

**VOCATIONAL EVALUATION AND
CAREER ASSESSMENT
PROFESSIONALS JOURNAL**

**Fall 2014
Volume 9
Number 2**



VECAP

VECAP

Vocational Evaluation and Career Assessment Professionals



**VOCATIONAL EVALUATION
AND CAREER ASSESSMENT PROFESSIONALS JOURNAL**

**PROFESSIONAL JOURNAL OF
VOCATIONAL EVALUATION AND
CAREER ASSESSMENT PROFESSIONALS**

**FALL 2014
VOLUME 9
NUMBER 2**

EDITORS

**Steven R. Sligar, EdD,
CVE, PVE**

Co-editor
East Carolina University
Associate Professor
Director Graduate Program
in Vocational Evaluation
Department of Addiction and
Rehabilitation Studies
Allied Health Building
Mail Stop 668
Greenville, NC 27858
Phone: 252.744.6293
Fax: 252.744.6302
E-mail: sligars@ecu.edu

Nancy Simonds, MA

Co-editor
Nancy Simonds
Communication, LLC
P.O. Box 44
South Windsor, CT 06074
Phone: 860.254.5418
E-mail: nancy@simonds.com

Vanessa M. Perry, MS, CRC

Managing Editor
East Carolina University
Department of Addiction and
Rehabilitation Studies
Allied Health Building
Mail Stop 668
Greenville, NC 27858
Phone: 252.744.6300
Fax: 252.744.6302
E-mail:
perryva13@students.ecu.edu

CONSULTANT REVIEWERS

Joe Ashley, Virginia Department of Rehabilitative Services
Chad Betters, Winston-Salem State University
Samuel Castiglione, Workforce & Technology Center
Nicholas J. Cioe, Southern Illinois University
Janelle Ellis, Integrated Assistive Technology
Juliet H. Fried, University of Northern Colorado
Michael T. Hartley, University of Arizona
Jean E. Johnson, Langston University
Craig Johnston, Northeastern Illinois University
Jeb Kaiser, Kaiser Vocational Services
Joan E. Kester, The George Washington University

Pamela J. Leconte, The George Washington University
Marsha Legg, Director of Work First Humanim
Linda Mathias-Kaskel, Center for Multimodal Treatment
Patricia McCarthy, Virginia Department of Rehabilitative
Services
Karen L. Pell, VIA Consulting LLC
Frances G. Smith, Boston College – Centers for Applied
Special Technology
Keith Storey, Touro University
Shawn L. Zimmerman, Commonwealth of Virginia
Department of Rehabilitative Services

**Publishing, Subscription, and Advertising Offices: 9361 Barnescrest Drive,
Mechanicsville, VA 23115-2939.**

Published twice a year. Annual institutional rate: US \$120. Prices are subject to change without notice.

Copyright © 2014 Vocational Evaluation and Career Assessment Professionals

Vocational Evaluation and Career Assessment Professionals
9361 Barnescrest Drive
Mechanicsville, VA 23116
Phone 804.277.9648
Office@VECAP.org

VECAP MISSION

The Vocational Evaluation and Career Assessment Professionals (VECAP) is a nonprofit organization originally founded in 1967 to promote the professions and services of vocational evaluation and work adjustment. Formerly known as the Vocational Evaluation and Work Adjustment Association (VEWAA), the name was changed in 2003 to better reflect the focus of the organization as well as emphasize the independent status of the organization. This group has no affiliation with the National Rehabilitation Association (NRA) or the NRA/VEWAA.

The VECAP organization is committed to advance and improve the fields of vocational evaluation and career assessment and represents the needs of the professionals who provide those services. Its scope of services encompasses individuals who need assistance with vocational development and/or career decision-making.

VECAP's membership comprises professionals who provide vocational evaluation, assessment, and career services and others interested in these services.

VECAP members identify, guide, and support the efforts of persons served to develop and realize training, education, and employment plans as they work to attain their career goals.

For membership information visit VECAP.org.

EDITORIAL

Welcome to the Fall 2014 edition of the *VECAP Journal*

Vocational ACES

Recently a meeting was held with a group of 30 skilled professionals in South Carolina called Vocational ACESs (or VACESs) who work for the South Carolina Vocational Rehabilitation Department (SCVRD). At first glance you might have wondered if this was a group of savvy vocational aces—like pilots who gain ace status with demonstrated experience under fire. If that was your thought, then you were correct. These men and women practice the profession of vocational evaluation with the formal job title of Vocational Assessment and Career Exploration Specialist, or the working title of Vocational ACES. The original job title, Vocational Evaluator, was changed a few years ago to reflect the type and direction of services provided by SCVRD. Similar to the name of our organization, that includes career assessment; the SCVRD wanted to demonstrate to clients in a real and visible way the importance of careers in the rehabilitation process. The VACESs are located throughout the state and practice in both rural and urban areas with a wide variety of persons with disabilities.

As with any group of ACES (vocational or otherwise), the purpose of the meeting was to continue developing professional skills. There was a return to basics with a discussion on the value of VE and new information on occupational resources and job analysis techniques. The meeting continued with 25 professionals from the SCVRD Deaf and Hard-of-Hearing Services joining the ACES to learn about techniques to assess vocational communication skills of mutual clients. While different in scope authors Hemme and Perry in their article describe how vocational evaluators from Goodwill learn and share to improve their services.

One of the discussed but unanswered questions from the ACES meeting was “what is the impact of vocational evaluation on employment outcomes?” The article from Willis, McDaniel, and Kraska examines this very important issue. In addition, no meeting of vocational evaluators would be complete without a discussion of new and not so new (vintage?) tools. Liao provides a very informative and in-depth review of the State-Trait Anger Expression Inventory-2 (STAXI-2). Finally, the ACES have passion for their work and this is echoed in Dr. Pam Leconte’s letter to the editor about not only the importance of long term training but also the importance of the contributions made by vocational evaluators to the lives of those we serve.

Steven Sligar, Co-editor

VECAP JOURNAL GUIDELINES FOR PUBLICATION

Editorial Guidelines

The *Vocational Evaluation and Career Assessment Professionals Journal* (Journal) is an official publication of VECAP. The purpose of the Journal is to advance knowledge and practices in the fields of vocational evaluation, career assessment, and work adjustment. The Journal has three target audiences: practitioners and other professionals, educators, and consumers. The Journal provides readers with critical information to inform their practice in assessment or evaluation and therapeutic adjustment services, all with a vocational perspective. Practitioners, educators, researchers, and consumers may submit a manuscript for review. You do not have to be a member of VECAP to submit.

The Journal seeks the following types of manuscripts: research; theory building; perspectives on vocational evaluation or career assessment; reviews of books, tests, work samples; or other related topics of interest.

Note: See page 41 for new test review form [Go](#)

Manuscript Submission

1. Use the Manuscript Review Form (see [VECAP.org](#)) to determine if the manuscript is ready for submission.
2. Submit the manuscript as an email attachment to Journal@VECAP.org.
3. Receive a confirmation email (within 1-2 days) with manuscript review number.
4. Manuscript is blind reviewed by the Editorial Board or invited reviewers who have expertise in a specific topic (typically requires 3–4 weeks).
5. Receive status email with one of the following conditions: accepted, accepted with revisions, or rejected.

Submission Guidelines

Each manuscript must be prepared according to the current edition of the *Publication Manual of the American Psychological Association*. All manuscripts except book reviews and brief reports require a 150–250 word abstract with three keywords. An additional Journal requirement is to include an author bio(s), which is a single page that contains the author's name(s), credentials, and short (100 words) biographical information that will appear in the Journal if the article is published. Reviews of books, work samples or work sample systems, or other related topics of interest to the readers follow a guideline of 800 to 1400 words and no abstract.

Note: Detailed submission information can be found online at VECAP.org

For information on the status of your manuscript, contact:

Vanessa M. Perry, Managing Editor, Journal@VECAP.org or perryva13@students.ecu.edu

For all other concerns, contact the editors at Journal@VECAP.org or directly:

Steven R. Sligar, Co-editor, sligars@ecu.edu

Nancy Simonds, Co-editor, nancy@simonds.com

Vanessa M. Perry, Managing Editor, perryva13@students.ecu.edu

VOCATIONAL EVALUATION AND CAREER ASSESSMENT PROFESSIONALS JOURNAL

FALL 2014, VOLUME 9, NUMBER 2

CONTENTS

	Page
ISSUE	
Letter to the Editors: Advocating Continuation of Graduate/Long-term Training for Vocational Evaluators <i>Pam Leconte</i>	<u>10</u>
Vocational Evaluation: The Impact on Employment Outcomes <i>Joel P. Willis, Randall S. McDaniel, and Marie Kraska</i>	<u>16</u>
Goodwill Vocational Evaluation Best Practices Symposium <i>Jen Hemme and Vanessa M. Perry</i>	<u>28</u>
Test Review: State-Trait Anger Expression Inventory-2 (STAXI-2) <i>Liang Liao</i>	<u>32</u>
VECAP Test Review Form	<u>41</u>

Dear Editors,

While working with a colleague the other day, she asked if I intended to maintain my CVE (Certified in Vocational Evaluation) designation. When I commented on my advancing age, she retorted, “it is who you are; it’s your identity!” I agreed and immediately names and faces of many, many others popped into my mind—all of whom identify with vocational evaluation (VE) as their chosen profession. Sure, many of us “fell into” the field via happenstance or because someone offered us a job for which we had no experience (usually with low pay). Interestingly, the field we “fell into” became our professional and, to some degree, part of our personal identities. Perhaps VECAP should conduct a survey sometime to determine how people became vocational evaluators, CVEs, and/or PVEs (Registered as Professional Vocational Evaluators)—it could be informative; in addition, it would probably demonstrate that regardless of how we found our profession, many, many of us stayed. We found our passion.

Hopefully, some evaluators who entered the profession within the last few decades accessed it by choice after enrolling in and completing graduate education in VE. When I and others entered the field “by accident,” there were no graduate education programs in the U.S. for vocational evaluation or the one (University of Wisconsin-Stout, which began in 1967) or two (Auburn University, which started in 1968) were difficult to access geographically. I cannot recall when the University of Arizona initiated its program in VE, but it was the third VE graduate program in our field.

Condition of Vocational Evaluation Graduate Education

Today, the status of graduate education for VE is not much more expanded than it was in the late 1960s. At one point, during a heyday of options, we had 18 funded vocational evaluation graduate education programs throughout the U.S. Today, we have a couple of certificate programs and one or two master’s degree programs that emphasize VE within another professional category (e.g., rehabilitation counseling, allied health). Since the onset of VE graduate education programs, the Rehabilitation Services Agency (RSA) of the U.S. Department of Education has been the sole federal, financial sponsor of such education. During the 1990s the Office of Special Education Programs (OSEP), within the U.S. Department of Education’s Office of Special Education and Rehabilitative Services, funded two graduate programs in vocationally-oriented assessment. One was focused on Career and Transition Assessment graduate education (at George Washington University) and the other on Curriculum-based Vocational Assessment (a collaboration between California State-Long Beach and Colorado State University). After each of these programs had a six-year run, the Department ceased funding the category and the universities could or would not assume the funding.

The future of graduate education for vocational evaluators has been looking rather grim. For instance, during the past two years (2012 and 2013), RSA did not publish a Request for Proposals seeking universities to apply for any of the “rehabilitation specialty” areas, including vocational evaluation and work adjustment, job placement, rehabilitation technology, to name a few. In fact, RSA published Requests for Applications for only rehabilitation counseling last year.

Communications between RSA and the Public

On November 8, 2012, RSA sent out a Request for Information (RFI) regarding content of long-term training, particularly pertaining to the need for counselors to possess specialized skills to meet the needs of individuals with disabilities, including those who are blind, deaf, or who have serious mental illness.

Subsequently, RSA published other Requests for Information (i.e., comments) regarding rehabilitation “long-term training,” which is their term for graduate education. They were seeking input first about restructuring long-term training, especially in light of reduced fiscal resources. According to two RSA employees, serious consideration was being given to limiting VE training to be part of rehabilitation counseling master’s programs or to allowing only VE certificate programs—this meant that no master’s programs would be funded for vocational evaluation.

In response to RSA’s Request for Information (RFI) in 2013, which addressed their redesign of long-term training programs, a number of vocational evaluators, advocates, and at least one state VR agency submitted comments regarding the essential need for RSA to broaden (rather than narrow it to counseling) the scope of funding long-term training for counselors and “rehabilitation specialty” areas and to continue funding for VE. This response from the field helped communicate to RSA that more than just a few of us believed in the benefits of VE for individuals with disabilities who were served by vocational rehabilitation state agencies and community rehabilitation programs and that to provide quality services to these individuals, vocational evaluators required specialized training. These comments helped create a foundation for the 2014 Request for Comments on the Proposed Priority Information; a few excerpts from this round of submissions are included in the remainder of this letter.

Interestingly, content from responses to the first and second RFIs, were used to inform the Notice of Proposed Priority published in the *Federal Register/Vol. 79, No. 92/Tuesday, May 13, 2014* (pp. 27236-27237), which means that someone at RSA was listening to our input. The Proposed Priority notified us in the general public that vocational evaluation would remain a funded category within the “specialty” areas. In this Proposed Priority, RSA quoted some comments we made in the previous Request for Information (from June 14, 2013 [78 FR 35808]) that delineated some unique characteristics of vocational evaluators. It is important to quote the following excerpt to acknowledge that we have a role to play in federal policymaking. The excerpt from May 13, 2014’s *Federal Register* follows:

Many who commented...strongly urged RSA to continue support for vocational evaluation programs. They stressed the critical importance of VR professionals’ understanding of the individual skills needed in today’s labor market and how best to align those skills with the changing demands of the labor market so that consumers with disabilities can achieve high-quality employment outcomes. Vocational evaluators are trained to use labor market reviews, analyze job and training programs, assess work site accommodations, and conduct vocational profiles and reports. Evaluators examine the details of specific work opportunities for an individual with disability, including the physical, academic, social, and emotional demands of the work environment in order to maximize the potential for an individual’s long-term career success.

Although VR counselors receiving a master's degree in VR counseling may possess some of these specialized skills, they do not receive the breadth or depth of training in these skill sets that an individual receiving a specialized degree or certificate in vocational evaluation does (The Third Notice of Proposed Priority—Rehabilitation Long-Term Training Program—Rehabilitation Specialty Areas [34 CFR Chapter III, Docket ID ED-2014-OSERS-0068, CFDA Number: 84-129 C, E, F, H, J, P, Q, R, and W, pp. 27237-27238]).

Vocational Evaluators Comments on Proposed Priority

We have not been able to access all the comments made by vocational evaluators and others, but some of them sent us copies of their submissions. The excerpts below are noted to demonstrate that evaluators are both knowledgeable, that is competent, about their chosen careers and they are not shy about stating their love and passion for their work. I believe this is important to share with VECAP readers, especially those who might be new to the field.

The comments that David Lopp, a Vocational Evaluator in North Carolina, submitted for the June 2014 due date eloquently reinforced the above understanding by RSA, when he stated:

Knowing how to operate a truck is not the same thing as knowing how to design and build a truck. Rehab Counselors are insightful, skilled professionals who know how to use Vocational Evaluation reports, but that's not nearly the same thing as designing, planning, and carrying out the Vocational Evaluation process. He acknowledged the many skills possessed by qualified rehabilitation counselors, but reinforced that they receive "snippets of exposure that is gained in a master's program and their general insight from reading and using Vocational Evaluation reports" are insufficient in evaluating clients. He further noted:

Even for experienced evaluators, there is a constant struggle to figure out how to approach any particular evaluation referral, and how to relate the evaluation data to the job market and client's current or future needs. Former counselors who become evaluators will make comments that such as "I've read these reports and knew what they meant, but did not have any idea what was involved in trying to develop an evaluation plan and then put it all together in a report." It's not a simple, connect-the-dots process, which results in a recognizable picture if you just connect the numbered dots in the right order.

When the counselor sees the evaluation report (at least a good report), it might seem obvious how it all ties together. However, just because you like cake doesn't necessarily make you a good baker. Where does that data come from, what does the raw data mean, and how do you put it together and bake into something that's actually digestible and meaningful? You can't just throw a bunch of ingredients into a bowl, mix it up, and put it in the oven, and hope that you can eat it when it comes out.

Sometimes I think that because a good evaluation report supports the conclusions and recommendations, that people just think that all you do is administer a bunch of assessments and then just spit out the scores and... "voila" a nice report pops out that makes sense and has vocational value. An experienced evaluator can

easily spot a report where some assessments were administered and the scores were typed out in a report, which just stirs the results around a little bit, but doesn't really provide any nutrition for the rehabilitation process. Simply putting milk in flour does not make a cake. Neither does stirring around some results make a meaningful vocational evaluation.

There's an art and science to how to develop and select appropriate evaluation methods for the client's unique situation and presentation in the evaluation, as well as for trying to address the purpose and reasons for the evaluation referral. Evaluation methods can focus on assessing the client, assessing the rehabilitation process and available services and resources (including both internal and external services and resources), assessing the current labor market or training options, and other social and economic factors that might have an impact on planning of the evaluation process, as well as all of the interpretation and reconciling of the data to produce an evaluation product.

He continues:

But the hard part (for experienced evaluators as well) is deciding what methods will provide you with pertinent data, and then taking the data and trying to interpret and reconcile it into some sort of meaningful product that speaks to the individual's vocational options and considerations, as well as their rehabilitation needs, in the actual job market.

Comments submitted by Patricia McCarthy, a vocational evaluator in Virginia echoed those of other commenters when she said,

Vocational evaluation services can save rehabilitation agency funds by providing focus for employment goals and by helping to save current jobs. With effective assessment and planning, the number of persons who return for additional services can be reduced. Other agency funds can be saved by the evaluator verifying that a potential student has the academic skills suggestive of success in a training or education program before the individual attempts such a program and risks experiencing disappointment.

Patricia also mentioned that evaluators work with "individuals" in their work settings if they are experiencing difficulties as well as within the VR agency. This mobility also helps agencies save money, but more importantly helps clients retain their employment. In addition, she and others made the point that many of her VE colleagues were retiring or would soon be doing so, and without graduate education programs, VR clients would be shortchanged; she stated her concern for no longer having a sufficient number of graduate programs in VE.

Comments submitted by Janice Chory, a graduate student in a master's degree program emphasizing vocational evaluation (and transition services), further illustrated the need for vocational evaluation graduate education when she expressed that

I come to my current position with 15+ years' experience providing employment support to adults and students with disabilities. Why... would I have the desire to achieve a master's degree in Vocational Evaluation [after so many years in vocational rehabilitation]? Because I have come full circle in my belief in and the

understanding of the critical role that vocational evaluation plays in the successful employment to persons with disabilities.

When I started in the world of placement for individuals with significant disabilities, I would just work with them [on] what they demonstrated they could perform or expressed what they thought they liked. While I could get them jobs, those jobs did not necessarily equate to success in or happiness with their employment....I came to realize the value in being able to quantify a person's aptitude and ability. Having that information is critical to increasing an individual with disabilities self-confidence and their successful entry and/or return to work.

Comments submitted by Lisa Blakeney, a vocational evaluator from Maryland, recounted her experiences working with three different community rehabilitation programs where rehabilitation counselors were directed to provide vocational evaluation services.

During these experiences when counselors were asked to assume either vocational evaluation or job development and placement responsibilities, they all stated overwhelmingly that they a) didn't have the time, b) they didn't have the skills, or c) they didn't know how to start without possibly, though unintentionally, harming consumers. We need RSA to provide specialized training (i.e., long-term graduate degree programs) for professionals other than just for counselors. Their "plates" are already too full as they struggle to serve large caseloads and follow mandated case management requirements.

Lisa also stated that she "loved" her work as a vocational evaluator.

Concluding Thoughts

These and other comments not cited in this Letter seem to capture the reasons why we need continued funding for VE graduate education. Others commented on the need to increase the number of VE graduate programs and the amount of funding, considering that the cap on VE funded programs has held steady for over a decade (while university tuition has risen dramatically). For the past five years, RSA has funded six VE graduate programs; their funding ended on September 30, 2014.

On July 23, 2014, RSA did put out a Request for Proposals (RFP) that included funding for two graduate education programs in the "specialty" area of VE. Though we should be grateful for this announcement, this still results in a net loss of four funded programs. Unfortunately, the timing of this RFP proved problematic because most university personnel typically take their vacations during the month of August. The applications were due on August 22, 2014. To date, I and others cannot identify which universities, if any, received funding for VE. When we find out, the information will be posted on the VECAP website.

By writing this Letter, I hope some readers will be more informed about the status of VE training in the country, but also that the competence and passion of the vocational evaluators' cited here will resonate with readers. As Patricia McCarthy ably put it, "with this RSA request for comments, my fear and dismay that the graduate education programs will end this fall is diminished. I am optimistic that my beloved profession will be well staffed by graduates of quality vocational evaluation programs."

Pam Leconte, EdD
Professorial Lecturer/Retired Assistant Research Professor
Graduate School of Education and Human Development
Special Education and Disability Studies
Secondary Special Education and Transition Services
George Washington University

Vocational Evaluation: The Impact on Employment Outcomes

Joel P. Willis, Randall S. McDaniel, and Marie Kraska

Auburn University

Abstract

Despite its apparent important function in the vocational rehabilitation process, results from outcome studies continue to raise questions as to the validity of the claims that vocational evaluation improves employment outcomes among those who use vocational rehabilitation services. The purpose of this study was to ascertain the extent to which vocational evaluation recommendations correlate with successful employment outcomes of those receiving services through the Alabama Department of Rehabilitation Services. Participants for the study included 400 randomly selected, closed cases from 2009 and 2010. Descriptive statistics were used to determine congruence between vocational evaluation recommendations, individual plan for employment goals, and employment outcomes. Logistic regression procedures were used to determine which demographic variable(s) best predicts congruence.

Keywords: Disabilities, Rehabilitation, Employment

Vocational Evaluation: The Impact on Employment Outcomes

The vocational rehabilitation process has been described as a holistic and integrated approach designed to increase the independence of those with disabilities by providing vocational interventions that include a comprehensive array of services, mutually planned by both the vocational rehabilitation counselor and the consumer (Banja, 1990; Jenkins, Patterson, & Szymanski, 1992). According to Ruben and Roessler (2008), these services are provided in a four-phase sequence that includes (a) evaluation, (b) planning, (c) treatment, and (d) termination (placement).

One service available within vocational rehabilitation process often used to assist those with disabilities increase the chances of success in employment is vocational evaluation. Vocational evaluation utilizes vocationally related tests, interviews, observations, work samples, and on-the-job tryouts in an effort to assist the vocational rehabilitation counselor and the person with a disability to determine the best job fit (Institute of Rehabilitation Issues, 2003; Pruitt, 1986; Ruben & Roessler, 2008).

Pruitt (1986) explained that those with disabilities and other disadvantaged individuals have typically been the primary consumers of the vocational evaluation process. Social/economic systems within society have erected both attitudinal and

architectural barriers that prevent or make it difficult for this population to secure and maintain employment. The vocational evaluation is a means to increase an individual's chances of bypassing these barriers (Institute of Rehabilitation Issues, 2003; Pruitt, 1986).

The vocational evaluation, as a process to promote self-sufficiency, is critical for those with disabilities. The process was developed in response to an unfilled need to assess the vocational potential of individuals with disabilities by determining the capacity of the individual to participate successfully in the dynamic process that occurs between the person and the work environment (Institute of Rehabilitation Issues, 2003; Nadolsky, 1983). The information obtained from a vocational evaluation is a valuable tool used in the vocational rehabilitation process. Results from the evaluation can assist the vocational rehabilitation counselor and consumer in laying a solid foundation on which to build a successful vocational rehabilitation plan.

Therefore, to help enhance more successful employment outcomes, vocational rehabilitation counselors must work collaboratively with consumers to develop realistic plans for providing rehabilitation services. An important component of the rehabilitation planning process is the set of recommendations found in the vocational evaluation report. By incorporating vocational evaluation recommendations in the rehabilitation planning process, the chances of successful employment are increased (Brown, McDaniel, & King, 1995; Institute of Rehabilitation Issues, 2003; Nadolsky, 1983; Peters, Scalia, & Fried, 1993).

Statement of Problem

Despite its apparent important function in the VR process, results from outcome studies continue to raise questions as to the importance of vocational evaluation as a tool in employment and job retention among those who use VR services (e.g., a wide variance in results between studies). If vocational evaluation is a critical part of this process, it must be demonstrated by showing that vocational evaluation recommendations are indeed linked to vocational rehabilitation planning and to successful employment outcomes. The focus of this research, therefore, was to determine if relationships existed between recommendations made through vocational evaluations and successful employment outcomes for individuals receiving vocational rehabilitation services in the state Alabama.

Purpose of the Study

The purpose of this study was to ascertain the extent to which vocational evaluation recommendations correlate with successful employment outcomes of those receiving vocational rehabilitation services in the state of Alabama. In order to accomplish this purpose, the following research questions were addressed:

Research Question 1: What is the relationship between (a) vocational evaluation recommendations, (b) individual plan for employment goals, and (c) employment outcomes?

Research Question 2: To what extent do the demographic variables of, age, race, gender, and primary disability predict congruence between the (a) vocational evaluation recommendations, (b) individual plan for employment goals, and (c) employment outcomes?

Research Question 3: To what extent do the demographic variables of, age, race, gender, and primary disability predict congruence between the vocational evaluation recommendations and individual plan for employment goals?

Research Question 4: To what extent do the demographic variables of, age, race, gender, and primary disability predict congruence between vocational evaluation recommendations and employment outcomes?

Research Question 5: To what extent do the demographic variables of, age, race, gender, and primary disability predict congruence between individual plan for employment goals and employment outcomes?

Methods and Procedures

Sample

The data used in this study were retrieved from the Alabama Department of Rehabilitation Services data management system and consisted of successfully closed cases meeting the following criteria: (a) cases from fiscal years 2009 and 2010; (b) cases that completed a vocational evaluation; and (c) cases that were closed as rehabilitated. This study has Institutional Review Board approval from Auburn University.

This study was designed around a specific number of participants meeting the required criteria over an identified two-year period. The sample size was determined by referring to the sample size suggestion table published by the research division of the National Education Association (Krejcie & Morgan, 1970). The table gives optimal sample sizes based on given population numbers using a desired margin of error and

confidence interval, 5% and 95% respectively.

For this study, 2,443 cases met the required criteria. After applying the above formula, it was determined that 331 cases would be an appropriate sample size. In order to account for attrition, the sample was increased to 400. For the purposes of this study, 400 cases were randomly selected from the 2,443 cases that met the criteria.

The demographic composition of the 400 individuals in the sample population included: 251 (62.8%) males, 149 (37.2%) females, 278 (69.5%) White, 120 (30%) Black, and 2 (0.5%) Other. Participant age range was 18 to 65 years with 321 (80.2%) between 18 and 30 years and 79 (19.8%) between 31 and 65. These demographic data were compared to the demographic data of the 2,443 in the population from which the sample was drawn. The results of the comparison indicate the sample of 400 is a reasonable representative of the 2,443 cases in the population. The comparison is shown in Table 1.

The demographic composition of the 400 randomly selected individuals that met the required criteria for this study indicate that the typical participant for this study is a White male between the ages of 18 and 39.

Procedures

The Alabama Department of Rehabilitation Services (ADRS) identified 2,443 cases that met the required criteria. These cases became the population from which the sample was drawn. Using the ADRS standard procedures for randomly selecting cases used in research, a seven digit number was developed consisting of the last four digits of the Social Security Number of each case identified along with the first three digits of each of the identified

cases' master identification number. The result was 2,443 cases each having its own seven digit number (the last four digits of the Social Security Number followed by the first three of the case master identification number). All seven digit numbers were then sorted in ascending order and the first 400 were selected for this study.

Information on the 400 randomly selected cases was compiled on an Excel spreadsheet provided by ADRS. Information provided on the spreadsheet included, age, race, gender, primary disability, employment outcome, and individual plan for employment goals. The only required information not available in the state database was the recommendations found in the vocational evaluation report.

Each vocational evaluation report is maintained in the consumer's case file located in the VR office where the consumer received services. Copies of the VE reports were mailed to the Montgomery office of the Alabama Department of Rehabilitation Services.

Data Preparation

During this phase of the study the vocational recommendation data from the VE reports was combined with the data collected from the ADRS database. In order to accomplish this, the ADRS spreadsheet was modified by adding columns for the information found in the VE reports.

Table 1
Frequency of Age, Gender, and Race

Variable	Sample	%	Population	%
Age				
18–30	247	80.2	1,938	79.4
31–65	58	19.8	503	20.6
Gender				
Male	191	62.8	1533	62.8
Female	114	37.2	907	37.2
Race				
White	215	69.5	1548	63.4
Black	88	30.0	874	35.8
Other	2	0.5	19	0.8

After comparing each of the 400 cases in the original sample with the VE reports that were mailed in, 95 cases were rejected. Of the rejected cases, 46 cases had no VE report. This was confirmed by the local VR office supervisors, who indicated that the VE reports could not be located. The remaining 49 cases did have VE reports but there were no vocational recommendations given. The lack of a VE report or a vocational recommendation made it impossible to determine congruence; therefore, 95 cases were excluded from the study. By rejecting 95 cases, the sample was reduced to 305 cases.

Employment information gathered from the ADRS database was identified and compared to the employment recommendations found in the VE report. The Individual Plan for Employment (IPE) and employment outcomes (EO) are identified in the ADRS databases using the Standard Occupational Classification (SOC) system. In order to determine congruence, the job recommendations found in the VE reports were each numerically translated using this same classification system.

During the statistical analysis phase of the project, congruence was determined by comparing the first two digits of the SOC codes across the three employment actions (a) vocational evaluation recommendation (VER); (b) the individual plan for employment (IPE); and (c) employment outcome (EO). For example, if the first two digits matched between the SOC code assigned to the vocational evaluation recommendation (VER) and the employment outcome (EO), they were considered to be congruent. If the first two digits did not match they were considered incongruent. Congruence/incongruence was determined among any of the four possible combinations of the employment actions

(a) vocational evaluation recommendation (VER), individual plan for employment (IPE), and employment outcome (EO); (b) vocational evaluation recommendation (VER) and individual plan for employment (IPE); (c) vocational evaluation recommendation (VER) and employment outcome (EO); and (d) individual plan for employment (IPE) and employment outcome (EO).

Data Analysis

The data in this study were analyzed using descriptive statistics and logistic regression procedures. Results of the descriptive statistics indicated that 81% (247) of the participant sample were between the ages of 18 and 30 while the remaining participants ranged in age from 1.3% (4) participants at 31 years to 0.3% (1) participant at 65 years. Likewise, frequency results from the primary disability variable indicated that 79% (241) participants had cognitive disabilities with the remaining disabilities ranging from 13.1% (40) participants with mobility impairments to 7.9% (24) with sensory impairments. All disabilities were grouped into three categories including (a) cognitive, (b) mobility, and (c) sensory. The variable primary disability was named redisability.

Results

In addressing research question 1: What is the relationship between (a) vocational evaluation recommendations (VER), (b) individual plan for employment goals (IPE), and (c) employment outcomes (EO)?, descriptive statistic procedures were used to determine congruence among the four possible combinations of the following employment actions (a) VER, IPE, and EO;

(b) VER and IPE; (c) VER and EO; and (d) IPE and EO. Of the 305 cases reviewed, 38.4% (117) did not meet congruence among any of the combinations of employment actions; therefore, on the first two SOC code numbers, none matched on (a) VER, IPE, and EO; (b) VER and IPE; (c) VER and EO; and (d) IPE and EO. Of the 305 cases, 11.8% (36) were congruent across VER, IPE, and EO. Of the 305 cases, 6.9% (21) were congruent across VER and EO. Of the 305 cases, 11.8% (36) were congruent across VER and IPE. Of the 305 cases 31.1% (95) were congruent across IPE and EO. Results are listed in Table 2.

For the remaining research questions, logistic regression was used to identify which demographic variable(s) best predicted congruence in the four possible combinations of the employment actions; that is (a) VER, IPE, and EO; (b) VER and IPE; (c) VER and EO; and (d) IPE and EO.

In addressing research questions 2, results from a binary logistic procedure failed to reject the null hypothesis by demonstrating no statistical significance on the variables age, race, gender, and primary

disability, indicating that none of the variables would predict congruence across VER, IPE, and EO. However, research questions 3, 4, and 5 did reject the null hypothesis by indicating statistical significance. Results from research question 3 indicated statistical significance on the variable age indicating that age is a predictor of congruence between vocational evaluation recommendations (VER) and individual plan for employment goals (IPE). Results from research question 4 indicated statistical significance on the variables age and gender indicating that both age and gender are predictors of congruence between vocational evaluation recommendations (VER) and employment outcomes (EO). Results from research question 5 indicated statistical significance on the variable primary disability indicating that primary disability is a predictor of congruence between the individual plan for employment goals (IPE) and employment outcomes (EO). Results are listed in Table 3.

Table 2
Congruence

Employment Actions	Number	%
VER, IPE, and EO	36	11.8
VER and IPE	36	11.8
VER and EO	21	6.9
IPE and EO	95	31.1
Not congruent	117	38.4

Discussion

Prior to discussing the major findings of this study, it is important first to address two interesting observations revealed through the descriptive statistical analysis process concerning participant demographics. One interesting observation is in reference to primary disabilities. The results indicated that those with cognitive impairments made up 79% of participants in the study. The second interesting observation concerns participant age. The results indicated that 81% of the participants were between the ages of 18 and 30 with the majority of those being 21 years old. These observations indicate that the majority of successfully closed cases are composed of young adults between the ages of 18 and 30 with cognitive impairments. A plausible explanation for this might be drawn by comparing these data with the employment outcome data, specifically the types of jobs obtained by the majority of those cases successfully closed.

After a review of the frequency counts on employment outcomes, it was

determined that the top three jobs for all participants were (a) 17% (52) food preparation and serving occupations, (b) 14.4% (44) personal care and service occupations, and (c) 11.5% (35) transportation and material moving occupations. These outcomes are supported in prior studies that address employment outcomes of those with disabilities (Hagner, 2000; Walls & Fullmer, 1997). According to Walls and Fullmer (1997), the top five occupations held by those individuals with disabilities were janitorial, cook, attendant, porter/cleaner, and kitchen worker. These studies may also support the findings in this study that those individuals between the ages of 18 and 30 had more successful employment outcomes. In this age group the majority are 21 years old. This fact coupled with cognitive impairments and the concept of those jobs in the secondary labor market characterized by Hagner and others as food, filth, flowers, and fetching (i.e., entry level positions, low skill positions, and low pay) may indicate a large population of transition students.

Table 3
Predictor Variables

Research Question	Employment Actions	Regression Coefficients	Significance
2	VER, IPE, and EO	None	$p > .05$
3	VER and IPE	Age	$p = .048$
4	VER and EO	Age/Gender	$p = .048/.035$
5	IPE and EO	Redisability	$p = .025$

This study examined the extent of congruence among any of the four combinations of the following employment actions: (a) vocational evaluation recommendations (VER), (b) individual plans for employment (IPE), and (c) employment outcomes (EO). This study also addressed the extent to which demographic variable(s) best predict congruence across any combination of the same employment actions.

The overall results of research question 1 suggest low congruence rates among the four combinations of the employment actions: VER/IPE/EO; VER/IPE; VER/EO; and IPE/EO. These results appear to be supported by prior research with similar results including low levels of congruence between jobs acquired and recommendations either in the individual plan for employment or the vocational evaluation recommendation (Beveridge & Fabian, 2007; Brown, McDaniel, & King, 1995; Caston & Watson, 1990; Kosciulek, Prozonic, & Bell, 1995; Peters, Scalia, & Fried, 1993). Results in past research noted possible causes for the low congruence to include poor communication between the referring counselor and the evaluator; different expectations as to what information is needed in a VE report; a lack of confidence in the evaluation process by the referring counselor; and consumer choice not to follow recommendations in the VE report or the IPE (Beveridge & Fabian, 2007; Brown, McDaniel, & King, 1995; Caston & Watson, 1990; Kosciulek, Prozonic, & Bell, 1995; Peters, Scalia, & Fried, 1993). Other plausible explanations might include issues with consumer age, educational level, and work experience. The majority of participants in this study were between the

ages of 18 and 30 with the majority of these 21 years old. According to Stensrud (2007) and the Institute of Rehabilitation Issues (2003), many of those with disabilities do not have the same opportunities as those without disabilities to acquire transferable skills, making it more difficult to acquire better jobs. High incongruence may be attributed to job recommendations, either in vocational evaluation recommendations or individual plan for employment goals requiring prior experience in order to be qualified to apply. This same concept can be applied to the educational level attained by this group. According to Holder (2002) and Thurlow and Johnson (2003), students with disabilities who graduate with an alternative diploma, such as an Alabama Occupational Diploma, are less likely to be hired because many companies will only consider applicants with a high school diploma or GED. If the vocational evaluation recommendations or the individual plan for employment goals suggest jobs that require prior experience and/or a high school diploma, then there is a better chance of incongruence. Thus, incongruence can be caused by any number of issues including problems with communications and collaboration between any combination of the following: (a) vocational evaluators, (b) VR counselors, (c) education system, (d) business community, and (e) post-secondary institutions.

Research questions 2 through 5 examined the predictive value of demographic variables (age, gender, race, and primary disability) on congruence among VER, IPE, and EO. To address the predictive value, logistic regression procedures were utilized. Findings related to the predictive values of consumer demographics on congruence between

employment actions indicated that 117 of the 305 cases (38.4%) obtained employment in jobs different than those recommended by the vocational evaluator or by the vocational rehabilitation counselor.

In this study, when addressing those demographic variables that best predicted congruence, statistical significance was found in research questions 3, 4, and 5. In addressing research question 2, the results indicated there was no demographic variable that was statistically significant in predicting congruence among vocational evaluation recommendation (VER), individual plan for employment (IPE), and employment outcomes (EO). Results from research question 3 found that the variable age was statistically significant in predicting congruence between vocational evaluation recommendation (VER) and individual plan for employment (IPE). In addressing research question 4, the results indicated statistical significance on both variables age and gender (i.e., young males) in predicting congruence between vocational evaluation recommendation (VER) and employment outcomes (EO). Results from research question 5 indicate statistical significance on the variable primary disability in predicting congruence between individual plan for employment (IPE) and employment outcomes (EO).

Any statistical significance indicated in this study must be evaluated within the context of the low congruence rates among any of the possible four combinations of the employment actions. Until the low congruence rates are addressed any statistical significance will be suspect. Also, any statistical significance indicated in this study must be evaluated within the context of the overrepresentation of one population found within the sample. For example, the majority of those cases meeting the required

criteria for participation in this study were white (70.5%), males (62.6%), 18–30 years old (81%) with cognitive disabilities (79%). Therefore, any statistical significance would indicate a White male, age 18 to 30 with a cognitive disability.

Limitations

In studies addressing vocational evaluation as a function of employment outcomes, it is difficult to identify all the potential causes for the successes and failures. The inability to control for all extraneous variables in any research study can have an impact on validity. One limitation of this study is the threat to external validity made possible by using a sample from only one state VR agency located in one geographic area. A second limitation is the sample size. As reported earlier, even though the original sample size of 400 cases met the criteria established by Krejcie and Morgan (1970), at least 95 of the 400 were rejected because, even though there was a vocational evaluation, these cases did not have vocational evaluation reports or they lacked vocational recommendations. Excluding these cases from the study reduced the sample size to 305, which is 26 cases fewer than the required 331, thereby indicating a possible threat to internal validity through attrition or mortality. Other limitations include threats to internal validity caused by confounding variables such as (a) the geographic area of the consumer to vocational recommendations, (b) the current labor market, and (c) fluctuations in the economy. Additional threats to internal validity include possible selection bias caused by an over representation of one group in the random sample. In this study the random sample was determined to be over

represented by white males, 18–30 years old with cognitive disabilities. Finally, while reviewing the vocational evaluation reports, the lack of continuity among the reports became evident. This would indicate the need for a standardized means of reporting.

Recommendations

Results of this study help support findings in a recent study that explored the relevance of vocational evaluation in the vocational rehabilitation process. Willis and McDaniel (2013) reviewed and compared seven studies that addressed, in part, congruence between vocational evaluation recommendations and successful employment outcomes. Findings in this study indicated a wide range of reported congruence between the seven studies; i.e., 31% congruence to 85% congruence. As noted in their findings, many studies operationalized important variables differently including congruence, outcomes, and placement. For example, employment outcomes were operationalized using different occupational classification systems such as the *Dictionary of Occupational Titles*, the *Dictionary of Holland Occupational Codes*, and the *Standard Occupational Classification* codes. One recommendation for further research would be consensus among researchers in the field as to how variables are operationalized. This would help validate results and support systematic changes within rehabilitation agencies.

Results of this study also help support other research noting the lack of congruence between vocational evaluations recommendations and individual plans for employment goals. While there may be any number of extraneous variables that contribute to the low congruence rate, the

fact remains that for some reason few vocational recommendations made by the evaluator are being incorporated into the individual plan for employment and thereby influencing, either directly or indirectly, employment outcomes. Another recommendation would be to encourage state vocational rehabilitation agencies to define more clearly the goal of the vocational evaluation in the vocational rehabilitation process. Additional recommendations include encouraging state vocational rehabilitation agencies to develop policies and procedures that establish standardized formats for vocational evaluation reports as well as policies that address the recommendation process. A final recommendation would be to develop a better means of tracking vocational recommendations in order determine if vocational evaluation recommendations are a viable source for successful employment outcomes.

References

- Banja, J. D. (1990). Rehabilitation and empowerment. *Archives of Physical Medicine and Rehabilitation*, 71, 614–615.
- Beveridge, S., & Fabian, E. (2007). Vocational rehabilitation outcomes: Relationship between individualized plan for employment goals and employment outcomes. *Rehabilitation Counseling Bulletin*, 50(4), 238–246.
- Brown, C., McDaniel, R., & King, W. (1995). The role of vocational evaluation in the rehabilitation process. *Vocational Evaluation and Work Adjustment Bulletin*, 28, 91–98.
- Caston, H. L., & Watson, A. L. (1990). Vocational assessment and

- rehabilitation outcomes.
Rehabilitation Counseling Bulletin, 34(1), 61.
- Hagner, D. (2000). Primary and secondary labor markets: Implications for vocational rehabilitation. *Rehabilitation Counsel Bulletin*, 44, 22–29.
- Holder, C. (2002). The Alabama occupational diploma a promising program option for many. AFCEC Online Journal. Retrieved from http://www.afcec.org/pubs/journal/vol1/04F_Holder.pdf
- Institute of Rehabilitation Issues 30th. (2003). *A new paradigm for vocational evaluation: Empowering the VR consumer through vocational information*. Arkansas: University of Arkansas.
- Jenkins W., Paterson, J. B., & Szymanski, E. M. (1992). Philosophical, historical, and legislative aspects of the rehabilitation counseling profession. In R. M. Parker & E. M. Szymanski (Eds.). *Rehabilitation counseling: Basics and beyond* (2nd ed., pp. 1–40). Austin, TX: PRO-ED.
- Kosciulek, J. F., Prozonic, L. A., & Bell, D. (1995 October, November, December). On the congruence of evaluation, training, and placement. *Journal of Rehabilitation*. 20–23.
- Krejcie, R. V. & Morgan, D. W. (1970). Determining sample size for research activities. *Educational and Psychological Measurement*, 30, 607–610.
- Nadolsky, J. M. (1983). The development of vocational evaluation services. In R. A. Lassiter, M. H. Lassiter, R. E. Hardy, J. W. Underwood, & J. G. Cull (Eds.), *Vocational evaluation, work adjustment, and independent living for severely disabled people* (pp. 11–16). Springfield IL: Charles C. Thomas, Publisher.
- Peters, H. H., Scalia, V. A., & Fried, H. H. (1993). The effectiveness of vocational evaluation program recommendations and successful outcome by disability type. *Vocational Evaluation and Work Adjustment Bulletin*, 26(2), 47–52.
- Pruitt, W. A. (1986). *Vocational evaluation* (2nd ed.). Menomonie, WI: Walter Pruitt Associated.
- Rubin, S. E., & Roessler, R. T. (2008). *Foundations of the vocational rehabilitation process* (6th ed.). Baltimore, MD: University Park Press.
- Stensrud, R. (2007). Developing relationships with employers means considering the competitive business environment and the risks it produces. *Rehab Counseling Bulletin*, 50(4), 226–237.
- Thurlow, M. L., & Johnson, D. R. (2003). A national study on graduation requirements and diploma options for youth with disabilities. (Technical Report 36). Minneapolis, MN: University of Minnesota, National Center on Educational Outcomes. Retrieved from <http://www.cehd.umn.edu/nceo/OnlinePubs/Technical36.htm>
- Walls, R., & Fullmer, S. (1997). Competitive employment: Occupations after vocational rehabilitation. *Rehabilitation Counseling Bulletin*, 41, 15–25.
- Willis, J. P., & McDaniel, R. (2013). Internal and external validity threats in research related to congruence between vocational recommendations and outcomes.

*Vocational Evaluation and Work
Adjustment Association Journal,
40(1), 31-41.*

Author Note

Joel P. Willis, PhD, LPC, NCC, Special Education, Rehabilitation, and Counseling, Auburn University

Dr. Willis is Assistant Professor at Troy University in the department of Human Services, Social Work, and Rehabilitation. He completed his PhD at Auburn University in the department of Special Education, Rehabilitation, and Counseling. Joel is a licensed counselor in the state of Alabama as well as a nationally certified counselor. His experience includes community rehabilitation programs, student disability services, employment specialist, and addiction counseling. Dr. Willis is now at Troy University, Department of Human Services, Social Work, and Rehabilitation.

Randall S. McDaniel, EdD, CRC, Special Education, Rehabilitation, and Counseling, Auburn University

Dr. McDaniel is the Wayne T. Smith Distinguished Professor Emeritus of rehabilitation at Auburn University. His background and degrees are in rehabilitation, i.e., Occupational Therapy, Rehabilitation Counseling, and Rehabilitation Education. His professional roles include: current Co-Editor of the VEWAA Journal, board member for the NCRE, NRA, VEWAA, and VECAP. Dr. McDaniel has authored more than \$8,000,000 in grants, nearly 50 journal articles, and has edited or contributed to the publication of four books. Dr. McDaniel has been honored with several key awards from his profession such as the 2004 Outstanding Alumnus of the College of Public Health and Health Professions at the University of Florida. In 2010 he was a visiting professor at the International Labour Organization, a division of the United Nations in Geneva Switzerland.

Marie F. Kraska, PhD, Center for Disability Research and Services, Auburn University.

Dr. Kraska is an M. C. Fraley Distinguished Professor of Research and Statistics in the Department of Educational Foundations, Leadership, and Technology at Auburn University. Dr. Kraska is the interim Director of Research for the Center for Disability Research and Service (CDRS) at Auburn University. In addition, she serves as the research methodologist for the CDRS.

This manuscript is based on data contained in a doctoral dissertation titled “Vocational Evaluation: The Impact on Employment Outcomes.” Correspondence concerning this article should be addressed to Joel P. Willis, Department of Human Services, Social Work, and Rehabilitation, Troy University, Troy, Troy AL 36082.

[Return to Table of Contents](#)

Goodwill Vocational Evaluation Best Practices Symposium

Jen Hemme and Vanessa M. Perry

Abstract

Vocational evaluation professionals from 16 Goodwill Industries International, Inc. agencies across eight states held a symposium to discuss best practices, compliance issues with the Commission on Accreditation of Rehabilitation Facilities, funding concerns, and Registry of Professional Vocational Evaluators credentialing. This symposium afforded the opportunity for vocational evaluators to reflect on current practices, exchange ideas, and develop innovations in Vocational Evaluation. Such meetings have occurred through the history of vocational evaluation and continue to be invaluable in supporting vocational evaluators in practice.

Keywords: Vocational Evaluation, Goodwill Industries, CARF, RPVE

Goodwill Vocational Evaluation Best Practices Symposium

Vocational evaluation (VE) is a practitioner-based methodological assessment that assists clients and professionals in vocational assessment and vocational exploration (Sligar & Betters, 2012). Specifically, VE is “designed to assess and predict the work behavior and vocational potential” of individuals with disabilities (Nadolsky, 1984, p. 3). Founded by state vocational rehabilitation evaluators, VE uses specific tools to measure factors that may affect an individual’s capacity to be employed. VE uses either real or simulated work settings to assess what type of jobs or careers may be appropriate for a client, incorporating medical, psychological, social, vocational, education, and cultural information (Sligar & Betters, 2012). Research has shown that VE is an effective and efficient employment practice, suggesting the following three key findings.

Successful placement rates are higher when recommendations are followed versus when recommendations are not followed. The more closely a recommendation is followed, the more likely a job placement will be successful. The more detailed and tailored to an individual the VE is, the more apt it is to yield successful predictions (30th IRI, 2003).

One provider of such services is Goodwill Industries International, Inc. Founded in 1902, Goodwill provides job training and employment placement services to individuals who “have disabilities, lack education or job experience, or face employment challenges.” Since its inception Goodwill has helped more than 216,000 people obtain employment. Of 157 Goodwill agencies in the United States, 133 (84.71%) agencies offer Work Assessment and Work Evaluation services (Goodwill Industries International, Inc., 2012).

As demonstrated by the National Forum on Issues in Vocational Assessment, sharing experiences and best practices in VE

has been a tradition of vocational evaluation professionals for several decades (Smith & Fry, 1985). Such forums have been described as “energizing stimulation” and “intoxicating,” as they provide the opportunity for VE professionals to reflect on current practices, exchange ideas, and develop innovations in VE (McDaniel, 2009, p. 2).

Continuing this tradition, VE professionals from 16 Goodwill agencies convened at Goodwill of Middle Georgia in Augusta, GA on April 25–26, 2013, to exchange information, ideas, and innovations in the practice of VE. This VE best practices symposium was the third meeting of its kind. The participants, vocational evaluators from eight different states, contributed to an open discussion pertaining to the accreditation, services provided, client base, funding sources, marketing, and trends in the field. Participants discussed the key aspects of service delivery, including what types of vocational evaluations are utilized, considerations when working with special populations, and standards and outcome measures for VE. Participants also exchanged samples of forms and report formats they utilize at their respective agencies.

Of notable interest was a discussion on accreditation by the Commission on Accreditation of Rehabilitation Facilities (CARF). Founded in 1966, CARF is an independent, nonprofit accreditor of health and human services in employment and community services, as well as aging services, behavioral health, business services management networks, child and youth services, and medical rehabilitation. CARF currently accredits more than 50,000 programs at 23,000 locations. CARF-accredited service providers serve

approximately eight million individuals each year (CARF International, 2014). A representative from Goodwill Industries International, Inc. shared that a growing number of Goodwill agencies have been accredited by CARF in the area of Employment Planning Services to provide community-based assessments. The Goodwill representative also observed a decline in the number of agencies being accredited for comprehensive vocational evaluation services. Participants who have recently taken part in the CARF accreditation process shared some noteworthy considerations for agencies that will undergo accreditation in the near future, such as utilizing accommodations and assistive technology during vocational evaluation, placing emphasis on the inclusion of labor market information in the VE final report, incorporating the client’s informed consent, and capturing the client’s interpretation of what was learned during community-based assessment.

Fiscal health was also a topic of great interest to participants. Some participants noted that their respective local vocational rehabilitation agencies exhausted service funding prior to the end of the fiscal year, possibly contributing to a decline in the number of referrals for vocational evaluations. Some VE agencies have identified new referring agencies and funding sources other than state vocational rehabilitation agencies, such as local school districts, the Department of the Veterans Administration, private employers, Workers’ Compensation law offices, college students, or home-schooled youth. Additionally, some agencies have incorporated VE services into proposals and grants for workforce development initiatives. Some participants noted an increase in the number of referrals for

community-based assessment, while other participants noted a decline in the number of referrals for VE. However, there was no consensus on these matters.

Lastly, participants discussed the certification process for vocational evaluators, particularly the application process for the Registry of Professional Vocational Evaluators (RPVE). The participants expressed concern about the length of processing time for applications and customer service provided by RPVE. Some participants shared how the application process might have an impact on their motivation to apply for the Professional Vocational Evaluator credential in the future. Participants discussed how this process could have an impact on the number of credentialed vocational evaluators in practice. The participants discussed different types of credentialing for vocational evaluators, such as the Certified Vocational Evaluation Specialist designation maintained by the Commission on Rehabilitation Counselor Certification, as well as which credentials are held by vocational evaluators currently in practice.

Overall, participants shared that they overwhelmingly valued face-to-face interaction and open-format discussion with VE colleagues from other Goodwill agencies. A survey of past participants indicated an interest in conducting a best practices symposium every 18 to 24 months. Another Goodwill Vocational Evaluation Best Practices Symposium is planned for the next year and will be hosted by Goodwill Industries of Akron, OH. In addition, telephone conferencing and web conferencing options may be utilized to enable Goodwill vocational evaluators to strengthen professional relationships and discuss topics of interest during the interim. As the rich tradition and history of VE has

proven, such opportunities for vocational evaluators to converge have remained energizing and stimulating for vocational evaluators and shall continue to support vocational evaluators in the near future (McDaniel, 2009).

References

- CARF International. (2014). *Who we are*. Retrieved from <http://www.carf.org/About/WhoWeAre/>
- Goodwill Industries International, Inc. (2013). *About us*. Retrieved from <http://www.goodwill.org/about-us/>
- Nadolsky, J. M. (1984). Vocational evaluation: An experimental trend in vocational assessment. In Smith, C. & Fry, R. (Eds.), *The issues papers: National forum on issues in vocational assessment* (p. 3). Menomonie, WI: Materials Development Center.
- McDaniel, R. (2009). *The issues papers: Thirteenth national forum on issues in vocational assessment*. Montgomery, AL: Davis Direct, Inc.
- Sligar, S. R., & Betters, C. J. (2012). The state of state vocational evaluators: A national study. *Journal of Rehabilitation*, 78(4), 21–30.
- Smith, C. & Fry, R. (Eds.). (1985). *The issues papers: National forum on issues in vocational assessment*. Menomonie, WI: Materials Development Center.
- Thirtieth Institute on Rehabilitation Issues. (2003). *A new paradigm for vocational evaluation: Empowering the VR consumer through vocational information* (30th Institute on Rehabilitation Issues). Washington, D.C: Rehabilitation Services

Administration, US Department of
Education. Retrieved from
<http://iriforum.org/download/IRI30.pdf>

Author Note

Jen Hemme, CVE, GCDFI Vocational Counselor, Goodwill of Southwestern Pennsylvania
Ms. Hemme has worked for Goodwill of Southwestern Pennsylvania for more than 15 years, where she has provided comprehensive vocational evaluation, assessment, and career counseling services for individuals with disabilities, individuals receiving welfare benefits, ex-offenders, and other individuals with barriers to employment. She is a Certified Vocational Evaluator and Global Career Development Facilitator Instructor. She has served on the executive board as Treasurer for the Vocational Evaluation and Career Assessment Professionals (VECAP) since 2010.

Vanessa M. Perry, MS, CRC, Doctoral Student, Department of Addictions and Rehabilitation Studies (DARS) at East Carolina University (ECU)

Ms. Perry works as a Clinician and Clinic Coordinator for DARS's Navigate Counseling Clinic. She also works as a Team Leader and Clinician for ECU's Operation Reentry North Carolina, a technology-based federal grant working with veterans who are experiencing homelessness. Ms. Perry was recently awarded the Louise Burevitch Scholarship by DARS and the 2014 Nancy Howell Scholarship Award by the Licensed Professional Counselors Association of North Carolina. Her areas of research interest include examining language and culture in clinical supervision, the experience of Latinos with serious mental illness, and shared decision making in the treatment of psychiatric disabilities.

[Return to Table of Contents](#)

Vocational Evaluation and Career Assessment Professionals Test Review

Test Review: State-Trait Anger Expression Inventory-2 (STAXI-2)

Reviewer: Liang Liao

Institutional Affiliation: East Carolina University

Author(s): Charles D. Spielberger

Publisher: Psychological Assessment Resources (PAR) published the manual in 1988, 1996, and 1999. PAR also published the profile form, rating sheet, and item booklet in 1979, 1986, 1988, 1995, 1998, and 1999. The manual did not specify the creation date of norm groups.

Contact/Purchase: Testing materials for STAXI-2 can be purchased from PAR via the URL: <http://www4.parinc.com/Products/Product.aspx?ProductID=STAXI-2> or via phone at 1-800-331-8378. PAR's web address is <http://www4.parinc.com/> and they are located at 16204 North Florida Ave., Lutz, Florida, 33549.

Cost: The following is the test items' cost structure (PAR, 2012):

- STAXI-2 Introductory Kit: \$270
- STAXI-2 CD-ROM: \$500
- STAXI-2 Software Download: \$500
- Manuals (Print or E-Manual): \$47–\$55
- Test Booklet: \$59
- Rating Sheet: \$96
- Profile Forms: \$80

Evaluator Qualifications: Evaluator needs a level B qualification (PAR, 2012). Score interpretation should be conducted by a qualified professional who has sufficient understanding of the concepts of anger, hostility, and aggression (Spielberger, 1999).

Training: Vendor training program does not apply to this test (PAR, 2012).

Purpose, Development, and Standardization

Purpose: The STAXI-2 was developed to assess state anger, trait anger, anger expression, and anger control. The test measures the way these components contribute to medical and psychological conditions, and distinguishes the experience of anger from anger expression and control.

Type: STAXI-2 is categorized as a personality/mood and behavior test.

Nature of Content: STAXI-2 measures the emotion of anger as well as the expression and control of anger.

Items: The test is presented in a written format with multiple-choice selections for each of the 57 items. The questions are composed of three parts: how I feel right now, how I generally feel, how I generally react when angry or furious. All questions are evaluated on a four-point scale: the first part ranging from *not at all (1)* to *very much so (4)*; the second and third part have the same scale that ranges from *almost never (1)* to *almost always (4)*.

Reading Level: A sixth grade reading level is necessary to complete the test.

Language: STAXI-2 is available in English and Spanish.

Subtests and Separate Scores: STAXI-2 does not contain subtests or separate scores. The 57-item test produces an anger expression index score, six STAXI-2 scale scores, and five subscale scores. The scale scores include State Anger, Trait Anger, as well as four anger-related traits: Anger Expression-Out, Anger Expression-In, Anger Control-Out, and Anger Control-In. The subscales under State Anger include feeling angry, feel like expressing anger verbally, and feel like expressing anger physically. The subscales under Trait Anger include angry temperament and angry reaction.

Norms: STAXI-2 was normed with 1920 individuals between the ages of 16 to 63 from two populations: heterogeneous samples of normal adults (977 females, 667 males) and hospitalized psychiatric patients (105 females and 171 males).

The normal individuals were divided into four categories:

- combined norm with sample of males and females ages 16 years and older
- individuals between 16 and 19 years old
- individuals between 20 and 29 years old
- individuals 30 years and older

The latter three groups were further divided into male and female groups. The occupations of the normal adults included a variety of professionals. Student populations included both undergraduate and graduate students. The psychiatric patients' norm groups were also divided into males and females but were sampled as one age group: 16 years and older. They were sampled from hospitals in southeastern United States (Spielberger, 1999).

Reliability: The manual contains item remainder (IR) correlations of all 57 items for the 1644 normal adults. In general, IR correlations ranged from 0.35 to 0.80 for females and from 0.33 to 0.79 for males (Spielberger, 1999).

Standard Error of Measurement (SEM): The manual did not report the SEM.

Validity: The manual did not provide validity information for STAXI-2, but did so for STAXI. Convergent validity was calculated for the anger experience scales (State and Trait) by

correlating the scales with Eysenck Personality Questionnaire (EPQ) as well as the STPI State and Trait Anxiety and Curiosity scales using 545 females and 334 males. The correlations for State Anger scale ranged from $-.18$ to $.63$ for females and $-.2$ to $.63$ for males, and the correlations for Trait Anger scale ranged from $-.25$ to $.49$ for females and $-.20$ to $.50$ for males.

The manual also presented the convergent and divergent validity of the STAXI Anger Expression scales with other anger and personality measures: Teacher and Movie Vignettes as well as the STPI Anxiety and Curiosity scales. Convergent validity was demonstrated between the Anger Expression scales and Teacher and Movie Vignettes: correlations ranged from $-.31$ to $.49$ for females and $-.42$ to $.49$ for males. Divergent validity was demonstrated between the Anger Expression scales and the STPI Trait Curiosity scales: correlations between the Anger Expression scales and the STPI State and Trait Curiosity scales were essentially zero. Lastly, the manual also discussed researches conducted to show the relationships between the effects of the anger components measured by the STAXI scales and conditions such as coronary artery diseases, posttraumatic stress disorder, elevated blood pressure and hypertension. The manual also summarized researches that utilized the STAXI scales to assess the impact of anger management programs (Spielberger, 1999).

Practical Evaluation

Qualitative Features: The test booklet and rating sheet have an organized layout with medium-sized font and dark ink for ease of reading. Testing materials are durable. The simple two-page item booklet and one-page rating sheet are easy to handle and do not appear overwhelming.

Administration: STAXI-2 can be administered to individual or groups using the same instruction (Spielberger, 1999).

Start and Discontinue Rules: Not applicable. The test does not have any time limitation.

Time: The total administration time is between 5 and 10 minutes.

Recording: Item responses are recorded as examinees mark their answers on the rating sheet.

Scoring: Scoring is done in three parts. First, the evaluator sums the total item scores for each scale and subscale. Next, using the corresponding norm, the evaluator converts the raw score to percentiles and T scores using the corresponding conversion tables. Finally, the evaluator plots the percentiles and T scores separately on the profile form. The results for STAXI-2 can also be scored using an Optical Character Reader (OCR) scanner when the test is used for large group screening and evaluation (Spielberger, 1999).

Accommodations: If the evaluator suspects an examinee's reading level is below that of the sixth grade, the evaluator may consider reading the items to the examinee. In addition, the evaluator should exercise caution when presenting the test to an individual whose primary language is not English.

Rapport: Rapport is not addressed in the manual.

Reviewer Comments

In an extensive review of standardized anger measures, Eckert and colleagues (as cited in Lilly & Beckstrand, 2011) concluded that STAXI-2 was one of the few tests with a theoretical basis, clear indication of use, and adequate construct boundaries. Compared to the Aggression Questionnaire, the Novaco Anger Scale, and the MMPI-2 Anger Scale, which are assessments that shared the same three characteristics aforementioned with STAXI-2, Eckert and his colleagues concluded that STAXI-2 was the only instrument that normed after both normal and psychiatric patients with a large age range of 16 to 63 years old. These findings imply that STAXI-2 has wide application in clinical and research settings (Lilly & Beckstrand, 2011). The following details STAXI-2's specific strengths and areas of consideration.

Test Administration, Scoring, Interpretation Considerations

Simplicity characterizes STAXI-2. For evaluators, the test is easy to administer and score due to its brevity and the concise yet step-by-step instructions. The rating sheet provides the sum items for each scale and subscale in a formula. Thus, evaluators can simply plug in the score for each corresponding item into the formula to obtain the scores. The formulas speed up scoring and prevent mistakes. The manual also provides guidance on how to manage missing responses or how to administer the test to an examinee with reading challenges (Spielberger, 1999).

For examinees, the test requires minimal time and effort. The 57-items test is divided into three sections with the second and third sections using the same four-point scales. This means that examinees need not readjust themselves with new scales for each section. The test also requires minimum consideration from examinees; it asks examinees to focus on generalized feelings and reactions: the first section asks examinees to evaluate their feelings at the moment of test taking, the second section asks examinees to assess their general feelings, and the third section asks examinees to reflect on their general reaction when feeling angry. Thus, the test's shortness, identical scales between sections, and minimal reflection make completing the test in less than 15 minutes possible.

Guidelines for interpretation are provided in both narrative and tabular formats. The narrative portion defines and differentiates between high and low scores and contains the general implications behind these scores. With this overview, an evaluator can quickly screen out clients who fall inside of the normal range—scores between the 25th and 75th percentiles—and focus on those individuals with specific anger state and/or trait that could lead to psychopathology or physical disorder. This quick screening can be especially effective with group evaluation. In an individual evaluation, an evaluator need not read beyond the overview if a client scored within the normal range for all scales and subscales.

To interpret high scores (> 75th percentile), an evaluator can proceed to the guideline in the tabular format. The table outlines the characteristics and experiences of those individuals with corresponding high scale and subscale scores, and interprets the meaning behind the various combinations of scale and subscale scores. For example, individuals receiving a high State-Anger (S-Ang) score will have this interpretation: "Persons with high S-Ang scores are experiencing relatively intense angry feelings... If T-Ang and AX-I scores also are relatively high, elevation in S-Ang are more likely to reflect chronic anger" (Spielberger, 1999, p. 16).

While the manual provides detailed information for high state and trait scores, the manual offers little information for scores below the 25th percentile; the manual states that these individuals may have an excessive use of denial and repression as coping mechanisms and lifestyle (Spielberger, 1999). For these individuals, an evaluator can use this information as a guideline for further assessment or counseling.

Test Construct

The final 57 questions on STAXI-2 is a compilation of years of research, and is an expansion of the original 44-item STAXI (Spielberger, 1999). Criteria such as the strengths of the loading of each item undergoing factor analysis, content validity and clarity of the meaning of each item, and psychometric properties of each item were utilized to finalize STAXI-2 (Spielberger, 1999). Still, some cautions need to be exercised when using the test.

First, evaluators need to be aware of STAXI-2's vulnerability to impression management and self-deceptive enhancement when test results influence treatment decisions (McEwan, Davis, Mackenzie, & Mullen 2009). Impression management is defined as the deliberate overly positive self-reporting on psychometric measures (McEwan et al., 2009). When the test was given to patients of the community forensic mental health service referred for assessment of stalking behaviors, researchers found those who engaged in impression management had significantly lower levels of reported trait anger, outward expression of anger, inward expression of anger, and higher levels of anger control (McEwan et al., 2009). Thus, researchers concluded that STAXI-2 was "vulnerable to social desirability response bias" and recommended STAXI-2 "be administered and interpreted in conjunction with a recognized measure of such bias to improve validity" (McEwan et al., 2009, p. 43).

Second, evaluators should question whether the test takers' current emotional state can have an impact on their test results. The STAXI-2 differentiates between test takers' current and general states, if test takers were to experience high emotional stress prior to taking the test, their test results may be inappropriately skewed, e.g. overall higher scores in state and trait angers as well as anger expression and anger control. Evaluators may not be able to tell examinees to take the test only when feeling good, but evaluators may need to ensure the examinees be in a calm frame of mind prior to taking STAXI-2.

Third, trait anger measurements contain questions that are specifically focused on sensitivity to criticism, perceived affronts, and negative work evaluation by others (Spielberger, 1999). Should an examinee be provoked into anger by situations other than those listed in the test, the test could then incorrectly assess this trait of anger. Thus, as with any assessment, the evaluators need to collect additional corroborating information that may include further interviews to ask examinees whether each section of the test captured the situations in which they experience anger.

Cultural Implications

"Anger is a universal and natural emotion" (Orcutt, 2002). Although anger can be measured universally, using back translation of an original test may be insufficient. When doing cross-cultural adaptation of psychological tests, back-translation of an original test item for

measuring emotion and personality is “often less adequate than constructing a new item based on the equivalent cross-cultural conceptual definition of the emotional state or personality dimension that is been measured” (Spielberger, 2006, p. 300).

When STAXI-2 was back translated into Hong Kong Chinese, 9 out of the 57 items from the test needed to be deleted after confirmatory factor analysis (Maxwell, Sukhodolsky, & Sit, 2009). Although translation issue and conceptual ambiguity could contribute to the discrepancy between the structures of the Chinese STAXI-2 and English language STAXI-2, the study recommended new item creation from an emic as opposed to an etic approach (Maxwell et al., 2009). The convergent validity part of the study in the Chinese STAXI-2 also found a positive correlation between Anger Control (In and Out) and Anger Expression-In, which could correspond to the view of Chinese culture that negative feelings such as anger must be internalized and controlled (Maxwell et al., 2009). Still, anger expression and control have multifaceted dimensions in Chinese culture, and any generalization made must be examined against actual studies (Maxwell et al., 2009).

Two additional studies also demonstrated the insufficiency of back translation. In adapting the English STAXI-2 to other languages such as Spanish and Portuguese, the author discovered certain verb usage had an impact on the state and trait distinction (Spielberger, 2006). When adapting STAXI-2 to French, researchers found lack of distinction between several state anger scales and subscales (Borteyrou, Bruchon-Schweitzer, and Spielberger, 2008).

These studies demonstrate that the insufficiency of language is a symptom of a deeper issue: different cultures experience anger differently. Clinicians and evaluators of those individuals with a non-American culture should supplement test results with interviews to minimize the impact of language and culture barriers and maximize the accuracy of results interpretation. Evaluators can ask these questions to help test takers elaborate their experience of anger:

- How does your family experience the feeling of anger?
- Do your parents/guardians/siblings encourage the demonstration of anger? If so, is this demonstration dependent upon the circumstance?
- Are there other ways you feel anger?
- Are there other ways you express and manage anger that the test does not capture

Test Accommodations

Test modification or accommodation is necessary for persons with learning disabilities, blindness or low vision, cognitive limitations, paralysis or impaired limb functioning, and a history of substance abuse. These individuals will need either the physical or mental abilities to take the test with the accommodations provided. For example, people with limited vision may need a portable magnifier or a qualified reader, and people with certain cognitive limitations may need to respond to each question verbally (Job Accommodation Network, 2013). People with paralysis or impaired limb functioning may also benefit from having a qualified reader who can mark the answers, and people with a history of substance abuse may need to coordinate with the evaluator to ensure clear mental capacity on the day of testing. People who are deaf or hard of hearing will need translators or evaluators who are ASL proficient to understand the verbal instructions or explanations.

Summary Evaluation

From a practical perspective, STAXI-2 is easy to administer, score, and interpret. STAXI-2 facilitates test taking with its clear layout, shortness, and similar scaling. More importantly, the scales and subscales of the test have been used to assess and differentiate among the components of anger experience. For example, Gerlock used STAXI to evaluate the effectiveness of an anger management intervention program for male veterans with posttraumatic stress disorder, Kinder and his colleagues used the STAXI scales to assess the roles of anger and depression in patients with headache and chronic pain, and McMillian used the STAXI scales to assess the anger experienced by patients undergoing treatments for cancer (all as cited in Spielberger, 1999). The following are some specific study results based on the usage of STAXI:

- Markovitz et al. found a relationship between Anger Expression-In and higher resting blood pressure, as well as the ability of Trait Anger scale to predict elevated blood pressure after traditional risk factors were controlled;
- Julkunen et al.'s study established relationship between rapid progression of atherosclerosis and increased anger control and expression;
- McNew and Abell found anger as an essential characteristic of posttraumatic stress disorder (all as cited in Spielberger, 1999).

In a rehabilitation setting, professionals can use STAXI-2 to evaluate the experience of anger in disability adjustment. Adaptation to chronic illness and disability include non-adapted reactions such as depression, internalized anger, shock, anxiety, and externalized hostility, while adapted reactions include acknowledgment and adjustment (Antonak & Livneh, 1991). The non-adapted reactions precede the adapted reactions, occur non-sequentially, and are independent of one another (Antonak & Livneh, 1991). Furthermore, each of these reactions “may be divided into psychological, cognitive, affective, and behavioral components and assessed via self-report measures” (Livneh, Lott, & Antonak, 2004, p. 412). Knowing that anger is part of the adjustment process, and knowing that the scales and subscales of STAXI-2 measure the aforementioned components of anger, rehabilitation professionals can use STAXI-2 to develop a comprehensive understanding of their clients’ reaction of anger as an independent experience or as part of the adjustment continuum.

Independently, professionals can use the score combinations to determine an individual’s level of anger feeling, expression, and control, as well as an individual’s method of expressing anger and the type of circumstances that provoke the individual to experience anger. The combinations of the scores can further indicate whether counseling support is necessary to help clients address their anger. For example, high Trait Anger and Anger Expression-In scores along with high State-Anger score could reflect chronic anger; whereas a high Feel like Expressing Anger Verbally score along with a low Trait Anger score reflects the relative temporary desire to express anger verbally (Spielberger, 1999). This example demonstrates that different score combinations require different counseling support, and those who exhibit chronic anger may need more support than those who show transient anger. From the perspective of disability adjustment continuum, clients who fall into the former category of having chronic anger may display their anger even when they have adapted to their disability and may need techniques to manage their anger post adjustment, whereas clients who fall into the latter category of

experiencing transient anger may show decreasing levels of anger as they approach adaptive reactions. Thus, rehabilitation professionals can use STAXI-2 to guide their counseling efforts.

Rehabilitation professionals who work with clients diagnosed with depression can use STAXI-2 to detect, measure, and determine how clients with depression experience, express, and control their feelings of anger. According to Deffenbacher, anger in depression can result in poor evaluation by others, lowered self-esteem, interpersonal conflicts, and occupational maladjustment (as cited in Painuly, Sharan, & Mattoo, 2004). Anger as presented in the form of manifested hostility was classified as a subgroup of clients with depression according to cluster analysis conducted by Paykel and Hollister et al. (as cited in Painuly, Sharan, & Mattoo 2004). Hostility can especially be detected with Anger Expression-Out scores as those who score high on this component frequently express their anger in aggressive behavior directed toward persons or objects in the environment (Spielberger, 1999). Professionals who have clients with high Anger Control-Out scores may better understand the clients' depression as this high score indicates that excessive anger control can lead to passivity, depression, and withdrawal (Spielberger, 1999). Finally, Fava et al. found that focusing on residual symptoms such as anger using cognitive behavior therapy for clients with depression "has been found to decrease relapse rate in recurrent depression" (as cited in Painuly, Sharan, & Mattoo, 2004, p. 218). Thus, recognizing and understanding the role of anger in depression are critical in treating depression; they could have an impact on both the treatment outcome and the functional reintegration of clients with depression.

Vocational evaluators can use STAXI-2 to help determine the employability and placeability of clients. The ability to have strong and healthy interpersonal relationships may be both an overall employability skill as well as a specific skill required by an employer. How a client scores on STAXI-2 can show whether the client tends to openly express anger with profanity or aggressive behavior, has the inclination to be frustrated with lack of recognition, and lacks the necessary assertiveness to handle frustrating situations. Depending on the results, evaluators can help clients develop the skills needed to combat these negative interpersonal abilities and be more prepared for prospective employment opportunities.

Above are but few examples of how evaluators and other rehabilitation professionals can use STAXI-2. With STAXI-2's simplicity, its wide application, its exhaustive norming populations, and its comprehensive evaluative categories, clinicians have a powerful assessment tool to gain a thorough insight into their clients' experience of anger. This insight can provide clinicians with a direction in working with their clients, and help clinicians to develop a comprehensive treatment plan. Ultimately, whether clients are one step closer to disability adaptation or effective anger management, they are closer to recovery and healing.

References

- Antonak, R. S., & Livneh, H. (1991). A hierarchy of reactions to disability. *International Journal of Rehabilitation Research, 14*, 13–24.
- Borteyrou, X., Bruchon-Schweitzer, M., & Spielberger, C. D. (2008). The French adaptation of the STAXI-2, C.D. Spielberger's State-trait anger expression inventory. *Web of Science, 34*, 249–255. doi: 10.1016/j.encep.2007.06.001

- Job Accommodation Network. (2013, March 7) Accommodation & compliance series: Employees with intellectual and cognitive disabilities. Retrieved from <http://askjan.org/media/intcog.html>
- Lilly, M. L., & Beckstrand, J. (2011). Anger by any other name: Sampling the domain. *The Internet Journal of Mental Health*, 7(1). doi: 10.5580/1af8
- Livneh, H., Lott, S. M., & Antonak, R. F. (2004). Patterns of psychosocial adaptation to chronic illness and disability: A cluster analytic approach. *Psychology, Health & Medicine*, 9(4), 411–430.
- Maxwell, J. P., Sukhodolsky, D. G., & Sit, C. H. P. (2009). Preliminary validation of a Chinese version of the state-trait anger expression inventory-2. *Asian Journal of social psychology*, 12, 1–11. doi:10.1111/j. 1467-839X.2008.01264
- McEwan, T. E., Davis, M. R., MacKenzie, R., & Mullen, P. E. (2009). Effects of social desirability response bias on STAXI-2 space profiles in a clinical forensic sample. *British Journal of Clinical Psychology*, 48, 431–436. doi:10.1348/014466509X454886
- Orcutt, S. R. (2002). *A creative approach to helping children deal with anger: Developing a children's book on anger management*. (Doctoral dissertation). *ProQuest Dissertations and Theses*, 175–175 p. Retrieved from <http://search.proquest.com.jproxy.lib.ecu.edu/docview/305498596?accountid=10639>. (305498596)
- Painuly, N., Sharan, P., & Mattoo, S. K. (2005). Relationship of anger and anger attacks with depression: A brief review. *European Archives of Psychiatry and Clinical Neuroscience*, 255, 215–222. doi: 10.1007/s 00406-004-0539-5
- Psychological Assessment Resources. (2012). *State-Trait Anger Expression Inventory-2 (STAXI-2)*. Retrieved August 13, 2013 from <http://www4.parinc.com/Products/Product.aspx?ProductID=STAXI-2>
- Spielberger, C. D. (1999). *State-trait anger expression inventory-2 (STAXI-2): Professional manual*. Lutz, FL: PAR, Inc.
- Spielberger, C. D. (2006). Cross-cultural assessment of emotional states and personality traits. *European Psychologist*, 11(4), 297–303. doi:10.1027/1016-9040.11.4.297.

Author Note:

Liang Liao, MS

Ms. Liao is currently a vocational rehabilitation counselor with the Virginia Department for the Blind and Visually Impaired. She prepared this manuscript while a MS student in the Rehabilitation and Career Counseling program in East Carolina University's Department of Addictions and Rehabilitation studies. She also earned a certificate in vocational evaluation concurrent with her MS degree.

[Return to Table of Contents](#)

VECAP Test Review Form

Do you have a test that you use in practice that provides you and the person served with information to make an informed decision? Please share your knowledge, wisdom, and insight with our readers. This effort to collect information about tests we use is in line with our mission to improve and advance our field and you can help.

The VECAP Test Review Form is designed to gather information about tests currently used in vocational evaluation and career assessment. The form is a synthesis of ones used by Drs. Jean E. Johnson (Langston University), Pam Leconte (George Washington University), Greg Long (Northern Illinois University), and Steven R. Sligar (East Carolina University).

The form is self-explanatory and some example questions are included to help with your review. There are five parts:

- Ordering Information
- Purpose, Development, and Standardization (the psychometric properties)
- Practical Evaluation (How do you administer the test?)
- Reviewer Comments (What did you think about the test? Which populations can/cannot be tested?)
- Summary Evaluation (How can vocational evaluators and career assessment professionals use the test?)

To submit a Test Review, complete the form and email it to Journal@VECAP.org. The Test Review will go through the peer review process and be published in the VECAP Journal and posted online.

An electronic version of the VECAP Test Review Form is available on the VECAP website <http://vecap.org>

Vocational Evaluation and Career Assessment Professionals Test Review

Test Review: (Name of Test)

Reviewer:

Institutional Affiliation:

Author(s):

Publisher: dates of publication, including dates of manuals, norms, and supplementary materials (especially important for tests whose context or norms may become outdated).

Contact/Purchase: information (e.g., company address, website).

Cost: of the test that may include booklets, answer sheets, other test materials, available scoring services (e.g., online availability, CD, hand scoring templates, or other methods).

Examiner Qualifications: vendor purchase requirements (may be old APA Level A, B, or C). Also includes specific training required to administer the test.

Training: availability from the test vendor.

Purpose, Development, and Standardization

Purpose: As stated by vendor.

Type: Interest, aptitude, achievement, intelligence, values, other.

Nature of Content: What is measured (verbal, numerical, spatial, motor)?

Items: How the items are presented (power, multiple choice, written, pictorial, orally).

Reading Level: What is the reading level to take the test (per the manual)?

Language: What language(s) versions are available?

Subtests and Separate Scores: describe.

Norms: Population sampled (selection criteria, gender, age, race, ethnicity, other characteristics).

Reliability: Types, procedures, and formula used (e.g., retest, parallel forms, split-half, Kuder-Richardson, coefficient alpha, inter-rater reliability), including size and nature of samples employed and range.

Standard Error of Measurement: included?

Validity: Type (content, criterion-related predictive or concurrent, construct) and range.

Practical Evaluation

Qualitative Features: of test materials (e.g., design of test booklet, editorial quality of content, ease of use, durability, attractiveness, and appropriateness for test takers).

Administration: How done (1:1, group) and directions (specific, general).

Start and Discontinue Rules: Describe if applicable.

Time: Test time and total administration time.

Recording: How are item responses recorded?

Scoring: Discuss the general directions for scoring.

Accommodations: Are any accommodations allowed during administration (per the manual)?

Rapport: Is this addressed? If so, how (per the manual)?

Reviewer Comments

Some questions to consider:

- Do you agree with measurement description? Explain; if you disagree, then what do you think the test really measures?
- How clear are the directions? Is the test easy to administer, score, and interpret?
- Is the test face valid?
- How can this test be used with different people? Can it be adapted/modified for various populations?

- Consider the following: persons with learning disabilities; blind or low vision; deaf, hard of hearing, or other communication problems; mobility limitations; cognitive limitations; paralysis or impaired limb functioning; history of substance abuse; or disadvantaged.

Which of these groups would be appropriate to use the test without modification? Who could use the test with modifications or accommodations?

- What are the cultural implications of using this test?
- Your personal observations or insights gleaned from administering, scoring, and interpreting the test.
- Other comments that address unique aspects of the test.

Summary Evaluation

- Major strengths and weaknesses of the test across all parts of the evaluation.
- What is the primary use of the test for purposes of rehabilitation with persons who have disabilities, are disadvantaged, and/or present substance use issues?
- How can this test be used in practice by vocational evaluators?

References

[Return to Table of Contents](#)

VECAP



Vocational Evaluation and Career Assessment Professionals

New Membership

Renewal Membership

Professional Membership in VECAP

Professional members shall be those individuals actively engaged in the practice of some aspect of vocational evaluation or work adjustment training. This shall also include those individuals who are immediate supervisors, teachers, or researchers in the fields of vocational evaluation or work adjustment.

Student Membership in VECAP

Student members shall be those individuals enrolled full-time (9 hours per semester or equivalent for undergraduate study, 6 hours per semester or equivalent for graduate study) in recognized education programs preparing them for practice in the fields of vocational evaluation or work adjustment.

Benefits to Members

Newsletters, journals, networking opportunities, access to VECAP's NING, discounted registration at the National Issues Forum and other training events, one member/one vote voting privileges, and eligible to hold office in VECAP.

Name: _____ Phone: _____

Address: _____

City: _____ State: _____ Zip: _____

Email: _____ Fax: _____

Membership Options (Select One)

- Professional (\$85) – 1 year
- Professional (\$160) – 2 years
- Student (\$30) – 1 year

Make check payable to VECAP and mail to:

VECAP Home Office
9361 Barnescrest Drive
Mechanicsville, VA 23116
Email: Office@VECAP.org

VECAP...Discovering Career Potential

2013 National Executive Council

President

Kathleen Kaegi, MS, CRC
Adult Career Coach
Community College Workforce Alliance
1807 Huguenot Road, Suite 108
Midlothian, VA 23113
804.241-7936
Kkaegi@comcast.net

Immediate Past-President

Marsha Legg, MA
Director, Career Development and
Transition Services
Humanim, Inc.
1701 N. Gay Street
Baltimore, MD 21213
410.736.8428
mlegg@humanim.com

Secretary

Jenny Garifalos
1100 Harris Mill Rd
Parkton, MD
jenny.garifalos@gmail.com

Journal Co-Editor

Nancy Simonds, MA
Nancy Simonds Communication, LLC
P.O. Box 44
South Windsor, CT 06074
860.254.5418
nancy@simonds.com

Journal Managing Editor

Vanessa M. Perry, MS, CRC
Doctoral Student
East Carolina University
Department of Addiction and Rehabilitation
Studies
Health Sciences Building; Mail Stop 668
Greenville, NC 27858-4353
252.744.6300
perryva13@students.ecu.edu

President-Elect

Catherine Burzio, MA
Project Officer/Technical
Assistance Coordination Center
1825 Connecticut Avenue, NW
Washington, DC 20009
202.884.8035
cburzio@fhi360.org

Treasurer

Jen Hemme, CVE
Vocational Evaluation Supervisor
Goodwill of Southwestern Pennsylvania
Robert S. Foltz Building
118 52nd Street
Pittsburgh, PA 15201
412.632.1875
jen.hemme@goodwillswpa.org

Representative to CORE

Dr. Juliet H. Fried, CRC, CVE
Professor, Human Rehabilitative Services
University of Northern Colorado
Gunter Hall, Room 1250
Greeley, CO 80639
970.351.1580 (direct)
juliet.fried@unco.edu

Journal Co-Editor

Steven R. Sligar, EdD, CVE, PVE
Associate Professor, Director Graduate
Program in Vocational Evaluation
East Carolina University
Department of Addiction and Rehabilitation
Studies
Health Sciences Building; Mail Stop 668
Greenville, NC 27858-4353
252.744.6293
sligars@ecu.edu

Advocacy Co-Coordinator

Ashley McFall

Start On Success Transition Facilitator
Pittsburgh Public Schools
Program for Students with Exceptionalities
2140 Saw Mill Run Boulevard
Pittsburgh, PA 15210
412.323.4078
412.323.3992 (fax)
KMcfall1@pghboe.net

Advocacy Co-Coordinator

Crystal Evans, MS, CRC

Transition Coordinator
Pittsburgh Public Schools
Program for Students with Exceptionalities 2323
Brighton Rd. Pittsburgh, pa 15212
412.323.3970
cevans1@pghboe.net

Communications Co-Coordinator

Mary Ann Gorman, Doctoral Pre-Candidate

Research Assistant, Center for Applied
Developmental Science and Neuroeducation
The George Washington University
2134 G Street, NW
Washington, DC 20052
ma_gorm@gwu.edu

Communications Co-Coordinator

Bridget Green

Research Assistant
The George Washington University
Special Education and Disability Studies
2134 G St. Room 308-A
Washington, DC 20052
202.994.1235
greenb@gwu.edu

Education Co-Coordinator

Elizabeth M. Crunkilton, MS, CRC, CRP

Vocational Evaluator, Division of
Rehabilitative Services
722 East Market Street, Suite 202
Leesburg, Virginia 20176
540.812.5078
Elizabeth.Crunkilton@dars.virginia.gov

Education Co-Coordinator

Victoriya Lotkina, MA, CVE, PVE

Certified Vocational Evaluator
Personalized Career Services, LLC
P.O. Box 9329
Silver Spring, MD 20916
240.704.4449
pcslotkina@gmail.com

Membership Co-Coordinator

Donna Seering, MA, CRC, CVE, PVE

Workforce Services Director
Linden Resources, Inc.
750 South 23rd Street, VA 22202
703.299.3205
703.299.8395
dseering@Linden.org

Membership Co-Coordinator

Lisa Blakeney, MA, CVE, PVE

Certified Vocational Evaluator
Vocation Validation, LLC
P.O. Box 1147
Pasadena, MD. 21122
443.223.1992
410.360.1818 (fax)
vocvalidate@gmail.com

Standards Co-Coordinator

Karoly Motte

Vocational Evaluator

MS, CRC

Oklahoma Department Rehabilitation Services

5813 S. Robinson

Oklahoma City, OK 73109

405.635.2750

Fax: (405.631.8115)

kmotte@okdrs.gov

Standards Co-Coordinator

John Thomason

Vocational Evaluator

OK Department of Rehabilitation Services

5813 South Robinson

Oklahoma City, OK 73019

405.635.2765

jthomason@okdrs.gov

Board Member at Large

Patricia McCarthy, MED, CVE, PVE, PPSL

Lead Vocational Evaluator

Division of Rehabilitative Services

Virginia Department for Aging and

Rehabilitative Services

5904 Old Richmond Highway, Suite 410

Alexandria, VA 22303

703.586.2854

patricia.mccarthy@dars.virginia.gov

Board Member at Large

Cathy Cook, MS, CRC

Vocational Evaluator

Department for Aging and Rehabilitative Services

Virginia Workforce Center-Charlottesville

2211 Hydraulic Rd. Suite 101

Charlottesville, VA 22901

434.962.6385

Cathy.Cook@dars.virginia.gov

[Return to Table of Contents](#)

Vocational Evaluation and Career Assessment Professionals
9361 Barnescrest Drive
Mechanicsville, VA 23115-2939

PRSRT STD
U.S. POSTAGE
PAID
Permit No. 111
Salina, KS 67401