work, the various chapter authors expressed particular concern over the apparent disparity of the needs of the workplace, for worker productivity and the needs of the disabled persons, for social integration. The chapter by Tizard & Anderson (1983) [Chapter VIII], in particular, raised the spectre of a possible need to examine alternatives to work as the outcome of transition programs for disabled persons who reside in areas of high unemployment, such as characterized the United Kingdom in that period.

The relationship of integration to transition planning and policy had, by 1983, become a major area of interest in the United States, where major policy directives in the U.S. Department of Education were emphasizing "least restrictive environment" models for disabled persons (e.g., Will, 1984). As a result, further support
to OECD/CERI was made available from the Department in 1982 to further research and develop the status of transition activity in member nations. This effort led to the dissemination of the report: *Transition to Adult and Working Life for Young People Who Are Handicapped: Towards a Unified Concept of Transition* (CERI, 1986).

The tone of this document was somewhat more pessimistic regarding integrated work as the outcome of transition efforts than its 1983 predecessor. Continued rates of high unemployment among young people in various Western European countries generally, coupled with the expanding network of highly sheltered work "alternatives" to employment in integrated contexts, led to a gradual shift in the concept of transition during this period away from the 1978 concept of school-to-work to a somewhat broader concept of transition as the period from the end of compulsory schooling, about age 14-16, to "adult status."

The adult status conception was fully developed and disseminated as OECD Educational Monograph No. 4: *Disability and Adult Status: Concepts, Policy Issues and Practical Dilemmas* (1988). In this paper, OECD scholars argued that the outcomes of transition programs should focus on broader issues than just services and supports available through rehabilitative agencies, and should examine the consequences of such services for the individual's personal, moral, and socio-psychological development, including problems of identity, self-concept, and self-esteem.

In the U.S., this concept was further delineated into specific goals for transition programs by Martin Gerry (1987) in his OECD chapter.
testimony regarding transition programs before the U.S. Congress. The goals identified by Gerry are:

a) Personal autonomy, independence, self-respect, and freedom from caretakers;

b) Economic self-sufficiency - sustained, integrated, and compensated employment;

c) Social integration and participation;

d) Lifestyle choice and family and peer association.

(Gerry, 1987; p. 6)

In 1986, OECD disseminated the report of an International Conference on Transition held in Airlie, Virginia entitled The Education of the Handicapped Adolescent: International perspectives on Transition (OECD/CERI, 1986). At this meeting, the key issues affecting the concept of transition from an international perspective were identified, discussed, and may be summarized as follows:

1. Transition begins in mid- to late adolescence and concludes when an individual leaves the realm of formal schooling;

2. The social and communicative development of the individual is as important a part of the transition process as the development of work and community-living related skills;

3. The term "disabled person" (or handicapped person - a term that is falling from favor in the U.S.) should be nonexclusionary, that is, should pertain to all persons of transition age who have disabilities, including those with the most severe disabilities;
4. Social and communicative development may be strongly related to the extent of social integration during the transition process;

5. Psycho-social aspects of the disabled person's life following transition, particularly feelings of dignity, self-respect, and self-worth may be strongly tied to social integration;

6. Psycho-social aspects of the disabled person's life following transition, particularly feelings of dignity and self-worth, may be strongly tied to participation in productive work; and

7. The normal workplace affords the opportunity for full social integration following transition.

The major constraints on implementation of such a fully developed transition concept were identified as:

1. The traditionally segregated and sheltered compulsory school programs that exist in many member countries;

2. The correlation of the extent of compulsory school segregation with degree of intellectual disability in most member countries;

3. The segregated nature of vocational training programs in many member countries;

4. The discrimination against disabled persons that exists in the normal workplace in most countries;

5. The rate of unemployment in many countries and its affect on youth employment in general;

6. The lack of coordination across the various governmental agencies that are involved in transition in the various member countries; and

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7. The existence of a large network of sheltered, segregated workplaces that are dependent upon a disabled clientele for industrial contracts.

During this same period, Gerry (1987) identified a number of factors that in his opinion were actively contributing to the ineffectiveness of existing transition programs for people with severe disabilities in the U.S.A. These factors included:

1. The absence of adequate transition planning during the appropriate school years, and the failure to identify relevant transition goals and objectives in the Individualized Educational Plans (IEPs) of disabled students;

2. The lack of corresponding federal laws protecting the rights of disabled persons following the abrupt termination of protections under the Education of the handicapped Act (PL 94-142) at critical ages for young people;

3. The absence of a vehicle for long-term case coordination and advocacy;

4. The short-term "in-and-out" nature of postschool vocational rehabilitation service programs coupled with the clear need for long-term follow-up support services for severely disabled clients;

5. The absence of a clear and defined role for parents and for self-advocacy assistance in the identification of work and community-living objectives;

6. The absence of adequate federal law guaranteeing jobs and job protections to people with disabilities;
7. The absence of a method for guaranteeing choice among employment opportunities and community-based living alternatives, and

8. The absence of an effective relationship between the mechanisms for support to a disabled individual under social insurance (in the U.S.: Social Security Insurance and Social Security Disability Insurance) and support when employed.

Finally, OECD disseminated a paper synthesizing the current status of knowledge on transition as of 1987 and announcing a new project on the topic, entitled *Active Life for Young People with Disabilities* (CERI, 1987). In this paper, OECD identified the following as key background considerations in planning for the new programs on transition to adult status:

1. Integration with schools is an essential final step in preparation for the transition process;

2. Paid employment must be the main goal of transition programs;

3. Social policy and legislation must be aimed at the removal of disincentives to paid employment;

4. Self-advocacy and direct policy participation by the consumers of disability funding schemes must be afforded a high priority in planning transition programs, and

5. Coordination of policies and services among the various ministries and agencies concerned with transition must have a high priority.
C. Key Definitional Issues in Transition

Research on international approaches to transition policy and practices have revealed four key issues, which in one way or another affect each of the participating countries. These four issues are definitional in nature and are concerned first with the parameters of the population under consideration, that is, who specifically are making a transition; second, with the definition of transition itself (what, specifically, does it mean?); third, what is meant by the term 'integration' and what are the boundaries of that concept; and fourth, what is the definition of "paid work" that underlies current perspectives on the goals of transition?

1. Definition of the population. When one is concerned with discussions of schooling and/or employment of persons with handicaps (or disabilities), it becomes a matter of concern in some contexts as to the nature, extent, range, and level of severity of the particular individual's disabilities. This is of particular importance when the disability at issue is intellectual, that is, where the concern is with mental retardation. For example, planning for integration in schooling may be a priority in one country for persons with severe visual disabilities, but not for sighted persons with severe intellectual disabilities. The goal for transition to integrated, paid employment may, similarly, be a priority for severely intellectually disabled persons in one country but not even considered for comparable persons in another country. In countries where the school and postschool service structures have been highly segregated for most disabled persons, there may be a sentiment that more integrated forms of planning and service
should begin with the less disabled populations (e.g., non-intellectually disabled) and work gradually "down" to the more cognitively impaired populace.

My position, based on my own research on transition in OECD member countries, is that any attempt to define the population of disabled persons for purposes of transition policy and planning that approaches the subject matter on the basis of delineation of eligibility from the standpoint of the personal characteristics of the individuals affected (or their diagnoses, etiologies, etc.) is necessarily prejudicial and would be inherently discriminatory.

If it can be demonstrated that a particular group within the disabled population does not benefit from transition program efforts, say those with severe intellectual disabilities, medical complications, and multiple disabilities, than to identify and exclude that subsample from consideration might be justifiable. However, when there is an extensive data-base that, to the contrary, suggests that virtually all disabled people, including those with the most severe disabilities, benefit from transition programs, than exclusion by class membership becomes totally unwarranted (e.g., Sailor, Anderson, Halvorsen, Doering, Goetz, & Filler, 1989; Sailor, Gee, Goetz, & Graham, 1988). I argue, therefore, that the end of the "personal characteristics" continuum that is more rather than less disabled; at that end of the continuum, the definition of the target population must be "zero-exclusionary:" that, for purposes of inclusion and eligibility, it must extend equally to all disabled persons.
The more challenging problem then occurs at the less disabled end of the continuum. Who shall be admitted to transition policy and programs because he or she has a disability? At this end of the continuum, transition planning shades into the universal concern with finding employment for young people leaving school. Few would argue that disabled people should have the advantage of extra governmental assistance in the process, but each country has its own standard for determining who is indeed disabled. If we look only at school figures for what percentage of the populace is eligible for special assistance on the grounds of disability, the figures range from about 2% in Italy to about 11% in the U.S. (e.g., Danielson & Bellamy, 1989). Since admission to a special assistance category is a two-edged proposition, it qualifies a person for assistance on the one hand, while it affords a "stigma" on the other for being so identified. The problem of entry level into the definition is of significantly less concern than exclusion from assistance within the identified continuum. I, therefore, argue that the population definition for transition should be zero-exclusionary for that group that is identified within each country for special assistance on the basis of disability, within the period of compulsory education. Individuals who were deemed eligible for special assistance during this period should be considered eligible for transition services following the period of compulsory education as well.

2. Definition of transition. The definition of transition for purposes of policy and planning is bound up in concerns over which agency is the responsible authority, the specific age range

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embodied by the concept, the expected outcomes of transition programs, and the role of vocational preparation in the process.

Because transition necessarily begins during the period of schooling, the burden of policy planning and programming at the outset falls to the education agency. However, the authority to influence the postschool service structure, to provide placement and follow-up services, and to coordinate the various agencies is seldom within the purview of the educational agency. Definitions of transition are, therefore, influenced to a degree by jurisdictional concerns, and quite possibly the budgetary limitations of the social agency which initiates the transition concept. For example, a ministry or agency concerned with vocational training, placement, support, and follow-up may evolve a definition of transition that begins after the period of compulsory schooling; too late, by most experts' reckonings, to adequately prepare the disabled person and his family for the process. Transition, as I shall discuss later in this chapter, is necessarily a "bridge" concept that spans the period from roughly the onset of adolescence, during the time of compulsory schooling, through placement in the working and living community later on.

Where the concerns over defining transition bear on competitive employment as the expected outcome of the process, still more problems are engendered. Two social "barriers" seem to loom large in a number of countries that I examined concerning transition outcomes. First is the definition of competitive, or paid employment, particularly in countries with traditionally segregated school and postschool placement systems for persons with
disabilities. If, for example, a person is placed as the outcome of a transition program in a sheltered, "production" workshop where he receives money from the agency responsible for the workshop, which in turn has contracts with private and/or public industry, is this a competitive, paid employment outcome? The answer by most current thinking on the subject now is no (e.g., Montobbio, 1985; Wehman et al., 1988). Paid, competitive employment means placement in the regular work force for at least a "productivity wage" based on the individual's standard of production relative to nondisabled workers engaged in the same or similar task.

This problem is compounded in countries that traditionally have a system of vocational education or training as the primary option for disabled persons leaving compulsory education. Often, such vocational training facilities are contract sheltered workshops and the preparation that occurs in such facilities is geared to work skills rather than to social development of a type conducive to success in integrated work environments. Placement in sheltered vocational training facilities is probably best viewed as preparation for further sheltered workshop placement, and by current standards, would not comprise a successful outcome from transition policy and programming. For present purposes, I define transition as the social process of preparing a disabled person for the move from the period of compulsory education to the period of integrated, paid, supported employment and normalized community-living circumstances. I shall develop this definition further in the pages ahead.
3. **The definition of integration.** The issue concerning integration in recent years became the focal point for transition planning. Most countries are themselves in a period of transition in social policy concerning disabled people, from a former structure of services geared to shelter and protection, to a newer set of structures more consistent with the worldwide ethic of independent living. For educational agencies, this conversion may include, for example, the closure of special schools that, until relatively recently, have been mainstay facilities in the education of students with disabilities. Such closures may adversely affect the constituencies of the special schools as well as the constituencies of the alternative regular schooling system, which may be unprepared attitudinally and structurally for service to disabled populations.

It seems clear, however, that such a conversion is both necessary and timely from the standpoint of successful transition programs. As various transition researchers have pointed out, the skills necessary for success in integrated employment settings are largely social and communicative in nature and require a normal, integrated social context early on in which to develop (e.g., Bellamy, Rhodes, Mank, & Albin, 1988; Montobbio, 1985; Parmenter, 1986; Söder, 1984; Wehman et al., 1988).

The problem of defining integration in the workplace is more complex (Sailor et al., 1989, Chapter 6) than the counterpart process in the school years. The nature and costs of support services to maintain disabled persons in the workplace may necessitate a variety of schemes in order to reflect an integrated service structure (Wehman et al., 1988). Research on "quality of life"
indicators for disabled persons would seem to suggest that the single factor most strongly associated with positive indicators is frequency of interactions with nondisabled peers (e.g., Halvorsen & Sailor, 1989). In the workplace, a scheme that would maximize such contacts would be restricted to single-site placements in business and industry (Brown et al., 1988). Other schemes, such as small, dispersed enclaves within business and industry may be more manageable and still allow sustained, regular interactions (friendships, etc.) to occur (Wehman et al., 1988).

It is clear, however, that by present standards of policy and program structure, the goal of transition programs for disabled persons should be placement, with supports if needed, in an integrated, paid employment situation. The definition of integration should be based on the availability of regular, ongoing, sustained interactions with nondisabled members of the regular work force, as well as the availability of associations with other disabled persons.

4. **Defining paid work.** It is clear that a very large variety of pay-for-work schemes exist in various countries participating in OECD research. Many of these schemes are regulated by federal, state, or provincial law and are geared to the various country's social insurance schemes. Where a standard minimum wage must be paid to any individual in a workplace, disabled or not, there is a built-in disincentive to employment of disabled people. Where "productivity wages" are a possibility, such that an employer must pay a wage geared to actual production relative to the regular work force, the disincentive is removed to some degree. Some countries
have "set aside" laws that guarantee a percentage of jobs to disabled people, a further disincentive to discrimination in the workplace. Where a disabled person loses social insurance benefits from incurring gainful employment, a disincentive may exist to the individual to seek and sustain such employment. In some countries, a disabled person must carefully weigh the value of social insurance benefits against income from paid employment before seeking job placement. The relationship of social insurance to paid work remains a major area for social policy development in transition planning. For my purpose here, it is clear that the goal of a transition program should include placement in an integrated work situation that includes at least a productivity wage for work performed.

11. APPROACHES TO TRANSITION POLICY AND PLANNING

A. Transition in the United States

1. Policy and definition. Transition in the U.S. as a working, programmatic concept emerged from a position paper published by the federal Office of Special Education and Rehabilitative Services (OSERS) of the U.S. Department of Education (Will, 1984). In that statement, Madeleine Will, Assistant Secretary, wrote that transition is "...an outcome-oriented process encompassing a broad array of services and experiences that lead to employment." Thus, the U.S. model has, from the outset, stressed work as the primary outcome of transition efforts. Mrs. Will's statement goes on to stress cooperative arrangements among agencies, individualized transition planning, and provision of
incentives to employers to hire program graduates as the key elements of the transition process. Furthermore, U.S. federal policy on transition has placed a great deal of emphasis on integration, both during the school years and afterward, in employment and community-living circumstances. The strong emphasis on the "least restrictive environment" (LRE) has been viewed by some as a radical shift in federal policy (McIntire, 1985). Certainly the efforts in education to integrate children with severe disabilities into regular schools and classroom as alternatives to special (disability only) schools has not been an easy one (Sailor, Anderson, Halvorsen et al., 1989). This trend is, however, well-established at this time (1989), and in many communities in the U.S., students with even the most severe disabilities are "graduating" from normal, compulsory secondary schools into integrated worksites with supports (Sailor, Gee, Goetz, & Graham, 1988).

Transition in the U.S. is probably best viewed as a bridge from education to business and industry, with various social service agencies and options flowing by beneath. In this sense, it is a separate, self-contained system for purposes of social policy and planning, yet is dependent upon all these components for its function.

One major weakness in the various U.S. models of transition, however, lies in the process of coordination among the three functions. As a separate entity, transition services must coordinate activities from within budgets that are almost without exception under the control of at least three separate governmental agencies at both the local and federal levels. While various "interagency
agreements" assist the process, research on practices has revealed problems at the level of service to the individual (e.g., Hasazi et al., 1985; McDonnell, Hardman, & Hightower, 1986).

B. Components of U.S. Transition Models

1. Integrated education and zero rejection. Most current models of transition in the U.S. are strongly linked to, if not arising from, a process of integrating students with disabilities into the public schools, at all ages, for the period of their compulsory education (Brown et al., 1989; Sailor et al., 1989). The current thrust of the integration effort begins with permissive day care and preschool programs (available, but noncompulsory) operating for children about ages 2-6. The focus in these programs is becoming strongly oriented toward "mainstreaming," that is, placement of children with disabilities, and those determined to be at risk for disabilities according to a number of criteria, in regular (nondisabled) day care and preschool programs (Sailor et al., 1989) [Chapter 2]. Often these programs are operated by private care providers with the public school systems providing training materials and personnel as needed. Children with the most severe impairments are not separated out for segregation at this period, a practice which is in accordance with the principle of zero rejection.

In elementary school, children are served increasingly in the regular classrooms, with some time in "resource room" environments at the regular schools as needed, particularly for the more severely disabled student. This continued mainstreaming effort is deemed essential for the social and communicative development of students with disabilities, particularly as these
aspects of development will be needed later in the period of transition (e.g., Montobbio, 1985).

Still later, in the intermediate period (about ages 11-14), the current trend is for students to continue to be served in regular schools but with increasing attention paid to the development of their skills in "work" activities in and around the schools, and in community mobility and living skills. Again on a zero rejection basis, students with disabilities in the U.S. are taken singly, or in very small groups, into various community environments and instructed to shop, cross streets, use recreational facilities, do work, perform domestic living skills, etc., in accordance with their abilities and their individualized educational programs. At the intermediate age, there is an attempt to create a balance between the social-communicative needs of the student, best met by in-classroom time at school, or at least in various social environments at the school, and the living-working needs of the student, which can best be met in (nonschool) environments similar to those envisioned for the student in the post-transition period. Most U.S. models are firmly grounded in the idea that direct instruction on living and working skills is needed, particularly for students with severe levels of intellectual disability, and that this instruction needs to begin relatively early in order to adequately prepare young people for successful transition later on. Further, this idea is grounded in a substantial body of research, which indicates that ability to successfully adapt learned skills in new environments ("generalization") is largely predicated on direct instruction in an
array of normal community working and living environments (Horner, Dunlap, & Koegel, 1988).

Finally, the secondary school portion of compulsory education, about ages 15-18 for students with any significant disabilities, is also increasingly integrated. Many educational programs for disabled students, including those with the most severe disabilities, are located in regular, public high schools (Wilcox & Bellamy, 1982). Much of the instructional effort at this level is, however, concentrated upon working-living skill development, and much of the instruction is carried out in community and vocational environments (Sailor et al., 1989). There are, however, proponents for the regular classroom placement of students with even the most severe disabilities during this transition age (Biklen, 1985). These different views on the nature of transitional programs in education within the U.S. are discussed and compared in Brown et al. (1989). The difference is essentially between stressing social development and friendships vs. skill competence and increased independence. The literature to date would seem to suggest that, somehow, both are needed (Halvorsen & Sailor, 1989).

Certainly the strong focus placed on educational integration in the U.S. during the past decade has made a major impact on that country's service systems. Publicly operated separate (disability only) schools, separate vocational training workshops, etc. are fast disappearing from the scene, with current estimates showing only about 7% of students with disabilities being served in separate facilities as of 1988 (Danielson & Bellamy, 1989). One strong exception to this drift, however, is to be found in the community.
supported by services to deaf and hard-of-hearing students (Sailor et al., 1989). This community has become increasingly militant in its determination to retain separate schools for deaf and hard-of-hearing students, and has actively resisted the trend toward placements in the less restrictive environments (LRE). Deaf educators who pursue this model argue forcefully that children and youth with deafness are isolated in regular schools because of their lack of a "linguistic community," that is, a group proficient in manual signing. Since many school districts are unwilling to create deaf "enclaves" within regular schools and are unwilling or financially unable to provide interpreters for deaf students in regular classrooms, the Schools for the Deaf, it is argued, constitute the "least restrictive environment" for students with deafness. This position is troubled, however, by recent research indicating that many deaf children schooled apart from the mainstream in self-contained, manual language systems and who, therefore, fail to learn to process or produce speech, suffer enormous detriments in reading and literacy skills when sampled at later ages (Westerhouse, 1988).

2. The individualized transition plan (ITP).

Typically, in emerging U.S. models the process of planning for transition begins at about the time of movement into secondary school, at about age 14 (LaMar & Rosenberg, 1987; Sailor et al., 1989; Wehman et al., 1988). Like the individualized educational plan (IEP), the ITP typically consists of a conference of service providers, parents, and the disabled individual, and a written plan is developed as an outgrowth of the conference; the plan is updated
annually until the transition process is completed. In San Francisco Unified School District (SFUSD), for example, the ITP is a new form of the IEP (Individualized Educational Plan) for many disabled students beginning at age 14.

The conference is typically attended by service providers from all three "linkage" functions (education, work, and community-living systems). Decisions are made at this time concerning what job training experiences the student should have over the next few years and the likely options for community living are reviewed. Financial considerations are reviewed at this time, such as the impact of employment on social insurance benefits. Often, the period of transition for the student is also one for the student's family (e.g., Turnbull & Turnbull, 1985; 1986). Planning for movement from the family home to some other residential alternative such as a shared apartment or a group home is discussed at this time. The stresses on the disabled student's family members are likely to be acute during this period, and school officials need to be sensitive to transition planning as a family issue (Brotherson, 1985; Everson & Moon, 1987; Halvorsen et al., 1989). Sailor et al. (1989) review the major issues in the development of a transition plan and provide an example of an ITP for a student with severe disabilities.

3. Vocational preparation. Recent studies in the U.S. have left many policy planners concerned that only a tiny percentage of sheltered workshop clients ever make it into the regular workplace (Bellamy et al., 1988). These statistics are even more depressing for clients placed in day-activity (nonwork)
programs as an alternative to employment (Brown et al., 1988). For this reason and consistent with the "civil rights" philosophy of integration that is prevalent in the U.S., the present trend in vocational preparation during the transition years is for training in normal, integrated work environments (Wehman et al., 1988).

San Francisco State University (SFSU) and the San Francisco Unified School District have for several years operated a joint program to provide students with extensive and severe disabilities a "rotational job sampling strategy" for their vocational training (Sailor et al., 1989). This strategy is designed to enable a student to have up to seven or eight job training experiences between the ages of 14 and 18. Recognizing that there is no vocational assessment technique that is successful with severely disabled individuals, the sampling strategy is intended to reveal a match between a job type that a particular individual with disabilities can perform and one which the individual would choose for himself or herself if the choice were available and the preference could be ascertained. Nonverbal students, for example, can convey excitement about a particular type of job by seeking to arrive early at the job site and being reluctant to leave; by demonstrating lower rates of aberrant or anti-social behavior, and by performing at higher than expected levels of proficiency on the job.

Many school districts in the U.S. are, like San Francisco, adding personnel to their service staff who specialize in the coordination of transition programs for disabled students. These "transition specialists" are often charged with the responsibility of locating job training sites, scheduling ITPs for students, helping to plan job
placement "internships" for students, or final placements as an outgrowth of the transition process, and acting as a liaison with the voluntary community groups (i.e., "community coordinating transition councils") where these exist. Transition specialists are usually special education teachers at the Master's degree level who have previously had extensive instructional experience with disabled students. Often they carry "case loads" of 20 or so students within their districts.

4. **Community and vocational placement.** U.S. models of transition, as mentioned, place a strong emphasis on direct instruction in specific skill areas preparatory to "normalized" (nonsegregated) community living. This community-intensive curriculum (e.g., Sailor et al., 1989) has the components of preparing a student to successfully navigate through increasingly complex environments, while having the maximum number of opportunities to interact communicatively and socially with nondisabled, same-age peers. Specialized teachers who use curriculum models of this type conduct careful assessments of the disabled student in a range of environments. Not only the student is assessed, but in addition, "environmental inventories" (i.e., Falvey, 1989) are compiled that convey information about each student's capabilities in adapting to numerous community circumstances, including domestic environments, recreational opportunities, domestic living sites, transportation facilities, and so on.

Brown et al. (1988) constructed a vocational placement assessment system that quite adequately taps the array of
variables that reflect current U.S. thinking with regard to planning for a permanent or semi-permanent vocational placement for an individual with disabilities. These variables, summarized simply, are as follows:

1. Nature and characteristics of the work environments. Is there meaningful work? Opportunities to interact with nondisabled co-workers? Opportunities to increase skill level and work complexity?

2. Wage considerations.

3. Medical and social insurance benefits.

4. Supervisory considerations: Is there support on the job? (see chapter on Supported Employment). Is job support externally or internally provided? Brown et al. (1988) recommend supervisory functions supplied internally, by other employees, as in the case of "The Genoa Experience" (Gerry, 1989).

5. Transportation.

6. Rate of disabled to nondisabled employees. Brown et al. (1987) argue here for "natural proportion" at the job site, rather than clustering disabled people in a particular industry or job site.

7. Interactions with nondisabled peers.

8. Integration in break times, places, and leisure activities.

9. Integration at lunch time.

10. Naturally assisted restroom use (although Brown et al. noted that this seldom occurs in practice and that externally provided "attendant" assistant is usually the case for restroom use).

11. Domestic environment issues: Brown et al. argue here for normalized living circumstances, such as shared apartments,
rooming houses, etc., rather than disabled employees living at home (with their family) or in multi-bed residential facilities. It should be noted here that in U.S. culture it is the exception rather than the rule for adults to remain in the parental family home.

These eleven "indicators" represent the current value system in the U.S. regarding the primary considerations in planning a job placement for an individual with disabilities, no matter how severe. These variables also represent or point to an ideal situation by current practice standards, rather than what one finds in current transitional placements. As indicated in the chapter on supported employment, truly integrated job placements for individuals with severe disabilities are only just beginning to occur on a large scale across U.S. communities.

B. Transition Models in Some Western European Nations

1. Switzerland. The ethnic and linguistic diversity of the cantons that make up Switzerland create difficulties for any attempts to characterize a particular federal approach to transition in that country. It is clear that Switzerland has a long history of providing a range of services to its disabled citizens and that it has offered these services up until recently in separate, protective settings (in all Swiss cantons). There are indicators at present that strong forces are at play in Swiss society to bring about greater levels of integration, both in schooling and in postschool, adult life. Much of the impetus for policy shifts at the federal level toward greater integration appear to be stemming from the efforts of a coalition of organizations made up of and representing parents of...
children with disabilities. Strong trends toward increased integration of services to disabled people are in evidence, particularly in the French- and Italian-speaking cantons. In Geneva, for example, the residential school for the blind was recently converted to a regional services and training center providing itinerant services to the city's blind citizens in otherwise integrated settings. In Ticino, in southern Switzerland, vocational training programs have been established within regular public secondary and vocational schools as alternatives to the separate vocational training workshops.

At the placement end of the transition process, there has been relatively less progress in creating integrated job and community-living situations for Swiss citizens with disabilities. The Swiss economy is heavily geared to very high competitive production standards, so that there is little or no incentive for business and industry to hire disabled individuals who might put them at a competitive disadvantage.

The social insurance scheme in Switzerland has strong historical links to the existing network of sheltered workshops, both as training facilities and as terminal placements. As a result, even individuals with relatively mild disabilities find sheltered employment to be the only option in many cases, because acceptance of a regular job in an integrated setting would jeopardize benefits.

Individuals with severe intellectual disabilities or with multiple disabilities of other types in Switzerland remain pretty much outside of the integrated schooling and vocational options.

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(Brown & Brown, 1984; Gaylord-Ross, 1987). Sheltered day-activity programs remain the only alternative to staying at home with benefits paid to the disabled person's family.

The primary challenge to the Swiss social services system to facilitate transition programs for its disabled citizens will likely be to create incentives in order to increase competitive employment options in integrated settings. The increased momentum for integrated schooling will create forces to accelerate this process, since historically, disabled people who have been integrated are reluctant to accept segregated options later on (Biklen, 1985). The removal of social insurance disincentives to integrated work would be a necessary first step, but some solution to the productivity barrier would still need to be found. Direct social insurance payments to an employer who hires a disabled person to offset the loss in productivity at the job, for example, might enhance the process. Legislation requiring "set-aside" jobs for disabled people in business and industry for some percentage of the work force, as in Italy for example, might succeed in enhancing integrated work opportunities at the cantonal level, but such legislation could probably not be passed at the federal level.

2. United Kingdom. It is clear that England and Wales approach problems of disability, and particularly transition, from a philosophical perspective that has been shaped by years of chronic, severe labor problems and very high rates of unemployment. The guiding influence of this philosophy on educational and transition programs has been provided by the Warnock Report on special education published in the U.K. in 1978.
This report introduced a concept called "significant living without work" and suggested that some disabled people might be assisted to create a life-style that is characterized by finding meaning in areas other than compensated employment. This report was the forerunner to the 1981 Disability Act in the U.K. and was educationally very progressive. Emphasis in the report was placed on identifying the learning need of the child and on the legal requirement for education authorities to meet that need through individualized educational efforts ("statementing"). The report's rather more pessimistic note concerning employment has not, however, been especially well-received by parent associations within England and Wales as well as by organizations of disabled people (Hutchinson & Tennyson, 1986).

In the face of strong opposition to the concept of significant living without work, other less contentious concepts have emerged, such as "transition to adult status," which have tended to focus on aspects of psychological passage from dependent child to free adult status in society, but these efforts have continued to devalue work as a realistic outcome, particularly for persons with any significant disabilities.

The situation in the U.K. for transition models has been further complicated by the existence of some highly segregated schooling at all ages for students with disabilities. The number of children in special (segregated) schools for disability-related reasons is 2% of the total school population in the U.K. However, the Warnock Report specified up to 20% of the school population might need special resources at any given time. The report placed stress
on the need to provide specialized assistance in the mainstream (integrated) school situation. The fiscal resources needed to implement these suggested services, however, were not forthcoming, and the extent to which specialized resource services have been applied to mainstream settings has been typically dependent upon occasional closure of special schools within a particular region and the reallocation of those resources to regular school (Hood, personal communication, 4/89). Local Education Authorities (LEAs) have tended to rely to some extent on special schools run by voluntary organizations and other private special education schools for the most severely disabled children. Mildly and moderately disabled students have tended to be served in special units attached to regular primary or secondary schools, or in special classes within the schools, within hospitals, or even at home. In 1982, there were 1,644 special schools run by LEAs and nonpublic entities in England and Wales (Department of Education & Science, 1983). The tendency at present is to close special schools for the less severely disabled students and meet their needs in the mainstream. All special schools, at present, undertake some activities designed to partially mainstream and/or integrate students with disabilities (Hood, personal communication, 4/89).

Compulsory education in the U.K. is from 5-16 years, but children assessed for special education needs may start school earlier and/or stay longer. Training for special education teachers occurs in five main ways:
a. Preparation for severe disabilities, including sensory impairments, requires full-time participation ("secondment") for at least a year, and is offered to experienced or to new teachers;

b. Teachers in their initial period of preservice training can gain qualification through specialization;

c. Experienced practicing teachers in the mainstream can assume short-term secondments (practicum experience) and part-time release to attend courses;

d. Schools and colleges can run "in house" inservice training programs, often using FEU materials; and

e. LEAs can organize and conduct local staff development sessions to fulfill a local priority need. (Hood, pers. comm., 4/89).

Transition policy planning in the U.K., interestingly, appears to be emerging at the community colleges administrative level, in the central administration in London, and on individual campuses of further education colleges through the auspices of the Further Education Unit (FEU), an advisory, research, and development organization of the federal Department of Education and Science. FEU advanced the concept of a "transition to adulthood" in 1984, partly in response to the the Warnock Report and partly as an expression of the philosophy of "solidarity" that had been strongly affecting European social welfare systems since the late 1970s (FEU, 1987a, b). This strong social integration movement came to be recognized under the term "inclusion" in England and the U.K., and it embodied in spirit the phased-in program of transition to adulthood sponsored by FEU. The English concept of transition is quite all-inclusive. It provides recommendations for coordinated
programs under such diverse topics, for example, as accountability, responsibility, financial independence, employment, marriage, leaving home, and parenthood. Each of these topics translate into curricular efforts for persons with disabilities at the FEU college sites, including those with "severe learning difficulties." (FEU, n.d.; 1982; 1986; 1987a; 1987b; Clegg, Hutchinson, & Spowage, n.d.)

Support at the colleges for these programs consists of a specially adapted curriculum, a special education teacher, specialized equipment (where needed), a small staff-student ratio, and special in-class support. This program is very similar to one in the U.S. in the state of California, which operates a community college complex of some 109 campuses across the state, with a central authority in Sacramento, the state capital. Special legislation called the Lanterman Act governs special education programs at these colleges and provides funding. Some differences in practice across the two cultures are apparent, however. In California, the special programs are mandatory, but they are available in actuality only for students with mild learning disabilities and physical disabilities. Only a few campuses in California offer programs and assistance for severely disabled students. In the U.K., the further education college program, while voluntary, enjoys a wide participation by most colleges throughout England, Wales, and a few in Scotland and Northern Ireland. No distinction appears to be made on the basis of extent of disability, but the severe end of the spectrum was just beginning to be served in 1987 and 1988.
One effect of the FEU programs and their communication efforts with the lower educational systems has been to put pressure on the continuance of the "ATCs" (Adult Training Centres) (FEU, 1986; 1987a, b, c). These centres are for adults from 19 to 90 years and are funded by Social Services. The FEU argues that for students to make a later satisfactory social adaptation to FEU college "mainstream" programs, they must be integrated during the lower school years. Progress, however, has until recently been slow with integration of elementary and secondary programs in the U.K. (Hutchinson & Tennyson, 1986).

At individual college sites, there is variability in the application of programs for severely disabled students. To some extent, they contain each of the following characteristics:

- **Individualized program planning.** While "statementing" (the English version of what are called Individualized Educational Plans or IEPs in the U.S.), is not required at the college level, the process is being recapitulated in the college programs.

- **Heterogeneous grouping.** While most of the college programs are not yet zero-exclusionary, that is, the most severely disabled students are not yet included, the programs do take a diverse range of students with various disabilities, some of which include moderate to severe intellectual disabilities.

- **Multidisciplinary approach.** The college programs contract with health service providers to supply various therapeutic interventions as needed.

- **Community-based training.** Teaching staff take students off-campus to job training sites in the community (regular
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business and industry sites) and other sites for recreation, community, and domestic training. The model is quite similar to its U.S. counterparts in this regard, although training methods are not as strongly behavioristic.

The job training aspect of these programs is quite exemplary in practice, since it is integrated and involves attainment of competency at a number of different job sites in the community by each disabled person. The job placement component, however, remains missing for the most part. The college people complain that the current government policies in the U.K. consistently favor placement in the YTS facilities (Youth Training Scheme). These are two-year sheltered workshop programs that essentially prepare disabled people for placement in still other sheltered workshop situations. The job placement problems appear to be further compounded by loss of benefits under the social security system, which are presently strongly tied to medical certification for eligibility. Placement in a YTS facility guarantees eligibility, whereas integrated job training through a further education college program does not.

Current directions in the U.K. for transition programs appear to include the expansion of the FEU model to include persons with more severe disabilities, eventually approximating a zero rejection model, with strong public pressure supported by the Department of Education and Science to increasingly integrate numbers of students with disabilities into the compulsory education system. The further education colleges increasingly provide "transition courses", which then feed into vocational training opportunities. At the placement
end of transition, the picture remains bleak if addressed at all. As one FEU project director put it, "We are preparing young persons with disabilities for transition into what?" (Hutchinson & Tennyson, 1986).

3. **Holland.** Holland is a country with a strong tradition of providing an umbrella of protective, welfare-based services for its citizens with disabilities. With its liberal social assistance traditions, the government of Holland has far outspent all other European countries in per capita expenditures to assist persons with disabilities (Havemann, 1977). While virtually all of these protective services, including education, are self-contained and separate, often clustered by nature of the disability, it is clear that segregated services evolved out of a sense of providing "something better" for people with disabilities than would be available to nondisabled people, as a kind of compensatory ethic. By far the cleanest, brightest, most well-equipped special schools and workshops for disabled people are to be seen in Holland. If an industry is employing high technology in manufacturing, that technology is present in the workshops. Trainees, however, when placed in competitive employment, are placed for the most part in other workshops, not integrated into regular business and industry.

While the government of Holland is justifiably proud of its service structure for disabled citizens, it appears to be acutely aware of the desires of disabled people to be more fully integrated into society, particularly in employment and in school. Much attention has been given to these issues in recent years by the organizations of disabled people and parent organizations.
The Education of the Handicapped Law of 1985, while patterned in part after PL 94-142 in the U.S., was to provide education to those disabled students "who could benefit from education" (70% maximum). The mandate was thus not zero exclusionary, as in the U.S. and Italy. The law was specifically intended to develop special schools. The idea of special classes on regular schools was rejected on the basis of being stigmatizing and too segregated. Efforts to effect school integration are frustrated by the existence of two separate parallel school systems, one for special education, the other for regular education. The scope of the problem is reflected in the fact that there are 1,000 special schools in Holland compared to 8,000 regular schools for students aged four to twelve.

The Holland Ministry of Education is currently experimenting with a plan to provide financial incentives to regular schools to serve disabled students, but there is much resistance from regular educators to these efforts. The social service system for disabled people in Holland is extremely specialized. There are, for example, some fifteen identified disability categories, including "learning disabilities." There are special schools for each of these disability types as well as special sheltered workshops for many of these disability types. In a country with 14 million people, there are five residential schools for the deaf and three for the blind. By comparison, California (U.S.), with 26 million population, has two of each.

Children with severe intellectual disabilities in Holland are in special day care programs rather than in school. They are excluded
from special education, but they are few in number (approximately 1% of the school-age population). These agencies are run by the Health Authority rather than Education, and are unconcerned with the issue of transition.

Compulsory education in Holland is from four to sixteen years. Students without disabilities then have a choice between "middle" schools, which are vocational training facilities, or college preparatory. The special schools for disabled students are from four to eleven years, followed by placement in smaller secondary schools, which may operate up to age 20. Sheltered employment, supported by social insurance, starts at age 18. A student with disabilities at 18 can continue in school until age 20, can enter sheltered employment (terminal-production), can enter a day care institution, can remain at home with social insurance payments to the family, or can enter regular employment (Ministry of Social Affairs [Netherlands], n.d.)

Holland has an employment set-aside law of between 3% and 7%, but as of this writing (June, 1989), the law is unenforced due to regulatory constraints and is not currently a factor in transition.

Transition in Holland is really a planned transition from one separate setting into another one. Students in the special secondary schools are given training experiences at their schools' workshops, with occasional trial runs at the regional production workshop. Those who are deemed eligible by evaluations of their behavior motivation, competence, etc., are entered into a "transition plan" for movement into the regional workshop. Clients who do poorly after transition can be returned to school, and those who fail to qualify
are retained at school. Only one percent of all workshop clients ever make it into integrated industrial employment.

There is an interest at present in the Hague for increasing the integrated work placement option, but the existence of the sheltered workshop tradition in Holland, a system in which the Dutch have traditionally taken great pride, makes such a transformation very difficult. One legislative proposal calls for a guaranteed full employment program for 16-21 year-olds, which would mandate integrated job placement opportunities for disabled clients, but this concept remains, at this writing, in the design and discussion stage.

The situation is further complicated by the fact that Holland has a minimum wage law, no productivity wage scale, and pays very high social insurance benefits. A disabled person qualifies for benefits in cash of up to 70% of minimum standard wage by staying home and doing nothing. Such a person can qualify for additional benefits up to the minimum wage standard if he or she has children as dependents, or if he or she is married to a person with no income. Persons working full-time in a workshop can earn minimum wage or more.

The major problem of transition from school to adulthood and integrated circumstances for disabled people in Holland appears to be less geared to the issue of competition and productivity, as in Switzerland for example, but is rather more an outgrowth of the country's rich liberal tradition. In some ways it might be said that Holland takes care of its disabled citizens too well. There are no challenges, nothing to which to aspire. Even the purpose of the

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sheltered workshop is presented as "letting the disabled person experience the satisfaction of actually making something useful." This is not to fault Holland. The independent living ethic that swept out of Scandinavia and across the world in the 1970s caught all countries by surprise. Those that have adapted most suitably to the demands for challenge, opportunity, and most of all, integration, are those that had the least well-developed systems under the earlier, more protective ethic. States like California and Missouri in the U.S., which had built large complexes of segregated schools during the 1960s and early 1970s, for example, are now finding the reformulation of these programs into placement at regular schools difficult. The issue is made all the more complex because of the relative newness of the facilities and the programs. Administrators who were present when special schools opened their doors for the first time and were a source of great community pride are still there in many instances, and for them the issue is highly emotionally charged. Holland, with its state-of-the-art workshop programs, fully equipped to compete with private industry, inclusive of all aspects of high technology, is unlikely to easily embrace a plan that rapidly replaces these programs with more integrated alternatives.

The challenge for Holland in terms of transition will be to effect school integration first. Integration through the school years should help prepare disabled people socially for a transition into integrated employment and living circumstances later on. Probably combining the regular and special education systems into a single system at the federal and regional levels would facilitate this effort.
Some kind of productivity-wage option would probably also be necessary in order to allow industry to remain competitive and still integrate people with disabilities into the work force. This would, of course, necessitate substantive changes in the social insurance scheme. On the positive side, such changes would, in the long run, effect substantive savings to Dutch taxpayers. The social support system in Holland, because it is so generous, is tremendously expensive relative to other countries. Since there presently is a recession of severe magnitude in Holland, the incentive to begin reform programs along these lines appears to be in effect. It is rarely the case that social programs presently needed to benefit citizens with special needs may actually cost less to administer than the social programs presently in effect to benefit those very groups. Such may be the case in Holland. If so, an interesting opportunity for policy evolution exists in that country.

4. France. As is the case in Italy, progress toward formulation and implementation of social policy on transition in France is evolving through a mechanism of social experiments in various regions of the country. As a guiding principle in school placement of children with disabilities, integration has been evolving since 1975 through national legislation (OECD, 1985). In 1982 a law was passed that facilitates integrated school placements, but it did not prescribe regular class placements as did corresponding legislation in Italy, nor did it provide for special support teachers (called special education teachers in the U.S.). Children with disabilities, including those from specialized institutions, may be integrated into regular schools when there is
agreement to do so among the teachers and administrators at the school site.

One such regional experiment has been under development, for example in Departement Essonne, which has recently shifted its school services pattern from nearly 100% segregated for disabled students to nearly 100% integrated placements. Essonne uses a model of special classes at regular schools as well as regular class placement. This model is affected by "GAPP" (Groupe d'aide Psycho-pédagogique), which is an educational psychology-oriented, multidisciplinary group responsible in Essonne, not only for solving problems of student maladjustment generally, but also for developing methods to teach students with even severe disabilities in the context of regular class placements in the compulsory schools. The Essonne model is a pilot experiment which, if successful, is likely to be replicated in other Departements of France.

The current vehicle for transition planning in France appears to be a type of community rehabilitation facility run by the Departement with support from the Federal government. These facilities have the advantage of looking after all of a client's needs under a single agency umbrella rather than the more typical model of different agencies having responsibility for different aspects of transition. The community rehabilitation facility has the further advantage of being a part of the surrounding neighborhood or community, of serving all disabled clients in the community (on a zero rejection basis), of having a relatively small client case load for each center, and of having close ties with business and industry.

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The one missing link is that the centers have no particular relationships with the school programs from which they receive their clients. It would seem that future, fully developed transition programs involving these centers would need to consider evolving closely coordinated linkages with the school programs.

Under current French law, the wages paid to a disabled employee may be redeemed under specifiable circumstances by 10, 20, or 50% ("abattement de salaire"). The income reduction to the employer in these circumstances is compensated by the government ("garantie de ressources"). Applications of this wage adjustment, have, however, traditionally been confined to agricultural jobs. There are changes presently under way in French law affecting workers with disabilities, possibly reflecting a social ethic in France corresponding to the "solidarity" movement in the U.K. and in Italy.

In a working class suburb of Paris, CAT (Centre d'aide par le Travail), a sheltered workshop, operates a highly successful cooperative apartment living program. The CAT facilities are usually nonprofit, sheltered workshops that operate on subcontracts to private industry. Under most circumstances, CAT workers do not find their way into integrated employment circumstances. Recently, however, some CAT facilities have begun to experiment with "outside" placements of disabled workers in "interim" (temporary) job situations. The industrial site employees placed by the CAT facility, which I visited, live in the same large apartment complex that most of the regular factory employees and their families inhabit. The disabled employees pay for their
apartments out of their wages, but the rehabilitation program pays for a live-in support service. Several severely disabled clients over the past few years have become fully independent in their living circumstances through this highly "normalized" means of effecting a residential alternative to segregated living.

The facility has a multidisciplinary staff financed entirely by the government. Psychologists, psychiatrists, social workers, and sociologists all come to the facility for experience during their University training, and some stay on as permanent staff after completing their training. The CAT facility starts serving clients at age 20 years. Up to that age, the welfare service has responsibility.

Each "Departement" in France has two commissions that together define the rights of and programs for people with disabilities. The CDES ("la Commission Departementale d'Education Speciale") applies to youth below the age of 20 years, and the COTOREP ("la Commission Technique d'Orientaion et de Rellemend Professionale") applies to adults. Under new guidelines for transition, CDES can send a disabled 16-year-old to COTOREP for vocational placement. The challenge to the transition services in France appears to be the formation of further linkages between these two agencies responsible for disabled people at two age groupings. Currently, there is no organized cooperation between the regional rehabilitation facilities and the health service school programs. If models such as the Essonne model for integrated educational programs prevail and are replicated in other areas of France, then linkages to the work training and placement centers
could be facilitated and coordinated transition planning would likely evolve.

5. Italy. Italy is inclined to experimentation on the issue of transition. Social policy on this matter in Italy appears to be largely driven by the Supreme Court in its ongoing series of judgments concerning the integration of disabled citizens. While there is a legal mandate for integration in public schools in Italy, actual implementation of the law varies significantly from one region to the other.

The regional authority for health services, usually in conjunction with the municipal health authority in urban areas, provides funding for various experimental approaches to transition. There appears as yet to be no coherent federal policy on the topic, and no single approach is emerging as dominant. The model in Genoa in the province of Liguria, however, is receiving a great deal of favorable attention, and efforts to replicate this model are under way in other regions (Gerry, 1989). In Rome, for example, the prevalent compulsory school model is one of placement of disabled students into regular classrooms to accomplish school integration. These placements include students with intellectual disabilities, are age-appropriate, and are in accordance with the natural proportion of disability in the community. Thus, there is seldom more than one student with disabilities in a classroom. Since Italy has a prevalence of about 2% judged by regional or municipal health authorities to be disabled (as compared to about 11-13% in the U.S.), schools and classes are not unduly impacted by the effectance of integration.
Compulsory education in Italy is from about age 6 to about age 14 and is half-day inclusive of Saturday morning. There are some experimental schools providing full day programs, Saturday excluded, and these are often sought out by the parents of children with handicaps. Parents are free to choose whatever public school they wish for their child to attend, so the neighborhood school is not the only option. There are voluntary preschool programs available at elementary schools for nondisabled children, and these disabled children are now being integrated with these as well. Although voluntary, it is estimated by education authorities that approximately 90% of families with young children are participating in the preschool program, nationwide (Gerry, 1989).

While there is no such thing as "special education" in Italy, there are itinerant teachers called "support teachers" (Gaylord-Ross, 1987) who specialize in the education of students with disabilities and provide support and team-teaching arrangements to the regular teacher. There are currently very few University programs in Italy that provide specialized educational training for these support teachers (Gaylord-Ross, 1987). Most of their preparation seems to derive from practical experience and participation in regional and local inservice training efforts sponsored by the Health Services authority. Specialized training is available, however, through courses taught at the University of Rome and at the University of Bologna. Support teachers assist regular teachers in a variety of ways, which involve the regular as well as the disabled children in the class. Children with disabilities are sometimes pulled out of the regular class to be worked with individually by
the support teacher, and are sometimes included in small groups wherein the support teachers carry out instruction designed to facilitate interactions and participation between the nondisabled and disabled children.

At the later ages of schooling, about 10 or 11 years to age 14 or 15, the support teachers take students out of the class for instruction in community living outside of the school context. The emphasis, however, is much more on socialization, participation, and belonging then it is on practical skill development, as is the case in most U.S. models.

School integration is felt by Italian education officials to be very important to the later transitional process. Children who are successfully integrated into the regular educational system will likely have a greater level of social maturity than will children who have been segregated for their years of educational experience (Casapietra & Montobbio, 1982; Gerry, 1989; Montobbio, 1982; 1985). In Rome, integration is well under way for the elementary school population, but there is only partial integration at the secondary school level (ages 11-14). There remain a variety of special school programs for students with disabilities which operate in parallel to the regular, integrated school programs. These options hold for all but the most severely intellectually and physically disabled children (called "gravissimo"), and these children are in day treatment settings funded by the health services system. The Italian Supreme Court has recently ruled that integration of disabled students must be extended to the noncompulsory high-school system, but there are, as yet, no models
of this activity in Italy. Secondary school integration will be difficult to achieve because of the emphasis upon entrance requirements (by examination), scholastic competence, and competition.

Traditionally in Italy, vocational education for persons with disabilities begins with completion of the compulsory education years, at about age 14 or 15. Much of this effort, however, has been and continues to be segregated and sheltered-workshop based.

The secondary schools of Genoa (the last stage of compulsory education) utilize a transition team model that applies to all students, not just those with disabilities. In the last year, age 14-15 for regular students, 14-16 for disabled students, the transition team begins to seek placement opportunities for each school’s graduates, and begins to counsel the parents of the disabled students as to their options. This transition team membership is voluntary and each one serves a particular region of the city, including several secondary schools. The teams are made up of combinations of regular and support teachers, one or two from each school site within the region. Each class of graduation age within each school will spend class time discussing transition issues and will make site visits to various placement options (e.g., the lyceum, or high school, etc.)

The students without disabilities always find a space in whichever postsecondary school program they choose to attend. Disabled students will go to several options. The most severely disabled students will go to a terminal workshop site operated by
the parents' association. Moderate to severely disabled students will be placed in a vocational training program that has a combination of real work site-training activities and a sheltered workshop site.

The most fortunate of this group will get into the "Genoa Experience" program, described below, a special project with a waiting list. Less disabled students will get integrated job site vocational training, and eventually they will be placed in business or industry in the community.

The famous "Genoa Experience" model is the brainchild of psychiatrist Enrico Montobbio, an official with the Health Services agency of the city. (Casapietra & Montobbio, 1982; Montobbio, 1982; 1985). Montobbio feels that the opportunity to engage in work in fully integrated circumstances is essential to the cognitive as well as the emotional development of the individual. Anything less is likely to foster dependency and lack of feelings of self-worth. For this psychological aspect of the workplace to have form, the disabled person must be fully accepted as a co-worker and not be perceived as an outsider. He must be hired by the company and not dependent upon external supports. To achieve this end, Montobbio and his associates have established teams of individuals, including representatives of both union and management within industry, and social workers who assist the person with disabilities to get established in the workplace. The social workers are carefully recruited to have the skills to relate successfully to the disabled person as well as to be acceptable to industry.
The process begins in Genoa in early childhood, with fully integrated school programs for virtually all children with disabilities. Unlike Rome, the Genoa schools currently take even the most severely disabled students (gravissino). There are presently only a handful of children in Genoa, a city comparable in population to San Francisco in the U.S., who are not in regular classrooms in the regular public schools for reasons of the extent of their disabilities. Placement of the disabled children at the schools for compulsory education is in the regular classroom with no more than one or two students with disabilities in any class.

Support teachers in Italy are really just that. They provide support to the regular teacher, particularly around the needs of the disabled student, but also on the total curricular effort of the class. These teachers are former regular teachers who have taken some specialized training in psychology (there is no University curriculum for special education in Italy). The prevalent model is expressive-emotional, or therapeutically oriented, in approach as opposed to the more behavioristic, skill-building emphasis in the U.S. Nevertheless, some support teachers engage in community-based instruction in a range of different environments with their students in Genoa using instructional procedures that would be instantly recognized and appreciated by U.S. special education teachers, who tend to operate as a parallel service delivery system rather than as a support to the regular system.

The Genoa school system appears to get quite comparable results from students with severe behavior disorders, using an approach heavily grounded in socialization and a kind of expressive
therapy model, to the results obtained, for example, in the San Francisco School District in the U.S., with similar students, where a much more behavioristic model is in evidence: one which relies more heavily on externally provided supports to the regular school milieux.

Other aspects of the Genoa school system are quite similar to its counterparts in the U.S. Genoa is a comparable sized city with relatively the same number of schools and school children as San Francisco. Genoa and San Francisco are both fully integrated as far as disabled students are concerned. There are only thirteen very severely disabled children of compulsory school age in Genoa who were still in the last remaining segregated school, in Spring, 1989, and that school was slated for closure in the near future. San Francisco has only one school (a high school) remaining with a disproportionately large number of students with disabilities, such that integration is not effectively accomplished; placement at this school has diminished in recent years. The San Francisco District also operates a separate school for students with severe emotional and behavioral disabilities. In San Francisco, 11% of the total student population is disabled (comes under the Education of the Handicapped Act of 1974). In Genoa schools, 2% of the students are judged to be disabled by the regional health authority and are deemed eligible for special services. In San Francisco, students with moderate and severe disabilities are, for the most part, in special classes at the regular schools, with a high degree of integration in classroom and nonclassroom environments. In Genoa,
all disabled students are served in the regular classroom with no more than one or two disabled students in a class.

The local health service agency provides nurses and therapists at the schools in Genoa on an as-needed basis. Schools with students who have unusual health-care needs, such as required by the most severely disabled students, have a nurse in residence at the school. The local health authority has also recently begun to fund special aides who work with very severely disabled students in their regular classes. As yet, these aides receive no special training in other than what is provided to them at the school site by the support teachers.

The site administrators, or principals, in the two cities are comparable as to their role and function with the disabled student population. In both Genoa and San Francisco, principals have been steadily gaining knowledge and experience with more severely disabled students in their regular schools, and now appear to consider themselves, for the most part, to have the requisite skills to supervise the programs for these students at the schools.

Viewed from the perspective of an analysis of transition, the process encounters difficulty at the time disabled students leave compulsory education, about age 15. From here, the most severely disabled students go off to "terminal" sheltered workshops or to the parental home with cash payments to the family to compensate for the disability. Less severely disabled students may be accepted later on into Montobbio's experimental program, which is expanding, but which still has a substantive waiting list. Many of these secondary school "graduates" go to the sheltered workshop.
operated by the large parents' organization (of disabled persons), ANFFAS, and subsidized by the municipal government (at a rate of about $75 U.S. per day per client). Although this workshop program is viewed as a work training effort, few clients who do not enter Montobbio's project ever get permanent employment. The education authorities in Genoa hope that the new emergence of integration into the secondary school (ages 15-19) programs will help to correct this deficiency. This integration of secondary schools, which is not compulsory, really has yet to begin and is fraught with administrative problems, yet there is clearly a commitment on the part of these educators to pursue the effort.

At the other end of the transition "bridge," the employment end, again the Montobbio effort is highly successful. The key factor in job placement seems to be what Montobbio calls the "internship" year. After being trained for up to five years in a number of job sites, a disabled client is placed in a particular job situation for one year under the terms of a contract between the Health Services Agency and the industrial enterprise, which states that if the individual succeeds at his job for a period of one year, he will be permanently employed. The Health Services agency pays the individual his "wage" through the employer, so that he receives his pay as do the other employees at work, for this year, and then it is paid by the enterprise thereafter. The enterprise can pay a "productivity wage" based on the disabled worker's relative level of production. This wage can be as low as 40% of the normal pay for the job. This productivity wage, coupled with the 15% set-aside law
for employment of the disabled people, creates an incentive for the internship contract.

Montobbio's project currently operates six teams with the assistance of two social workers on each who serve 15 clients in six regions of Genoa. Two other social workers do only job development work, and serve on all six teams. These teams are the actual "transition teams."

In addition, there are the "gruppo guidos," the local community transition planning groups, which have the union representatives, etc. Thus, the essential elements of community involvement, representatives of the governmental system, business, and labor are involved in the transition effort. According to Montobbio, this participation mitigates against failure, which presently is considered to be less than 10% of clients placed on jobs. The follow-up function of transition is performed by the cross-team social workers, who track progress of clients after they are placed for about three months.

Finally, Montobbio and his associates are committed to the principle of "natural proportion" and do not place disabled people in "enclaves" within industry. Usually there is no more than a single worker with a disability in any one workplace. The job sites are a mix of both public and private industry, but so far the project has focused nearly exclusively on blue collar industrial placement sites. They hope in the future to expand the range of types of jobs available to their clients.

It is clear that the developing experiments in transition in Italy have far-reaching implications for transition systems world-
wide. Many of the components that appear to breed success in job placement for persons with disabilities, including those with severe disabilities, are in place and being tested in Italy, particularly in Genoa. Perhaps the most impressive aspect of the Italian experiments in transition is the documented success of their placement efforts, even in areas such as Genoa where unemployment is currently (1989) running as high as 12% due to recent shut-downs in the steel industry. Presently in Genoa, over 300 disabled clients have been placed in paid jobs with about 95% retention rate over a period of three years of tracking clients. Unlike supported employment models in the U.S. where external job assistance is provided by government agencies, in perpetuity if necessary, the Italian models are much more oriented to assistance functions being provided by the enterprise (as suggested elsewhere by Brown et al., 1988).

The status of transition in Italy, then, if viewed from the perspective of its most advanced models, can be summarized as follows:

- Fully integrated school programs from early childhood to adolescence with age-appropriate, regular class placement, and inclusive of even the most severely disabled students (zero rejection).
- A gap occurs at ages 15-19 with many disabled students going to segregated, workshop-based job training, but with some being accepted into an integrated, multi-site job training and internship program, resulting in permanent job placement and internal support with productivity wage.
A coordinated transitional effort, funded by the local social services authority, with funding from a variety of sources, including regional, federal, and multinational programs.

What remains for these models to progress further would seem to be (1) an effort to provide continuity from age 15 to integrated job training efforts at ages 18 or 19; (2) an effort to include the more severely disabled population in the transition effort; (3) an expansion of the placement options into a wide variety of public and private businesses and industries, both large and small, and (4) an inclusion of preparation and assistance in community living and recreation, together with residential/domestic considerations in the comprehensive transition effort.

When the linkage between integrated school programs, job preparation programs, residential and community living support programs, job placement functions, and coordination and follow-up are finally developed, the transition programs in Italy should serve as a complete model, certainly worthy of replication in other countries. Various aspects of the Genoa model have significant value for replication now.

The efforts to include the more severely handicapped clients may be hampered in part by an over-reliance on the socialization of the disabled person in preparation for the workplace relative to specific skill development. This philosophy tends to favor the less intellectually disabled client, who requires relatively little direct skill instruction compared to the more severely disabled client who may need to be taught a wide range of skills. It is as if the
socialization process is not only necessary, but sufficient as well and the rest will come with experience. Such a model stands in contradistinction to the U.S. approach, which is almost exclusively focused on skill-building relative to socialization at the later ages of transition. Perhaps the extreme reliance of the U.S. models on externally provided, job support mechanisms is an outgrowth of the relative lack of socialization of the disabled worker that is so effectively accomplished in Italy.

Finally, there may be somewhat of an over-emphasis in the Italian model on the role of work in the overall transition spectrum. Some of this has to do with the relative autonomy that exists among the various transition provider agencies. The Genoa project, for example, headed up by Dr. Montobbio, is exclusively concerned with job preparation and placement, whereas problems associated with community adaptations and residential placement and adjustment are under the purview of local rather than regional health agencies. A coordinated effort among these agencies may or may not occur, depending upon the constituency of the "Guiding Group," which is typically made up of representatives from the unions, public and/or private employers' associations, the local branch of the Ministry of Labor, parents and representatives of parents' associations, and representatives of local authorities. It is participation in this last category that apparently determines the overall coordinated success of the transition program in all areas of the disabled client's development.

There is presently in Italy no legal mandate for a coordinated transition authority that affects these various domains of transition.
It is clear, however, that the models evolving from these social experiments in Italy are highly successful in effecting major aspects of transition for disabled people, and that these models have clear implications for the solution of problems around transition planning in other countries.

6. Denmark. Compulsory education in Denmark is guided by three main principles that bear on transition (Gerry, 1988). These are: (1) normalization, which guarantees equal participation for disabled students; (2) integration, which ensures placement of most disabled children in the Folkeskole structures (regular schools) and, like Genoa, in the regular classroom, and (3) decentralization, which places responsibility for school programs at the local (municipal) level.

Approximately 25% of students with disabilities in the Folkeskole system are placed in separate classes within the schools for most or all of the school day. Children with severe intellectual disabilities or multiple, severe disabilities are placed in county operated special schools.

Transition in Denmark is strongly focused upon a highly innovative concept called the "Kurator." The Kurator is a "case advocate" who provides ongoing assistance to young persons with disabilities (13 years on) and their families en route from school to gainful employment and community life. The Kurator is a Folkeskole teacher who is employed by the school authority at the local level to provide a variety of support services to disabled students and their families. The teaching load of the Kurator is adjusted to compensate for this case load. Within the public
schools, the Kurator works closely with the class teacher for each disabled student to ensure continuity in overall educational planning and service delivery. Further, the Kurator provides the coordinating function between the educational agency and the county-operated social service agencies. A typical Kurator has a case load of approximately 60 students, 30 of whom will be in a Folkeskole and 30 in vocational or sheltered tracks (Gerry, 1988). Students in the separate county schools, who are more severely disabled, are also served by Kurators.

During the tenth year of Folkeskole attendance, work placements are arranged by the Kurator. At this point, students will have had some work experience placements as part of their school curriculum. The actual identification of employers is an informal process where family and community informal networks play an important role. A successful Kurator must be a person well-known and respected in the community for this purpose. When, in the tenth year, a work placement is made, the Kurator visits the site at least once a week to assist in any problems which may arise. The Kurator develops a detailed progress report at the eighth-week point, as a kind of evaluation, a copy of which is provided to the student-client's family.

The tenth year work placement plan is similar to the internship that characterizes the transition model in Genoa, Italy. The Kurator Model differs in that it is linked to and operated in conjunction with a school program rather than a postschool service system. It is similar in that it allows an employer to have a substantial period of time in which to get to know a disabled

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employee and to evaluate his or her job performance. Both plans allow for compensation to be paid directly to the employer to be returned, in part or whole, back to the intern in the form of a wage. The Genoa model calls for a contract to hire the individual after the internship, if all is deemed satisfactory. The Kurator model leaves the possibility of a hire after the internship year as an open option for the employer.

Denmark has legislation that facilitates job placement for disabled clients. The Municipal Youth Employment Guarantee guarantees a year of employment to every young person 18-20 years of age and applies to youth with disabilities. Subsidies are paid to employers to compensate for productivity loss due to employment of a disabled worker.

The segregated educational system for students with more severe disabilities in Denmark is extensive. All students with deafness, for example, are educated in county-operated residential schools, as are most children with mental retardation (including those with Down Syndrome). Federal legislation has targeted these county special schools for complete extinction by 1993. Current planning calls for conversion of the residential schools to regional resource centers, providing assistance to the integrated Folkeskoles in the county.

Transition from county-operated special schools typically links students, via the Kurator, to county-operated sheltered workshops. These workshops are of two types, high and low production. The high production workshops, for more capable students with disabilities, are time-limited and have a high rate of
placement of clients into integrated employment after a one-to-three year period. Low production workshops receive clientele primarily from the county-operated special schools and offer both day care and work experience programs.

Placement in the low-production workshop is usually a terminal placement. Some clients in low-production workshops occasionally make it into high-production workshops.

The approach to transition in Denmark bears much resemblance to many of the U.S. models. Like Denmark, many U.S. communities are transforming both their educational and postschool service systems to much more integrated systems. The Danes have found a solution to at least one of the problems that haunts virtually every other transition model worldwide, and that is the coordination of the various points of contact between the student-client and the service systems. The Kurator, as a combination transition specialist, case worker, and teacher coupled with a concentration of service systems at the local level (the county) make the process much less likely to "lose" a client at any point in the system than is the case with most transition models. Only the existence of low-production workshops and a situation of generally high unemployment in Denmark prevent the Kurator model from achieving a highly successful outcome.
III. PRESENT ISSUES IN TRANSITION POLICY

A. Multinational Issues

An examination of some transition models in a variety of OECD member countries reveal a number of issues that affect the process in virtually every case. Of these, the most significant are:

1. the extent of integration of disabled people in the school years;
2. coordinated planning and follow-up of clients from school to work and community living;
3. the extent of integration in the postschool work and community living options for clients, and
4. the attainment of some form of paid competitive employment.

1. School integration. There is a clear recognition across most of the various models of transition reviewed in this chapter that the social and communicative development of the disabled client is of major importance in acquiring and sustaining a successful job placement in integrated circumstances. Further, the substantial body of research literature, much of it originating in the U.S., linking social and communicative proficiency as an adult to the extent of the individual's integration as a child, has led to strong forces to increase integration in the childhood school period. This trend appears to be strongest in those countries which most strongly view employment as a desirable outcome of transition programs for disabled clients. In the U.S., Denmark, and Italy, for example, not only employment but integrated employment are highly, positively sanctioned social values for adults with disabilities. Social forces seeking to increase the extent of school integration are very strong in these three countries. Interestingly, in the U.S. and Denmark, social policy at the federal level acts to
shape both school and postschool processes in this direction. In Italy, the policies affecting the two ends of the "bridge" of transition appear to be entirely separate developments, but moving in parallel.

2. **Coordinated planning and follow-up.** This issue is largely unresolved, save in Denmark. U.S. models suffer from a failure of coordinated transition planning. Students who are fully integrated in high schools and prepared for work in integrated settings often find themselves actually placed in sheltered workshops because, in many instances, the values and/or policy of the postschool support systems are different from those that characterize the educational system. Where transition specialists work for the schools, their authority and influence stops at the point of "graduation."

In northern Italy, perhaps the most highly developed and successful transition model of all, there is little evidence of coordination between the educational systems and the postschool provider agencies. Yet the process works in Italy, probably because there is a remarkable singularity of purpose and values that characterize the two systems. A transition specialist, or Kurator, in Genoa would presumably have quite an easy task compared to his counterparts in certainly the U.S. and perhaps even in Denmark.

3. **Integrated work and community living.** The philosophy of adult integration of disabled people has strong ties to the "normalization" movement that emerged in Scandinavia in the 1960s and in the "solidarity" movement that sprang out of Eastern Europe in the 1970s. It is tied to the independent living movement...
in the U.S., which has come to view problems of disability as largely "environmental barrier" problems rather than as deficient characteristics of individuals. Integration and employment appear to be related by virtue of job sites comprising the only integrated environments that exist following schooling. If, for example, leisure and recreational activities came to have a more positively valued place in adult life, such that typical adults work, say, three days a week but attend recreational functions two days a week, it is doubtful that employment would occupy such a high policy priority as an outgrowth of transition that it does at present. It appears not to be the sanctity and integrity of work, per se, that guides this trend, and social insurance measures usually mitigate against a primary wage motive for work; so it is the opportunity for integration, for friendships and interactions with typical people that appears to drive social policy toward integrated employment. This same motive operates in the ongoing "deinstitutionalization" movement where it is coupled with a reaction against the adverse environmental conditions that characterize large residential facilities.

4. **Wage issues.** In all the countries surveyed except Italy, the issue of wage surfaced as a substantive barrier to placement in integrated, competitive employment situations. In Italy, people with disabilities are hired into the work force and paid the same wage as nondisabled co-workers without special compensation to the employer to make up for lost productivity. Here, the driving force appears to be a social ethic rather than an economic incentive. This situation may well be unique. In most of the other countries,
the social welfare system must compensate business and industry for reductions in productivity accruing to hiring people with disabilities. In many cases, there is not a problem because the cost of operating a sheltered facility providing "alternatives to work" may well exceed the cost to the "taxpayer" of supporting the same individuals in gainful employment situations (Wehman et al., 1988).

In summary, the prevalent logic that seems to govern present planning and policy concerning transition across various cultures seems to be the following:

1. Adults with disabilities, including severe disabilities, are entitled to live in integrated circumstances to realize a quality of life comparable to those who have no disabilities.

2. The only integrated circumstance available to disabled people as adults on a day-to-day basis is the world of typical work.

3. Since the world of work is governed by the economics of the marketplace, loss of productivity may need to be compensated by social welfare transfer payments to private as well as public businesses and industry.

4. Success in integrated work and other adult community situations is quite likely to be dependent in large part on the disabled individual's level of social and communicative development.

5. Social and communicative development at the adult level may be highly dependent upon earlier experiences in integrated circumstances which are characterized by longitudinal and frequent interactions and relationships with typical children.
6. Interactions and relationships with typical children require integrated circumstances during the schooling years, probably throughout the time of preschool and compulsory education.

7. International success in developing transition programs for disabled people are likely, for the foreseeable future, to be tied to social policy and program planning efforts that address the above-referenced logic to the maximum extent possible.
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