CHAPTER 2

A NATIONWIDE INVESTIGATION OF CAREER GUIDANCE AND INDIVIDUALIZED PLANS IN JAPANESE SPECIAL HIGH SCHOOLS (STUDY 1)

In Japan, individualized plans for instruction ("kobetsu no shido keikaku") were regulated in 1999 for students with disabilities to learn "activities for independence" ("jiritsu-katsudo") at special schools (Japanese Ministry of Education, Culture, Sports, Science and Technology, 1999). Recently there have been calls to implement individualized support plans for employment ("kobetsu no shuro shien keikaku") for high school students with disabilities (Japanese Ministry of Education, Culture, Sports, Science and Technology, 2000; Japanese Ministry of Education, Culture, Sports, Science and Technology, 2001b; Tokyo Public Special Schools for Intellectual Disabilities Association for Promoting Employment, 2001) in order to promote students' school-to-work transition. In spite of the Japanese Ministry of Education, Culture, Sports, Science and Technology's initiative on behalf of the individualized support plans for employment, special high school teachers in Tokyo have been developing individualized transition support plans ("kobetsu iko shien

keikaku") instead, because they can include a wider range of students such as those who may not intend to work in a competitive or supported employment environment (Tokyo Department of Education, 2001; Tokyo Public Special Schools for Intellectual Disabilities Research Association for Promoting Employment, 2003). Although it is not certain whether implementation of the individualized plans for employment or the individualized transition support plans will be in the next version of the Japanese educational regulations at the moment, the term "Individualized transition support plans" is used in this study with the hope that individualized transition support plans will be available for a variety of students with special educational needs including learning disabilities or other learning problems and disadvantages due to their low socio-economic status or culturally and linguistically diverse background. These students may realize higher achievement in regular school settings and possibly have a better chance of transitioning from secondary to post-secondary education with appropriate assistance.

Individualized plans for instructions were adopted under the strong influence of individualized educational programs (IEP) in the United States. The individualized transition support plans were also strongly influenced by individualized transition plans (ITP) that was the "transition services" page in the IEP since 1990 federal mandate in the

United States (Everson, Zhang & Guillory, 2001). The IEP is usually developed by a team of educational and medical professionals, parents and their advocates. The ITP is developed with a team including an even larger variety of people such as students with disabilities themselves, their families, teachers, job-coaches, prospective employers, adult service providers or their community representatives and so forth (Mizutani & Yanagimoto, 2002). Compared with the practices of individualized programs or plans in the United States, however, less people are included with the individualized planning process in Japan. In the United States, education practitioners also have struggled to discover effective ways to involve students, their families and local agencies in the ITP process (Bassett & Lehmann, 2002; Blalock & Benz, 1999; Cozzens, Dowdy & Smith, 1999; Wehmeyer, Morningstar & Husted, 1999). Involving students, parents and other significant people into the transition planning process may become critical for Japanese teachers as well, in order to effectively implement individualized transition support plans.

Purpose

The purpose of the study is to investigate actual conditions, characteristics and problems in student and parent involvement in individualized plans for instruction and career guidance at Japanese special schools for students with

intellectual disabilities. Three types of special high schools including schools for students with intellectual disabilities, schools for students with physical disabilities and schools for students with other health impairments are also to be investigated. Unique problems of career guidance at special schools for students with intellectual disabilities are thought to be identified through comparison among the three types of schools, because both rates of post-secondary education after high schools options are lower in graduates from special high schools for students with intellectual disabilities rather than graduates from other two types of special high schools.

Method

Participants and Sampling

There are 3 kinds of special schools ("yogo gakko") in Japan: special schools for intellectual disabilities, special schools for physical disabilities, and special schools for other health impairments. Special schools usually consist of 3 departments: the elementary department (grade 1-6), the lower-secondary department (grade 7-9), and the upper-secondary department (grade 10-12). They rarely have a kindergarten department for early intervention or a post-secondary department for career education (Japanese Ministry of Education, Culture, Sports, Science and Technology, 2001a).

In this study, we refer to the upper-secondary department of 3 types of special schools as "special high schools." Special schools that consisted only of an upper-secondary department ("koto yogo gako" or "koto-bu tandokuko") were included in the population. We didn't include schools for the blind ("mo gakko") and schools for the deaf ("ro gakko") in the population because these two were categorized differently from other 3 types of special schools (yogo gakko) in Japan (Japanese Ministry of Education, Culture, Sports, Science and Technology, 2001a).

A cluster random sampling method was used to select participants in the present study. The cluster units were the 47 prefectures ("to-do-fu-ken") of Japan. A table of random numbers was used for the selection. Out of a total of 501 special high schools for intellectual disabilities listed by the Japanese Association of Special School Principals (2000), we randomly selected one from each of the 47 prefectures. Another special high school from each prefecture was added to the sample based on recommendation from officers of the Japanese Ministry of Education, Culture, Sports, Science and Technology. Appreciated schools were believed to be actively practicing career guidance although it was uncertain whether the schools implemented the individualized plans for that purpose or not. All 23 special high schools that only had an upper-secondary department were also added to the samples. Thus a total of 117 special high schools for intellectual disabilities were

selected for the sample. Out of a total of 192 special high schools for physical disabilities, we randomly selected one from each prefecture that had both classrooms for physical disabilities and for profound and multiple disabilities. We also added all 3 special high schools that only had an upper-secondary department to the sample. Thus, total of 50 special schools for physical disabilities were selected. We also selected all 53 special high schools for other health impairments for the sample.

A total of 220 special high schools nationwide (30.3% of the total) were the subjects of this investigation. We asked the teachers in charge of career guidance ("shinro shido") at these schools to answer the questionnaire for the study.

Preliminary Study

A preliminary study was conducted prior to the pilot study in order to develop a draft of the questionnaire to use in the pilot study. The questionnaire was developed through repeated discussions with 5 graduate students majoring in special education and 2 professors in special education. The first draft of the questionnaire for the preliminary study included 15 items mainly asking about individualized plans for instruction, 14 items mainly asking about instruction including career guidance, and 5 items asking about demographic information of the respondents. Eight special education

teachers were asked to answer the questionnaire and opinions were heard from them regarding how to improve the questionnaire to facilitate the answers from the teachers. Main opinions were (a) the terminology should be consistent with the educational regulations of the Japanese Ministry of Education, Culture, Sports, Science and Technology, (b) there should be multiple-choice questions rather than asking to answer descriptively, and (c) the questions should be reordered in order to prompt the teachers to answer at the beginning. Terminology, for example, "IEP" or "individualized Education programs" were the terminology in the United States so it was revised to "individualized plans for instruction (kobetsu shido keikaku)" as the Japanese educational regulations formally state (Japanese Ministry of Education, Culture, Sports, Science and Technology, 1999). After the preliminary study had been conducted, more multiple-choice questions were added according to the respondents' inputs. The questions were rearranged to the order as questions asking about individualized plans for instructions were placed at the beginning of the questionnaire. The preliminary study was undertaken in June 1999.

Pilot Study

It was considered necessary to clarify the current practices of instruction or support coordination included in the ITP at the present time in order to introduce the ITP or

other individualized plans for transition support at Japanese special schools. Thus, the author administrated the interview surveys to teachers in charge of career guidance at special high schools to examine the current practices of their career guidance and development of the questionnaire for the national survey.

Procedures of the pilot study. The author visited special high schools from July to August in 2000. The schools the author visited had reputations for their special programs. Examples of these programs included inviting local business owners (i.e., a baker and a dry cleaner) as lecturers. They focused on vocational programs for students with severe disabilities and created an original manual for career guidance that appeared to be very useful. The author interviewed the teachers using the questionnaire developed in the preliminary study in the above section. The questionnaire for the pilot study consisted of 42 items. The factors were (a) knowledge of ITP practices in the United States (3 items) and current practices of individualized plans for instruction (13 items), (b) teachers in charge of career guidance and manuals (2 items), (c) current practices of career guidance (11 items), (d) current practices of post-school support (8 items), (e) collaboration with local agencies (4 items), (f) issues in career guidance for students with severe and multiple disabilities (1 item), and (g) profiles of respondents (5 items).

Participants of the pilot study. Participants were 10 teachers in charge of career guidance at special high schools including 6 from the schools for students with intellectual disabilities and 4 from the schools for students with physical disabilities. Nine out of the 10 teachers have taught students with disabilities for more than 10 years. Five out of the 10 teachers have practiced career guidance for more than 5 years. Eight out of the 10 teachers are at their age 40's except 2 at their age 30's. Six out of the 10 teachers were male and 4 were female. The schools that these teachers worked at were mostly in Tokyo metropolitan area (7 out of 10) and the established bodies of the schools were national (2 schools), prefectural (7 schools), and municipal (1 school).

Findings of the pilot study regarding career guidance. Teachers in charge of career guidance were relieved from teaching obligations or with some teaching obligations that were necessary for implementing career guidance. All 6 special high schools for students with intellectual disabilities had at least 1 teacher in charge of career guidance who relieved from teaching obligations. Two out of those 6 schools had 3 teachers who relieved from teaching obligations. Only 1 out of 4 special high schools for students with physical disabilities had a teacher in charge of career guidance who relieved from teaching obligations, and the other schools had teachers in charge of career guidance with some teaching obligations (Table

2.1). One of the schools that did not have a teacher in charge of career guidance who were relieved from teaching obligations had 6 teachers with decreased teaching (Table 2.1).

" Career guidance manual" or manuals with similar titles had been issued at 9 out of the 10 schools and been used for practices (Table 2.1). One school that did not have an original manual for career guidance substituted the manual from the other school where the teacher in charge of career guidance used to teach. No teachers at the 10 schools had developed the individualized plans for career guidance, but some at 9 out of the 10 schools had developed annual plans for career guidance (Table 2.1). We found that career guidance practice generally consisted of practical training, in-school training, occupational programs, career education programs, and career counseling based on the career guidance manual and the annual plans for career guidance.

All teachers who participated in the survey implemented career guidance for all students with disabilities including students with profound and multiple disabilities. Nine out of the 10 teachers answered the lack of their post-school options due to the lack of numbers of sheltered workshops or adult day services was the most difficult issue for the students with severe and multiple disabilities. Other issues were difficulties in collaborating with parents (4 schools), difficulties in collaborating with community or local

Table 2.1. Numbers of Career Guidance Teachers and Implementation of Individualized Plans etc.

	Number of Teachers with no obligagions	Number of Teachers with some obligations	Manual for the Career Guidance	Annual Plans for Career Guidance	Individualized Plans for Instructions
Special Schools for Students with Intellectual Disabilities					
A	more than 3	none	Yes	Yes	Yes
B	1	more than 3	Yes	Yes	No
C	more than 3	none	No	Yes	Yes
D	1	more than 3	Yes	Yes	Yes
E	2	more than 3	Yes	No	Yes
F	1	2	Yes	Yes	Yes
Special Schools for Students with Physical Disabilities					
G	1	more than 3	Yes	Yes	Yes
H	none	1	Yes	Yes	Yes
I	none	more than 3	Yes	Yes	Yes
J	none	more than 3	Yes	Yes	Yes
Total 10 Schools					

Note. " Teachers with no obligations" mean teachers who are in charge of career guidance only relieved from teaching obligations. "Teachers with some obligations" mean teachers who are in charge of career guidance and teach classes although the amount of units that they teach vary.

administration (3 schools), the lack of financial resources for parents including respite care services (2 schools), difficulties in instructions for career education to the students (2 schools), the lack in consistency of support from school to the post-school services (1 school), and student's health management (1 school) (Table 2.2).

Findings of the pilot study regarding post-school assistance. Teachers at 9 out of the 10 schools implemented post-school assistance. Five out of those supported graduates within 3 years, 3 out of those supported all graduates, 1 supported based on an individual case, and 1 supported all the graduates including graduates of the students that this teacher previously worked although the school restricted the teacher to support graduates for only up to 3 years.

The ITP domains teachers practiced in post-school assistance were employment (9 schools), post-secondary education (2 schools), recreation/leisure (5 schools), and independent living (6 schools) (multiple answers accepted). In the employment domain, the contents of post-school support were dismissal (7 schools), interpersonal relationships at work (7 schools), work attitudes (5 schools), performance on the job (4 schools), sexual harassment (1 school), and other unspecified (1 school) (multiple answers were accepted). In the post-secondary education domain, contents of support were performance or achievement (2 schools) and entrance permission

Table 2.2. Problems in Career Guidance for Students with Severe and Multiple Disabilities.

(Multiple Answeres Accepted)

	Total
Lack of Options for Post-School Settings (Sheltered Workshops etc.)	9
Partnerships with Parents	4
Collaboration with Local Communities and Administration	3
Lack of Resources such as services or financial aids	2
Difficulties in Instructions for Career Education	2
Consistency of Support from School to Post-School Settings	1
Health Management	1

(1 school) (multiple answers were accepted). In the recreation domain, contents of support were instructions about how to spend their spare time (6 schools), community activities (4 schools), and friendships or other personal relationships (3 schools) (multiple answers accepted). In the independent living domain, the contents of supports were regarding how to spend money or manage their savings (5 schools), ADL or activities of daily living (4 schools), communication (3 schools), and usage of public transportation (1 school) (multiple answers accepted).

Local agencies the teachers collaborated with are shown on Table 2.3. People who participated in post-school assistance were classroom teachers (8 schools), counselors at public job placement centers (3 schools), and regional job support centers (2 schools) (multiple answers accepted). All 10 teachers agreed with the needs of specialists for post-school assistance outside the schools. Places where they hoped the specialists should be stationed were public job placement centers (9 schools), vocational centers for individuals with disabilities (7 schools), employment support centers (7 schools), and others (4 schools) (multiple answers accepted).

Findings of the pilot study regarding individualized plans. The teachers at 9 out of the 10 special high schools developed the individualized plans for instruction (Table 2.1). Teachers at the 8 schools developed the plans for all students, 1 school developed plans only for students with mild

Table 2.3. Local Agencies to Collaborate in Career Guidance (multiple answers accepted).

	MR	PH	Total
Public job placement centers	6	4	10
Regional vocational centers for individuals with disabilities	4	3	7
Employment support centers for individuals with disabilities	1	1	2
Job support centers	1	1	2
Department of welfare	5	4	9
Department of rehabilitation counselling	2	1	3
Department of sanitation	2	1	3
Others	1	0	1

Note: MR=special schools for students with intellectual disabilities. PH=special schools for students with physical disabilities.

disabilities, and 1 school developed plans only for students with multiple disabilities. Domains or teaching units of the individualized plans they developed were the activities for independence (8 schools), academic subjects (7 schools), occupational programs (6 schools), and others (2 schools) (multiple answers were accepted).

We asked the 10 teachers in charge of career guidance about the format of the individualized plans for instruction. Nine out of the 10 schools had regular formats. Four schools used formats in common within their schools. Another 4 schools used the forms in common within the department in their schools. Three schools used the formats based on examples contained in "The Individualized Plans for Instructions Q & A" published by Tokyo Department of Education (1999). One school used a format based on another school.

Those who developed the individualized plans for instructions were classroom teachers (8 schools), teachers who teach academics (5 schools), and teachers who teach the activities for independence (3 schools) (multiple answers were accepted). Members at planning meetings were teachers in the same department (6 schools), teachers within instructional groups (5 schools), teachers who teach the same grade (4 schools), and teachers who teach the same academic subject (3 schools) (multiple answers were accepted). Persons who do not participate in planning meetings but whose opinions were taken

into consideration were parents (9 schools), medical professionals (5 schools), students (4 schools), home doctors (3 schools), vocational counselors (2 schools), and a school doctor (1 school) (multiple answers were accepted). Frequency of the planning meetings was annual (4 schools), each semester (3 schools), monthly (1 school), and others/irregular (2 schools).

Assessment for career guidance was implemented for all students at all schools that participated in the survey (Table 2.4). Methods of assessment were observation (7 schools), tests (6 schools), interviews (5 schools), student's self-evaluation (6 schools), and others (2 schools) (multiple answers were accepted, See Table 2.5). The 3 teachers at the schools that utilized the observation method observed students by rating an inventory that assesses occupational ability or social skills during practical trainings sessions.

The ITP domains that were focused on in the assessment were employment (5 schools), post-secondary education (6 schools), recreation/leisure (4 schools), and independent living (7 schools) (multiple answers were accepted). Persons who participated in the interviews at the schools that used the interview method for assessment were students and parents (5 schools each) (multiple answers were accepted). The ITP domains they focused in the assessment were employment (5 schools), post-secondary education (3 schools), recreation/leisure (3

Table 2.4. Method of Assessment for Career Guidance

	Yes	No	Total
Implementation	10	0	10
The Method of Implementaion			
Observation	7	3	10
Interview	5	5	10
Test	6	4	10
Self Evaluation	6	4	10
Others	2	8	10

schools), and independent living (4 schools) (multiple answers were accepted). Tests administered at the schools that implemented the test method were vocational aptitudes including work samples (3 schools), psychological or intelligent tests including WISC-III, K-ABC, and Tanaka-Binet (3 schools), and others (3 schools). The 6 schools which used the tests administered them at local agencies such as vocational centers for individuals with disabilities. The teachers at the schools that implemented student self-evaluations utilized their original inventory (3 schools) and published booklets such as "Steps for Tomorrow" (Ominami, 1998) and "For you who become independent" (Teotsunagu Oyano Kai, 1994) (Multiple answers accepted).

We asked the teachers' knowledge on the ITP in the United States after we explained briefly about it. Two answered they knew well. One answered they knew. Six answered they heard about it. One didn't know about it. Table 2.5 demonstrated the ITP domains the teachers thought they implemented in their career guidance. We asked whether they thought they would like to practice the contents of the ITP domains. Six teachers said that they would need to practice them all and 2 said that they would consider it.

Revision of the questionnaire. As results of the pilot study, the author made some revisions in the questionnaire. For example, the definitions of individualized plans for

Table 2.5. Implementation of Career Guidance in Terms of 4 Domains of ITP.

(Multiple Answers Accepted)

	Employment	Postsecondary Education	Recreation/ Leisure	Independent Living
Yes	10	5	7	9
No	0	5	3	1
Total	10	10	10	10

instruction, individualized plans for career guidance, and annual whole-school plans for career guidance were stated at the top of the questionnaire to clarify the difference. Six items were added regarding the assessment since some interviewees were emphasizing its importance. Also, 11 items were added regarding post-school assistance because the problems were emerged from the interviews with teachers during the pilot study.

Procedures

The first author interviewed teachers in charge of career guidance at 10 special high schools in the greater Tokyo area for the above pilot study (also appeared in Mizutani & Fujita, 2001). The interviews mainly focused on the current practices of career guidance, post-school assistance ("after-care"), and individualized plans for instruction.

Based on the findings of the pilot study, we developed the draft of the questionnaire for the national survey. Then we asked 13 special education teachers to examine each item on the questionnaire to evaluate the content validity. The final draft of the questionnaire consisted of 47 items that all 13 teachers considered appropriate (See Appendix 2 for all the questions translated into English). Multiple teachers answered the questionnaire a second time after a month interval with more than 90% test-retest reliability. We mailed the

questionnaires with a cover letter to the principal explaining the intention of the investigation and a stamped return-envelope during the first week of September 2000. In the cover letter, we stated that the teacher in charge of career guidance should fill the questionnaire. We asked them to return the questionnaire without any identification by the end of October. We made phone calls to confirm that all the school principals received the package, and explained the purpose of the investigation once again to assure better understanding and cooperation. All the pilot study interviews and the questionnaire survey procedures were conducted in standard Japanese.

The response rate of the questionnaire was 74.7% from the schools for intellectual disabilities (71 of 94 answered), 65.2 % from the schools for intellectual disabilities which consisted only of an upper-secondary department (15 out of 23 answered), 78.7% from the schools for physical disabilities (37 of 47 answered), 66.7 % from the schools for physical disabilities which consisted only of an upper-secondary department (2 of 3 answered), and 75.5% from the schools for other health impairments (40 of 53 answered). Total overall response rate was 75% (165 of 220 answered) and the results of the 165 questionnaires are the subjects for our data analysis. The data used for the analysis consisted of all 165 returned questionnaire. Of these, 52% were from special high schools for

intellectual disabilities, 24% were from special high schools for physical disabilities, and 24% were from special high schools for other health impairments.

Data Analysis

First we examined the descriptive statistics for all 47 items on the questionnaire (see Tables 2.6, 2.7, 2.8, 2.9) in order to see the trends of current practices, needs, and perceptions. Then we developed 131 contingency tables for the chi-square test that were two-dimensional with 3 types of the schools as independent variables and with 2 or more categories based on the response for the questionnaire items as dependent variables. Finally, we selected 46 sub-items that demonstrated significance or significant tendencies as a result of the chi-square test and further examined them using residual analysis (see Tables from 2.10 to 2.28).

Results

Career Guidance

There are 114 out of 126 special high schools (90%) that develop annual career guidance plan for whole school (not individuals). Table 2.6 illustrates the number of teachers in career guidance at special high schools. There is 123 out of 167 schools (74%) that at least 1 full-time teacher in charge of career guidance who is relieved of any teaching obligations.

Table 2.6. Career Guidance Practices.

Number of teachers in charge of career guidance (relieved from teaching obligations)	
	1=74% 2=19% more than 3=7%
Number of teachers in charge of career guidance (with some teaching obligations)	
	1=25% 2=13% 3=11% 4-6=28% 7-9=18% 10-12=5%
Career guidance manuals	
	developed at own school=51% commonly used with other schools=4%
	developed by the prefecture=5% none=33% others=7%
Local agencies collaborating for career guidance (multiple responses accepted)	
	public job placement centers=93% regional vocational centers=78%
	employment support centers=25% regional work support centers=17%
	department of welfare=77% department of rehabilitation counselling=41%
	department of sanitation=9% others=22%
Problems of career guidance for students with severe/multiple disabilities (multiple responses accepted)	
	lack of post-school options=89% partnerships with parents=32%
	partnerships with local administration=51% lack of resources=36%
	difficulty of instruction=35% consistency of support with agencies=34% others=16%

Table 2.7. Post-School Assistance Practice.

Students provided with post-school assistance	
	all graduates=36% graduates within 3 years=44% others=20%
Domains of the ITP implemented as post-school assistance (multiple responses accepted)	
	employment=87% post-secondary education=11% independent living=53%
	recreation/leisure=47% others=13%
Problems in the employment domain for post-school assistance (multiple responses accepted)	
	dismissal due to the employer such as bankruptcy=55%
	dismissal due to the graduates' responsibilities or problems=64%
	graduates' hope to leave/change the job=56% work attitudes=52% performance on the job=21%
	interpersonal relationships at work=77% sexual harassment=6% others=7%
Problems in the post-secondary education domain (multiple; out of 16 schools)	
	acceptance from post-secondary educational institutions=9 schools
	achievement/performance=13 schools others=6 schools
Problems in the independent living domain (multiple; out of 80 schools)	
	activities of daily living=59 schools financial management=42 schools
	public transportation=14 schools communication=53 schools others=11 schools
Problems in the recreation/leisure domain (multiple; out of 71 schools)	
	spending free-time=59 schools friends=32 schools other relationships=31 schools
	local activities=20 schools others=6 schools
Methods of post-school assistance (multiple responses accepted)	
	regular visits at work=53% irregular visits at work=39% regular home visits=17%
	irregular home visits=32% formal gatherings of the graduates=61%
	continuing education=19% others=19%
Specialists participating in post-school assistance other than the teachers (multiple responses accepted)	
	counsellors at regional work support centers=8% counsellors at public job placement centers=26%
	nobody=62% others=21%

Table 2.8. Practice of Individualized Planning and Student Assessment.

Domains (multiple responses accepted)

"activities for independence"=88% academic subjects=59%

occupational classes=53% special activities=40% others=20%

Students' levels of disabilities (multiple responses accepted)

all students=84% severe/multiple=15% severe=5% moderate=3% others=4%

Area commonly using a format for individualized plans for instruction

entire prefecture=3% school=50% department=38% grade=2% others=7%

References when first draft was created (multiple responses accepted)

manual developed by the board of education=12% "Individualized plans Q&A in Tokyo"=22%

other schools'=35% unknown=14% others=40%

Persons who develop individualized plans for instructions (multiple response accepted)

classroom teacher=93% teacher in charge of transition assistance=9%

teacher in charge of "activities of independence"=38%

teacher in charge of academic subjects=37% other teachers=9%

Persons who participate in individualized plans meetings (multiple responses accepted)

teachers in same department=54% teachers of same grade level=47%

teachers of same academic subjects=36% teachers belonging to the same instruction group=57%

administrators including principal=3% no meetings held=3% others=15%

Persons who are asked opinions to develop individualized plans outside the meetings (multiple responses accepted)

parents=75% students=39% home doctors=37% school doctors=16%

other medical professionals=27% vocational counsellors=11%

school psychologists=4% nobody=13% others=7%

Frequency of individualized plans meetings

annual=17% every semester=42% every month=11% none=3% others=26%

Implementation of student assessment

yes (for all students)=67% yes (for some students)=25% others=8%

Methods of assessment (multiple responses accepted)

observations=59% interviews=52% tests=65% others=23%

Participants of the interview method for the assessment (multiple; out of 92 schools)

students=86 schools parents=84 schools specialists at local agencies=7 schools others=4 schools

Table 2.9. Needs and Perceptions on the ITP and Career Guidance.

Knowledge of the ITP practices in the United States	
	very knowledgeable=2% knowledgeable=29% just heard the name=36% no=33%
Domains of the ITP included in transition assistance (multiple responses accepted)	
	employment=88% post-secondary education=54% independent living=79% recreation/leisure=62%
The need to include all the ITP domains into transition assistance	
	yes=39% positively considering=39% no=13% others=9%
The need to locate transition specialists at local agencies	
	yes=96% no=4%
Local agencies needed to locate transition specialists (multiple responses accepted)	
	public job placement centers=67% regional vocational centers=59% employment support centers=62% others=24%

Table 2.10. Collaboration with Vocational Rehabilitation Centers in Career Guidance.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	72 (66.1)	35 (31.1)	19 (28.8)	126
		2.2 *	1.7 †	-4.4 **	
	No	13 (18.9)	5 (8.9)	18 (8.2)	36
		-2.2 *	-1.7 †	4.4 **	
total		85	40	37	162

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, †p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.11. Collaboration with Regional Work Support Centers in Career Guidance.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	20 (14.2)	4 (6.7)	3 (6.2)	27
		2.5 *	-1.3	-1.6	
	No	65 (70.8)	36 (33.3)	34 (30.8)	135
		-2.5 *	1.3	1.6	
total		85	40	37	162

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.12. Collaboration with Department of Welfare in Career Guidance.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	71 (65.6)	35 (30.9)	19 (28.5)	125
		2 *	1.8 †	-4.2 **	
	No	14 (19.4)	5 (9.1)	18 (8.5)	37
		-2 *	-1.8 †	4.2 **	
total		85	40	37	162

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.13. Collaboration with Department of Rehabilitation Counseling in Career Guidance.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	34 (35.2)	26 (16.5)	7 (15.3)	67
		-0.4	3.5 **	-3.2 **	
	No	51 (49.8)	14 (23.5)	30 (21.7)	95
		0.4	-3.5 **	3.2 **	
total		85	40	37	162

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.14. Career Guidance for Post-Secondary Education.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	26 (44.6)	32 (21.8)	28 (19.8)	86
		-6 **	3.8 **	3.2 **	
	No	56 (37.7)	8 (18.2)	8 (16.4)	72
		6 **	-3.8 **	-3.2 **	
total		82	40	36	158

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, †p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.15. Post-School Assistance Regarding Employment.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	80 (72.9)	30 (33.8)	21 (24.2)	131
		3.4 **	-2.1 *	-2 *	
	No	3 (11.1)	9 (5.2)	7 (3.7)	20
		-3.4 **	2.1 *	2 *	
total		84	39	28	151

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.16. Alumni Party as the Post-School Assistance.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	62 (51.0)	17 (22.8)	12 (17.2)	91
		3.7 **	-2.2 *	-2.3 *	
	No	21 (32.0)	20 (1.43)	16 (10.8)	57
		-3.7 **	2.2 *	2.3 *	
total		83	37	28	148

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.17. Post-School Assistance for Dismissal Due to the Employer.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	56 (43.6)	14 (16.9)	2 (11.5)	72
		4.4 **	-1.2	-4.5 **	
	No	24 (36.4)	17 (14.1)	19 (9.5)	60
		-4.4 **	1.2	4.5 **	
total		80	31	21	132

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities, OHI=special high schools for other health impairments

Table 2.18. Post-School Assistance for Dismissal Due to the Students.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	65 (51.5)	14 (16.9)	6 (13.5)	84
		5 **	-2.6 **	-3.7 **	
	No	15 (24.5)	17 (11.0)	15 (7.5)	47
		-5 **	2.6 **	3.7 **	
total		80	31	21	132

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.19. Post-School Assistance for Work Attitude.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	55 (41.2)	6 (16.0)	7 (10.8)	68
		4.9 **	-4.1 **	-1.8 †	
	No	25 (38.8)	25 (15.0)	14 (10.2)	64
		-4.9 **	4.1 **	1.8 †	
total		80	31	21	132

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.20. Post-School Assistance for Financial Management.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	33 (24.0)	8 (12.0)	1 (6)	42
		4 **	-1.9 †	-3.2 **	
	No	15 (24.0)	16 (12)	11 (6)	42
		-4 **	1.9 †	3.2 **	
total		48	24	12	84

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities, OHI=special high schools for other health impairments

Table 2.21. Individualized Plans for Instructing Occupational Lessons.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	36 (30.0)	18 (18.0)	7 (13.1)	61
		2.2 *	0	-2.8 **	
	No	21 (27.0)	16 (16.1)	18 (11.9)	55
		-2.2 *	0	2.8 **	
total		57	34	25	116

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, * p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.22. Teachers Who Teach the Same Grade Hold Meetings for Developing Individualized Plans.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	35 (27.7)	15 (16.0)	5 (11.8)	55
		2.9 **	-0.4	-3.1 **	
	No	23 (30.7)	19 (18.0)	20 (13.2)	62
		-2.9 **	0.4	3.1 **	
total		58	34	25	117

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.23. Students' Opinions Will Be Considered for the Individualized Plans for Instruction.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	16 (21.6)	20 (13.4)	8 (9.0)	44
		-2.2 *	2.8 **	-0.5	
	No	39 (33.4)	14 (20.6)	15 (14.0)	68
		2.2 *	-2.8 **	0.5	
total		55	34	23	112

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.24. Home Doctors' Opinions Will Be Considered for the Individualized Plans for Instruction.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	12 (20.8)	14 (12.8)	16 (8.5)	42
		-3.4 **	0.6	3.6 **	
	No	44 (35.2)	20 (21.4)	7 (14.5)	71
		3.4 **	0.6	-3.6 **	
total		56	34	23	113

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.25. Other Medical Professionals' Opinions Will Be Considered for the Individualized Plans.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	10 (15.4)	15 (9.3)	6 (6.3)	31
		-2.2 *	2.6 **	-0.2	
	No	46 (40.6)	19 (24.7)	17 (16.7)	82
		2.2 *	-2.6 **	0.2	
total		56	34	23	113

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.26. Assessment to Develop the Individualized Plans by Observation Regarding Employment.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	47 (41.0)	18 (18.6)	10 (15.5)	75
		2.9 **	-0.3	-3.3 **	
	No	6 (12.9)	6 (5.4)	10 (4.5)	22
		-2.9 **	0.3	3.3 **	
total		53	24	20	97

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.27. Assessment to Develop the Individualized Plans by Observation Re: Post-Sec. Education.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	9 (18.6)	15 (8.4)	10 (7.0)	34
		-4.1 **	3.2 **	1.6	
	No	44 (34.4)	9 (15.6)	10 (13.0)	63
		4.1 **	-3.2 **	-1.6	
total		53	24	20	97

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/— significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

Table 2.28. Self-Evaluation as an Assessment for Individualized planning.

		Types of Special Schools			
		MR	PH	OHI	total
Implementations	Yes	33 (25.3)	6 (11.7)	10 (12.0)	49
		2.7 **	-2.3 *	-0.8	
	No	47 (54.7)	31 (25.3)	28 (26.0)	106
		-2.7 **	2.3 *	0.8	
total		80	37	38	155

Note. Numbers in left of the parenthesis are observed scores in the questionnaire answers.

Numbers in parenthesis are expected score and the numbers below those are adjusted residuals.

** p<.01, *p<.05, † p<.10 +/ — significance/significant tendencies as the results of residual analysis

MR=special high schools for intellectual disabilities, PH=special high schools for physical disabilities,

OHI=special high schools for other health impairments

There are 2 full-time teachers in charge of career guidance at 31 out of 167 schools (19%). There are 3 or more full-time teachers in charge of career guidance at 13 out of 167 schools (7%). The maximum of full-time teachers in charge of career guidance who are relieved of teaching obligations is 8 and two schools had that answer. Schools that have less than 3 teachers in career guidance with some teaching obligations are 60 out of 157 schools and the schools that have 3 or more teachers in career guidance with some teaching obligations are 97 out of 157 schools.

The schools were using career guidance manuals originally developed at their own schools (85 out of 165 schools; 52%) or the manuals developed with other schools (6 out of 165 schools; 5 %) or did not use career guidance manuals (54 out of 165 schools; 33%) and others (12 out of 165 schools; 7%).

The schools collaborated with public job placement centers (150 out of 162 schools; 93%), regional vocational centers (126 out of 162 schools; 78%), employment support centers (40 out of 162 schools; 25%), regional work support centers (27 out of 162 schools; 17%), department of welfare (125 out of 162 schools; 77%), department of rehabilitation counseling (67 out of 162 schools; 41%), department of sanitation (15 out of 162 schools; 9%), and other local agencies (35 out of 162 schools; 22%) for career guidance. The

collaboration with vocational centers (χ_2 =19.5, df=2, p<.01) and the department of welfare (χ_2=18.4, df=2, p<.01) was statistically significant for both the schools for students with intellectual disabilities and the ones for students with physical disabilities. The collaboration with the department of rehabilitation counseling was statistically significant for the schools for students with physical disabilities (χ_2=17.0, df=2, p<.01).

The results of the chi-square tests for career guidance sub-items are presented on Tables from 2.10 to 2.14. Overall, 5 sub-items were statistically significant at the 1% or 5% level. As a result of the residual analysis, we find that both the schools for students with intellectual disabilities and the schools for students with physical disabilities are more significant than the schools for students with other health impairment for current practice.

The schools for students with physical disabilities were positively significant in 3 out of 5 sub-items including career guidance both in the post-secondary education domain (χ_2=35.5, df=2, p<.01) and collaboration with 2 agencies including department of rehabilitation counseling (χ_2 =17.0, df=2, p<.01) and department of welfare (χ_2=18.4, df=2, p<.01).

The schools for students with intellectual disabilities demonstrated significance related to collaboration with local agencies concerning employment such as vocational

rehabilitation centers (χ_2=14.5, df=2, p<.01) or regional work support centers (χ_2=6.1, df=2, p<.05) and department of welfare (χ_2=18.4, df=2, p<.01). We find that the schools for intellectual disabilities focused on students' employment more than other types of schools collaborating with vocational rehabilitation centers and regional work support centers.

The schools for other health impairments showed positive significance only in the post-secondary education domain (χ_2=23.4, df=2, p<.01) and negative significance in 3 other career guidance sub-items. It was apparent that they focused on post-secondary education rather than employment or other activities for the students.

Problems of career guidance for students with severe or multiple disabilities were (a) lack of post-school options (140 out of 157 schools; 89%), (b) partnership with parents (50 out of 157 schools; 32%), (c) partnership with local administration (80 out of 157 schools; 51%), (d) lack of resources (56 out of 157 schools; 36%), (e) difficulty of instruction (55 out of 157 schools, 35%), (f) consistency of support with agencies (25 out of 157 schools; 34%), and (g) others (25 out of 157 schools; 16%) (Also shown in Table 2.4).

Post-School Assistance

Ninety percent (149 out of 165) schools implemented post-school assistance (after-care) generally within 3 years

after their graduation (65 out of 151 schools, 43%)or when required 31 out of 151 schools, 20%) although some schools provided post-school assistance for all graduates (55 out of 151 schools; 36%). Table 2.7 shows that school provide assistance in the employment domain (131 out of 151 schools; 87%) for a variety of reasons including inter-personal relationships at work (101 out of 132 schools; 77%), dismissal due to the students' responsibilities (85 out of 132 schools; 64 %), dismissal due to bankruptcy or other employers' responsibilities (72 out of 132 schools; 55%) and work attitude (68 out of 132 schools; 52%). The actual performance on the jobs was only considered as a problem for 21% (28 out of 132 schools) with regards to post-school assistance. Domains of problems in post-school assistance other than employment were post-school education (16 out of 131 schools; 11%), recreation/leisure (71 out of 131 schools; 47%), independent living (53 out of 131 schools; 53%), and others (20 out of 131 schools; 13%).

Problems in post-school assistance for post-secondary education were (a) acceptance from the post-secondary schools (9 out of 19 schools), (b) performance or achievement (13 out of 19 schools), and (c)others (6 out of 19 schools). Problems in post-school assistance for recreation/leisure were (a) spending free-time (59 out of 71 schools), (b) friends (32 out of 71 schools), (c) other relationships (31 out of 71 schools), (d) local activities (20 out of 71 schools), and others (6 out

of 71 schools). Problems in post-school assistance for independent living were (a) activities of daily living (59 out of 80 schools), (b) financial management (42 out of 80 schools), (c) public transportation (14 out of 80 schools), communication (53 out of 80 schools), and others (11 out of 80 schools).

As methods of practicing post-school assistance, regular (80 out of 150 schools; 53%) or irregular visits at work (58 out of 150 schools; 39%), regular (25 out of 150 schools; 17%) or irregular visits at home (47 out of 150 schools; 32%), formal gatherings at the school (91 out of 150 schools; 61%) and continuing education (28 out of 150 schools; 19%) were listed.

No specialists participated in post-school assistance other than teachers (98 out of 159 schools; 62%) unless they collaborated with counselors at public job placement centers (41 out of 159 schools; 26%) or at regional work support centers (13 out of 159 schools; 8%).

There were 6 sub-items in post-school assistance that were statistically significant at the 1% level (Tables from 2.15 to 2.20). The schools for students with intellectual disabilities indicated positive significance in all 6 sub-items including post-school assistance emphasizing employment ($\chi_2 = 12.0$, df=2, $p<.01$), assistance due to dismissal by the employer ($\chi_2 = 26.0$, df=2, $p<.01$), discharge by graduates' responsibilities ($\chi_2 = 26.7$, df=2, $p<.01$), work attitudes (χ

χ^2=25.1, df=2, p<.01), , assistance by holding formal gatherings like alumni parties with other graduates at school (χ^2=14.0, df=2, p<.01), and financial management (χ^2=17.8, df=2, p<.01).

Individualized Plans

Seventy percent of special high schools (117 out of 165 schools) developed individualized plans for instruction. In comparison, individualized plans for career guidance were developed only at 15% of the schools (18 out of 120 schools). Ninety-two percent of the schools (109 out of 118 schools) stated that the specific forms of individualized plans were available at their school. Student assessment was conducted at 92% of the schools (150 out of 163 schools). Most of them (104 out of 113 schools; 92%) used results from vocational tests given at local agencies such as regional vocational centers. Student self-evaluation was conducted in classes at 32% of the schools. Table 2.8 reveals other aspects of individualized planning and student assessment. It indicates that by using reference manuals such as "Q&A in Tokyo (24 out of 108 schools; 22%)" or the plans developed at other schools (38 out of 108 schools; 35%), the classroom teachers often develop individualized plans for instruction (108 out of 116 schools; 93%) to teach the activities for independence (jiritsu-katsudo) class (44 out of 116 schools; 93%) and other subjects to most of the students at Japanese special high schools.

Almost half of the schools had planning meetings every semester (49 out of 116 schools; 42%), but participants in the planning meetings were limited to the teachers within the school. Sixty-three out of 117 schools had planning meetings with teachers in the same department (54%). Fifty-five out of 117 schools had planning meetings with teachers teaching the same grade (47%). Forty-two out of 117 school had planning meetings with teachers teaching the same subject (42 out of 117 schools; 36%). Sixty-seven out of 117 schools had planning meetings with teachers in the same instruction groups (57%). Three out of 117 schools had planning meetings with principals, vice principals or representative from the board of education (3%). Four out of 117 schools did not hold the planning meetings (3%). However, they considered the opinions of other people such as they consulted parents (85 out of 113 schools; 75%), consulted students (44 out of 113 schools; 39%), consulted home doctors (42 out of 113 schools; 37%), consulted school doctors (18 out of 113 schools; 16%), consulted other medical professionals (31 out of 113 schools; 27%), consulted vocational counselors (12 out of 113 schools; 11%), consulted school psychologists (5 out of 113 schools; 4%), and consulted others (8 out of 113 schools; 7%). The interview method for student assessment involved students (86 out of 92 schools conducting interviews) and parents (84 out of 92 schools).

We developed 3×2 contingency tables for 3 types of

schools and positive/negative response to questionnaire items for chi-square tests. We found that 4 sub-items were significantly different at the 1% level, and 4 sub-items at the 5% level in individualized planning and student assessment. We performed residual analysis for the above 8 sub-items (Tables from 21 to 28). The results indicated that special high schools for students with physical disabilities and for students with intellectual disabilities were more likely to develop individualized plans, compared to the ones for students with other health impairments.

Teachers at the schools for students with physical disabilities also considered with the opinions of the students (χ_2 =8.0, df=2, p<.05) and other medical professionals significantly more (χ_2=7.4, df=2, p<.05). Besides, the use of observation methods for assessing post-secondary education domain was also positively significant at the schools for students with physical disabilities (χ_2=17.5, df=2, p<.01).

In the schools for intellectual disabilities, 4 out of 8 sub-items showed positive significance and 4 out of 8 sub-items showed negative significance (Tables from 2.21 to 2.28). The teachers developed the individualized plans for instructing their vocational lessons (χ_2=8.6, df=2, p<.05). At the schools for students with intellectual disabilities, they used observation (χ_2=12.5, df=2, p<.01) methods to assess employment domain significantly and tried student self-

evaluation (χ_2=8.0, df=2, p<.05) in classes to prepare for the worksite vocational training. Their use of observation methods to assess post-secondary education domain was negatively significant (χ_2=17.5, df=2, p<.01), and opinions considered for developing the individualized plans from students (χ_2=8, df=2, p<.05), from home doctors (χ_2=16.5, df=2, p<.01), and from other medical professionals (χ_2=7.4, df=2, p<.05) were negatively significant at schools for students with intellectual disabilities.

There was 1 sub-item which was positively significant at the schools for students with other health impairments. They considered the opinions of home doctors for individualized planning (χ_2=16.5, df=2, p<.01).

Most of the teachers knew about ITP practices in the United States (111 out of 165 schools; 67%; Table 2.9). Many of them felt that they needed to include all the ITP domains including employment, post-secondary education, independent living, and recreation/leisure into their transition assistance practices (96 out of 122 schools; 78%). Most all said that it was necessary to locate some transition specialists at local agencies to help them (155 out of 166 schools; 96%). The agencies that they cited were public job placement centers (104 out of 166 schools; 67%), employment support centers (92 out of 166 schools; 62%), regional vocational centers (92 out of 166 schools; 59%), and others (38 out of 166 schools; 24%).

Specific Results in Schools for Students with Intellectual Disabilities

Annual plans for career guidance for whole school were developed at 95% schools (61 out of 64 schools with effective answers), while individualized plans for career guidance were developed only at 18% (11 out of 61 schools). Individualized plans for instruction were developed at the meetings of the teachers within the school: 48% teachers had meetings with other teachers with the same department (28 out of 58 schools), 60% had meetings with teachers in the same grade (35 out of 58 schools), 31% had the meetings with teachers who taught the same subject (18 out of 58 schools), 53% had the meetings with teachers in the same instruction group (31 out of 58 schools; multiple answers were accepted).

There was no chance that students and parents participated in decision making for individualized plans for instruction with teachers, although teachers were referring to the hopes and opinions from parents (73%; 41 out of 56 schools) and students (29%; 16 out of 55 schools) by questionnaire survey or daily communications. Students (93%; 43 out of 46 schools) and parents (96%; 44 out of 46 schools) were interviewed at the 51% schools (43 out of 85 schools) for students with intellectual disabilities that assessed students as reference to develop the individualized plans for instruction. Teachers

described that it was difficult to gain cooperation and understanding from parents in order to build the partnership so that the needs to support for parents were suggested. Teachers gave the lesson targeting students' self-evaluation using the textbook called "Steps for Tomorrows (Ominami, 1998)" compared to other two types of special high schools (χ_2=8.0, df=2, p<.05). Teachers, however, did not refer to students' opinions when they made the individualized plans at schools for students with intellectual disabilities (χ_2=8.0, df=2, p<.05).

Discussion

Career Guidance

Since there are no mandatory requirements, each school can decide the numbers of teachers in charge of career guidance. It is better to have more than one teacher working for career guidance because visiting worksites can be very time/energy consuming when students need to be placed for internship training or initial employment. But sometime the number of teachers is reduced to place more full-time faculty in charge of career guidance. And the teachers in charge of career guidance have less opportunity to get to know their students if they are relieved from classroom teaching. Therefore, it may be best if teachers shared their working hours for classroom teaching and career guidance.

Teachers at the schools for students with intellectual disabilities were collaborating with local agencies significantly compared to the other two types of schools. Thus, it might be appropriate to have the meetings with the staff from the agencies to include their opinions when the individualized transition support plans would be made for students. The collaboration of schools for other health impairments with these agencies was generally negatively significant. This is probably because there were more graduates who went on to post-secondary education (10.5%) and other educational settings (15.0%) compared with other schools (approx. 1% for post-secondary education, and 2.3% (MR) or 5.4% (PH) other educational settings) (Japanese Ministry of Education, Culture, Sports, Science and Technology, 2001b).

Post-School Assistance

Surprisingly the actual performance on the jobs was only considered as a problem for 21% with regards to post-school assistance. This might be because employers do not have high expectations for young adults with disabilities in terms of vocational skills as long as they have a pleasant work attitude and interpersonal skills.

The schools for students with intellectual disabilities indicated positive significance in 6 out of 6 sub-items including implementation of post-secondary assistance,

post-school assistance emphasizing employment, assistance due to dismissal by the employer, discharge by graduates' responsibilities, work attitudes, assistance by holding formal gatherings with other graduates at school, and assistance for their financial management. This may mean that young adults with intellectual disabilities needed post-school assistance more than other young adults. Or they have no other resources for support in their post-secondary compared to the young adults with physical disabilities or other health impairment who might be eligible support services from medical field.

Moreover, one of the reasons that young adults with intellectual disabilities needed post-school assistance more than other young adults is that the schools might have excessively focused on the students' employment for transition goals after high school. It usually takes young adults longer to achieve the skills required at the worksite and they might be not ready when they graduate at the age of 18. It might be preferable if there were more vocational training or other career education courses among their post-school options. And the schools for students with other health impairments were not collaborating with local agencies for post-school assistance. The results probably imply that young adults with other health impairments need assistance when they obtain post-secondary education in the activities for daily living since there are no appropriate local agencies for that purpose, or they might

simply not need any post-secondary assistance because they were more self-supported compared to the young adults with intellectual disabilities.

Individualized Plans

Table 2.8 reveals other aspects of individualized planning and student assessment. It indicates that by using reference manuals such as "Q&A in Tokyo" or the plans developed at other schools, the classroom teachers often develop individualized plans for instruction to teach the activities for independence (jiritsu-katsudo) class and other subjects to most of the students at Japanese special high schools. It appears that special high schools try to collaborate with parents and students for individualized planning even though outsiders are not invited to the planning meetings yet.

The schools for students with physical disabilities often contain special classrooms for students with severe/multiple disabilities. We find that the individualized planning appears to be practiced significantly more at the schools for students with physical disabilities compared to the ones for students with other health impairments. This is probably because Japanese educational regulations first started to develop individualized plans for instruction with respect to the activities for independence (jiritsu-katsudo) that were mostly meant for students with severe/multiple

disabilities (Japanese Ministry of Education, Culture, Sports, Science and Technology, 1999). Besides, the use of observation methods for assessing post-secondary education domain was also positively significant in schools for students with physical disabilities. This is probably because the schools might contain classrooms for students only with physical impairments who may not be cognitively delayed.

The teachers developed the individualized plans for instructing their occupational lessons probably because those lessons might be considered as a part of the vocational training programs at the schools for students with intellectual disabilities that focused on students' employment as their goals. At the schools for students with intellectual disabilities, they used both observation method to assess employment domain and self-evaluation in classes to prepare for the worksite vocational training. The results indicate that obtaining employment, rather than post-secondary education, was the main focus at the special high schools for intellectual disabilities.

At the schools for students with other health impairments, they considered the opinions of home doctors for individualized planning possibly because of the students' more serious medical needs. Student assessment was done using the interview method since intellectual abilities are not affected and teachers might recommend the students to go to college or other

post-secondary training programs as far as their health conditions allowed. The teachers at the schools for students with physical disabilities may prefer to support students' transition from school to post-secondary education.

The teachers at the schools for students with intellectual disabilities may think that students did not need post-secondary education because their students' cognitive abilities may not as high as other students even though there are possibilities for them to be further educated with the appropriate assisting services and some special considerations for learning.

Practice at Special Schools for Students with Intellectual Disabilities

People other than teachers did not participated in the planning process of individualized plans for instruction at the special schools for students with intellectual disabilities as the result of the study. It was thought that few professionals other than teachers were related to school activities at Japanese special schools. It was supported by previous studies (Hoshikawa & Shimura, 2000; Narita, 1997). Another reason may be because teachers tend to think there is no need to have a formal place for collective decision making with students and parents for the individualized plans due to sufficient daily communication among teacher, student and parents (Please refer

to results of Study 4).

Current practices using personal interviews with students and parents as assessment for developing individualized plans for instruction suggest a possibility of parent participation in the planning process, compared to other methods of assessment, i.e. observations and tests.

Self-evaluation was significantly taught at special high schools for intellectual disabilities, compared to other types of special high schools. It was probably because teachers think self-evaluation is necessary for appropriate self-understanding which is also necessary for self-determination (Ozoe, 2002). At the same time, difficulties in self-evaluation in the students are thought to be a problem. And difficulties in including students' opinions into their own individualized plans is another problem.

Summary

Actual conditions, characteristics and problems of student and parent involvement in individualized plans for instruction and career guidance at Japanese special high schools for students with intellectual disabilities were examined through comparisons to special high schools for students with physical disabilities and special high schools for students with other health impairments. Results showed that teachers held the meetings to make individualized plans without

student and parent participation. It was because partnership among teachers at the school was the priority at Japanese special high schools where few professionals were located other than teachers working to assist students' transition from school to community. It might be also because there was no need to have a formal place to discuss the students' plans with parents since daily communication between teachers and parents were sufficient. Teachers at the schools for students with intellectual disabilities did not refer to the students' opinions in the individualized plans for instruction, so it was thought to be a problem. And self-evaluation was taught to the students to supplement another problem, i.e. their difficulties in self-evaluation, although the instruction might be expected to reduce the problem and facilitate students' participation in decision making.