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**HOPE AND NEGOTIATING LIFE
AFTER A RESIDENTIAL POST-SECONDARY PROGRAM:
PERSPECTIVES OF BLIND ADULTS**

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**HOPE AND NEGOTIATING LIFE
AFTER A RESIDENTIAL POST-SECONDARY PROGRAM:
PERSPECTIVES OF BLIND ADULTS**

by

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Dedication

To my loving family – my amazingly supportive husband who never ceases to show me there is more than enough love to go around in this universe; to my parents who are always there for me and whose support is ever enduring; to my brother who taught me everything I know about human potential; to my best friend Lori who has been with me for 40 years and provided an ear, a kick and a laugh when I needed it!

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**HOPE AND NEGOTIATING LIFE
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This study investigates the individual outcomes of blind adults after completing residential post-secondary training. Their reflections on life before during and after the program provide understanding into complex personal issues. The narrative data revealed program factors that had an influence on individual outcomes. This study uses Snyder's hope theory as a conceptual framework to aid in the understanding and interpretation of these individual outcomes.

Hope has been found to have significant positive impact on rehabilitation issues; it is a mediating factor in the adjustment to blindness (Snyder, Lehman, Kluck & Monsson, 2006). This study extends the work of Jackson, Taylor, Palmatier, Elliott & Elliott (1998) who investigated the relation of hope to visual impairment. Therefore, the purpose of this study was two-fold. First, the

investigation seeks knowledge about how blind adults negotiated life after completing a residential post-secondary program. The second purpose was describing and understanding the role of hope in this negotiation of life.

This systematic inquiry relies on a qualitative design in which case study methods are incorporated. Interviews and follow-up interviews were conducted with 7 participants over a period of 18 months. Recurring themes and sub-themes were identified through use of the constant comparative method of coding. Further reduction across the cases highlighted thematic concepts through the use of multi-case displays.

The findings resulted in 4 main themes with 2 sub-themes each. Major themes include how participants establish housing and post-secondary activities such as work or training after the program, how they respond to expectations, whether or not they continue using the skills learned during their residential training and what they have done to establish goals and vocational pursuits. There is evidence of differences among the individual outcomes though each participant experienced equivalent training. Results highlight the influences on motivation such as family, blind mentors, vocational development and reliance on alternative techniques. Results indicate there are differences among participants regarding the hope construct specifically in pathway and agency thinking. Individual and programmatic recommendations and implications for future research are addressed; strategies for incorporating the emerging issues of this study into early education of blind children are presented.

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Chapter One: Introduction

This chapter introduces hope theory by C.R. Snyder and its application to the vocational rehabilitation of blind adults who have completed a residential post-secondary program. The problem the study is addressing, its significance, the main purpose, and driving questions are included. Definitions of key terms and concepts specific to the vocational rehabilitation (VR) field are included to provide clarification into the context of the study. The delimitations of the study are discussed in an effort to give readers a thorough view of the study.

STATEMENT OF THE PROBLEM

Hope has been an embedded theme within VR literature for many decades (Bishop, 2001; Livneh, 1986a, 1986b, 2001; Livneh & Antonak, 1990, 1997, 2005; Livneh & Parker, 2005; Livneh & Sherwood, 1991; Mpofu & Bishop, 2006; Parker, Schaller & Hansmann, 2003; Wright, 1968, 1983). Although hope has been a consistent theme within the field of VR, it wasn't until recently that it has been defined as a psychological construct relevant to the field of rehabilitation by C.R. Snyder (Snyder, Lehman, Kluck & Monsson, 2006). Snyder et al. attribute the success of treatment outcomes to the level of hope one maintains, i.e., higher hope is found to have significant positive impact on rehabilitation issues surrounding coping or adjusting to physical and mental challenges.

Previous research has applied Snyder's hope construct to self-reported adjustment and functional skills of visually impaired consumers attending a residential rehabilitation program (Jackson, Taylor, Palmatier, Elliott & Elliott, 1998). The results indicated that hope was the mediating factor between

adjustment and functional skills (Jackson et al., 1998). Though the results were informative, investigators asserted that future research should look at the role of hope in relation to adjustment and functional skills beyond residential rehabilitation programs, e.g., the outcomes of adults after they leave a residential program. Despite the amount of literature on hope, minimal research has been conducted on hope and rehabilitation, resulting in a gap in the literature (Snyder et al., 2006). Additionally, it appears that no other investigation has been conducted on hope and self-reports of consumers with visual impairments since the original study by Jackson et al. in 1998. There is also a considerably large gap in the literature on the perceptions of blind adults regarding the factors that influence successful outcomes.

With the exception of the study in which Young (1995) convened a focus group of successfully employed blind adults to discuss factors that made them employable, listening to successful blind adults is a unique research format in the field of blindness rehabilitation. There can be no better resource to understand success, however, than a number of successful blind individuals themselves (Goodwyn, Bell, & Singletary, 2009, p. 4).

Consequently, we don't know if hope plays a role beyond residential rehabilitation programs from the perspectives of blind adults themselves. Therefore, a study identifying the role of hope as defined by Snyder et al. (2006) in negotiating life beyond a residential rehabilitation program begins to address this gap in the literature.

PURPOSE OF THE STUDY, METHODOLOGY AND RESEARCH QUESTIONS

The purpose of this study was two-fold. First, the investigation began with seeking knowledge about how blind adults negotiated life after completing a residential post-secondary program. The second purpose was describing and

understanding the role of hope in this negotiation of life. Ultimately, the aim of this study was to gain understanding through the perspectives of blind adults. Capturing a holistic picture of their lives after a residential training experience through reliance on their words provided knowledge not otherwise available. One purpose for conducting research is to generate new knowledge for aiding in future program direction (Mertens, 2005). It is hoped that the data gained from the perspectives of the participants will achieve this purpose. The perceptions of blind adults who have completed this program were obtained through a series of interviews. Their perspectives on their life experiences increase knowledge of developmental, vocational and rehabilitation issues before, during and after residential training. A goal was to “seek to make sense of personal narratives and the ways in which they intersect” (Glesne, 2006, p. 1).

Since the trend over the years is to make research results more useful by using more real life situations (Mertens, 2005), this process of systematic inquiry relies on a qualitative design in which case study methods are incorporated (Merriam, 2009; Mertens, 2005). Considering the lack of research on this phenomenon, qualitative approaches are appropriate since “qualitative research investigates poorly understood territories of human interaction” (Glesne, 2006, p. 211). The participants were interviewed over a period of time and each was a “bounded” case for the focus of the study (Glesne, 2006; Merriam, 2009). Understanding the reality of life beyond residential training through interaction and exploration with blind adults about their perceptions is the epistemological position of this research (Glesne, 2006). However, this research is not without a theoretical perspective which aids in the interpretivistic view of the data by

applying the theoretical lens of hope theory (Anfara & Mertz, 2006; Crotty, 1999; Merriam, 1998, 2009; Mertens, 2005; Mertens & McLaughlin, 2004; Snyder, et al. 2006; Yin, 2003). Contrary to common beliefs about qualitative research, it is important to have a framework that illuminates and facilitates interpretation (Anfara & Mertz, 2006; Merriam, 2009). "Although defining the research problem, identifying the theoretical framework, and reviewing the literature are explained in sequence . . . in reality they are very much interactive processes" (Merriam, 2009, p. 55). It is a process of both induction and deduction (Merriam, 1998). This topic is discussed in further detail in the next two chapters but for now it is important to clarify that qualitative research contains theoretical frameworks. Even grounded theorists advocate for use of a coding paradigm; they recognize that elaborating on a theory by matching data against the theory can produce meaning (Anfara & Mertz, 2006; Crotty, 1999; Merriam, 2009; Miles & Huberman, 1994; Schwandt, 1993; Strauss & Corbin, 1998; Yin, 2003). According to Anfara & Mertz (2006), "It is, indeed, this diversity and richness of theoretical frameworks that allow us to see in new and different ways what seems to be ordinary and familiar" (p. xxvii).

These perspectives support both the rationale and methodology for this study which are qualitative and interpretive (Anfara & Mertz, 2006). Our point of view, which is often influenced by theory, constructs and frames our questions of inquiry (Anfara & Mertz, 2006; Merriam, 2009).

The questions of inquiry based on this investigator's theoretical framework and experiential background are:

1. What participant characteristics and qualities influence their individual outcomes?
2. What trends illustrate either high or low hope among the participants?
3. What were the most significant program components and how did they impact the participants during and after residential training?
4. How does the post-secondary program training foster hope?

SIGNIFICANCE OF THE STUDY

Potentially there are 3 significant contributions of the current study. First, it inserts qualitative research into a field that is dominated by positivistic approaches and has a limited number of qualitative studies. Second, the current study links theory to experiential data for the purposes of creating greater meaning. It extends hope theory into blindness rehabilitation, resulting in better knowledge of the hope construct and its application to rehabilitation practices. Third, the current study gives voice to an under-represented group and provides insight into a topic of importance to the field of blindness rehabilitation.

Importance of Qualitative Research

Mertens (2005) provides some reasons why a qualitative approach is an important one in conducting research with persons with disabilities. The following list summarizes her outline:

1. Often issues surrounding the inclusion of persons with disabilities are social-political in nature. Qualitative approaches have the capacity to holistically portray the experiences of under-represented groups such as persons with disabilities.

2. Insight and understanding into the social-political process, its fundamental roles, underlying ideology and influences are more transparent.
3. Acquiring understanding of the insiders' viewpoint has been shown to improve practices that are related to cognitive and motivational interpretations of world views held by persons with disabilities and the systems that serve them.
4. Often, the questions that need addressing are more likely to get asked in the process of qualitative research.

Hanley-Maxwell, Hano & Skivington (2007) echo the claims of Mertens regarding the benefits of qualitative research approaches: "Qualitative research approaches offer rehabilitation scholars and practitioners avenues into understanding the lives and experiences of people with disabilities and those people and systems with whom they interact" (p. 99). The same authors point out that "qualitative research is still rarely present" (2007, p. 99) in rehabilitation journals. Considering the benefits of qualitative research, one could entertain many conclusions regarding this positional approach in current rehabilitation publications and its underlying implications regarding the value of the consumer viewpoint. In keeping with hermeneutic tradition, Howard (1982) emphasizes the importance of including the human experience as beneficial for everyone:

What is characteristic of our experience of cultural phenomenon is precisely our sense that these can not be relegated to a "non-self" category, that they exist, rather, as "for-us" kinds of phenomena, and that the attempt to relegate them to the category of non-human systems . . . empties them of the character that makes them special (p. 15, as cited by Smith, 1993, p. 189).

Taking into account historical treatment of persons with disabilities, it is not at all surprising to find remnants of old attitudes still present in the systems of today. According to Smart (2001), in past centuries, people with disabilities have been killed, sterilized, institutionalized and segregated throughout history because they were considered less than human. Thus hopelessness was embedded within the lives of people with disabilities. This devaluation of people with disabilities began to change in the 1920's when hope for people with disabilities became organized through services from state vocational rehabilitation (Carney, 1990). Put simply, VR services provide hope by working toward successful outcomes which result in vocational goal achievement for people with disabilities. It is said that "hope" is the most important resource VR can provide consumers (Smart, 2001). It is a resource that promotes the best in consumers (Snyder & Lopez, 2007). Since the beginnings of the VR system, hope was inherent as both the consumer and the service provider believed the VR process would create positive individual and social change (Carney, 1990). VR provides hope to the consumer by helping them to adapt or adjust to the disability and the environment. Consequently, VR builds hope by assisting consumers in the adjustment to disability through providing services that develop a positive attitude toward disability which is necessary in reaching successful vocational outcomes (Wilson, 2004).

One qualitative study refers to VR counselors as the "hope" for people with disabilities since the counselor plays an important role in assisting the consumer in the transition from despair to a meaningful life (Rigger, 2003). Qualitative research approaches "often parallel those used in counseling and

appear to be well matched with the field of rehabilitation counseling” (Hanley-Maxwell et al., 2007, p. 99). Incorporating qualitative research into current rehabilitation journals makes sense and can make a difference in the lives of people with disabilities by closing the knowledge gap. In their article, “Qualitative Research in Rehabilitation Counseling”, Hanley et al. (2007) conclude that qualitative research perspectives challenge the traditional research approaches of rehabilitation scholars.

Importance of Matching Theory to Data

As important as hope is, until recently it wasn’t identified as a psychological construct. Previously, hope has been a part of literature and history as far back as Greek mythology and the Bible (Snyder & Lopez, 2007). Throughout history hope has been viewed as an abstract concept or illusion; it is the “pie in the sky” wish or the dream that new worlds were built upon (Gray, 2003). However, as a psychological construct, hope is the impetus for significant positive outcomes as demonstrated through the area of positive psychology and later through Snyder’s hope theory.

Hence, the hope construct is defined as a positive motivational state that is based on an interactively derived sense of successful goal-directed energy called "agency", and plans/routes to meet goals called "pathways" (Snyder et al., 2006). The internalized belief that one can produce goals, agency, and pathways are the key defining components of the hope construct in hope theory (Snyder et al., 2006).

The psychological construct of hope provides a basis for understanding actions and beliefs while aiding in behavioral predictions. More than wishful

thinking, hope is the belief that things can get better; it is the type of thinking that leads to actions. Hope is the motivation and effort that brings about outcomes. It is a construct that embodies beliefs, values and experiences. In the field of psychology, hope is correlated with the therapeutic alliance (Snyder, 2002). It impacts emotion and overall well being (Snyder & Lopez, 2007). Consequently, the level of hope one has determines how barriers are perceived, met and overcome (Snyder et al., 2006). Integrating hope as defined by Snyder has the potential to play an important role in the vocational rehabilitation process and ultimately outcomes. According to Snyder et al. (2006), hopeful people meet and overcome barriers. As a psychological construct, hope can be taught, learned and increased.

Importance of Insider Viewpoints

Employment remains the largest gap between people with and without disabilities and is directly linked to the continued lack of progress in other key areas for people with disabilities, such as income, access to health care and socialization (National Organization on Disability [NOD], July 26, 2010, p.1).

More specifically, the following list of barriers is still presently impacting individual outcomes for people with disabilities:

- Employment represents the largest gap between the two groups. Of all working-age people with disabilities, only 21% say that they are employed, compared to 59% of people without disabilities – a gap of 38 percentage points.
- People with disabilities are still much more likely to be living in poverty.

- People with disabilities are less likely than those without disabilities to socialize with friends, relatives or neighbors, once again suggesting that there are significant barriers to participation in leisure activities for this population.
- The second-largest gap between people with and without disabilities is regarding Internet access. 85% of adults without disabilities access the Internet, whereas only 54% of adults with disabilities report the same – a gap of 31 percentage points (NOD, July 26, 2010, p. 2).

Additionally, lack of education and training has been identified as a factor contributing to the unemployment of people with disabilities especially for students entering post-secondary life. Although education is critical for achieving employment, people with disabilities are twice as likely to drop out of high school as their non-disabled peers (NOD, 2010). Increased education and training improve the employment opportunities for people with disabilities, however, people with disabilities have higher levels of drop-out rates and are less likely to finish college (Williams, 2004; Wilson, 2003). Post-secondary education includes a variety of training options including the completion of a post-secondary degree and has an impact on higher self-esteem and self-sufficiency (Leuchovius, 2004).

Underlying these issues are the challenges faced by students with disabilities who are often not equipped to meet the demands of post-secondary activities as it requires a higher level of independence than what was required in most secondary educational experiences (Jones, 2002). According to Omvig (2002), most blind graduates benefit from attending a rehabilitation center for an extended period of time following graduation from secondary education. These rehabilitation programs are residential adjustment and orientation programs

designated to assist blind students (as VR consumers) learn how to function competently as a blind person before attempting vocational training or employment. When considering students who are blind, participation in a rehabilitation center program provides the training not yet obtained in order to gain the skills needed to succeed in adult life (Omvig, 2002).

It appears these residential rehabilitation programs, one of the services provided through the VR program, provide hope for the future. Considering the many challenges faced by people with disabilities, it seems that hope may be the mediating factor that makes the difference between an unsuccessful outcome and a successful one. There is a limited amount of information on hope that can be found within rehabilitation literature (Snyder et al., 2006). Few sources address hope directly while many discuss hope indirectly leaving the reader to extrapolate the importance of hope in the VR process. There is an abundance of conceptual and theoretical publications on hope, however, the field would benefit from further investigation into the topic of hope in rehabilitation. Additionally, the information available on residential programs for the blind is extremely limited and mostly conceptually based. Investigating the role of hope in individual outcomes of young blind adults would begin to address this gap in the literature.

Although one study identifies hope as mediating adjustment to visual impairment, the findings are specific to a residential rehabilitation program environment (Jackson et al., 1998). Investigators of this study indicate there is a need for more research beyond the residential environment. Additionally, there

is an even greater lack of research based on the perspectives of consumers who are blind (Goodwyn et al., 2010; Young, 1995).

The current study provides understanding into the lives of blind adults through their reflections and perspectives after they moved beyond a residential program. By applying the hope theory to their reflections, insight into the role of hope and their individual outcomes can be gained. These factors may promote more research based practices within the field of vocational rehabilitation. It is possible that this study can provide important understanding that will enhance program development and implementation for vocational rehabilitation success. Everyone might assume hope is important to vocational rehabilitation, however, this study seeks to highlight specific examples of the hope construct as defined by Snyder et al. (2006) and discussed by the consumers themselves. According to Miles & Huberman (1994), knowledge is a social and historical product in which the facts present themselves deep in theory.

DEFINITION OF TERMS

- Alternative techniques – Performing a task in a different manner than what is considered typical, primarily without using vision, synonymous to skills of blindness, non-visual techniques (Omvig, 2002).

- Blindness –

When vision has deteriorated to the point that, to function capably and efficiently, the individual uses alternative techniques to accomplish the majority of life's daily activities, even though there is some residual vision which may well be quite useful for certain, limited purposes (Omvig, 2002, p. 19).

The legal definition of blindness separates it from other conditions such as visual impairment thus providing the qualifying criteria for many vocational services and residential programs. Legal blindness is defined as having less than 20 degrees peripheral vision or greater than 20/200 in the better eye with correction.

- Cane travel – instruction in the use of a long white cane and is considered an alternative technique for traveling independently.
- Consumer - A person with a documented disability who meets the eligibility criteria and who qualifies for VR services and makes informed decisions about services needed.

- Hope –

As defined by Snyder, goal-directed thinking in which a person has the perceived capacity to find routes to desired goals (pathway thinking) and the requisite motivations to use those routes (agency thinking). Snyder believes that hope is not genetically based but an entirely learned and deliberate way of thinking (Snyder & Lopez, 2007, p. 35).

- Individual Outcomes - A consumer-centered term rather than program-centered term to define the benchmarks of adult life as exemplified by specific actions and behaviors as they relate to personal growth and responsibility. This term refers to the process of reaching or the moment when an individual has reached their fullest potential in personal independence, employment and integration into the community. Individual outcome is the preferred reference in contrast to the more traditional term of program outcome. It is believed that the outcomes achieved by individuals cannot be relegated to one source but instead are a culmination of influences. To attribute individual gains or losses to the

intervention of one program diminishes the personal choice and decision making power of an individual to discriminate what was helpful or not in their development. Here, individual outcome refers to the many influences including but not limited to the post-secondary residential program training. Program outcome will be used in instances where the participant specifically refers to the influence of the post-secondary program and discriminates it from other possible influences.

- Residential rehabilitation program; post-secondary program – Both of these programs are what is referred to as “orientation and adjustment centers for the blind” where consumers participate in residential rehabilitation training in order to prepare and learn to function independently using alternative skills, gain empowerment and cope with their disability and the world around them. These residential programs, typically centers, are a significant part of the vocational rehabilitation process for consumers who are blind or visually impaired.
- Vocational rehabilitation (VR) - Resources and supports designated to provide employment-related services for individuals with disabilities, giving priority to individuals who are significantly disabled. VR assists individuals with disabilities who are pursuing meaningful careers and helps those individuals to secure gainful employment commensurate with their abilities and capabilities.

DELIMITATIONS

- This study does not predict vocational success of the participating consumers.

- This study does not evaluate the residential post-secondary program or its staff since evaluative inquiry is an ongoing process for investigating organizational issues (Mertens, 2005) and the scope of this study centers on consumer perceptions.
- This study does not make any conclusions about cause and effect relationships or correlations but offers plausible interpretations for consideration.

ASSUMPTIONS

1. Until blind children can acquire the necessary training at equivalent developmental stages as their sighted counterparts, it is assumed that there will be a continual demand for residential post-secondary programs that address the functional needs of adolescent consumers who are blind and visually impaired.
2. It is assumed that the psychological construct of hope as defined in Snyder's hope theory will continue to be a valuable tool for the field of vocational rehabilitation.
3. It is assumed that available vocational rehabilitation resources will decrease as the demand for them increases as a result of growing visual impairments and blindness due to diseases of the eye. Mainly macular degeneration, diabetes and the general aging population have been predicted to increase thus creating a need for cost effective and short term strategies like those found within hope theory.

4. It is assumed that the seven participants of this study are representative of the population of consumers who attended a residential post-secondary program of this nature.
5. It is assumed that this study offers high social validity and is a value to the population of consumers with visual impairment and blindness.
6. It is assumed that this study extends hope theory by expanding its application into the relationship of hope and visual impairment and blindness by highlighting linkages between hope and individual outcomes.
7. It is assumed that the post-secondary program used in this study is equivalent to a residential rehabilitation program for the visually impaired referred to in previous literature and the slight differences do not minimize the relevance of this study to earlier ones.

SUMMARY

This chapter provided a brief overview of the study and its value to the field of blindness rehabilitation. There are many barriers faced by consumers who are blind and it is the belief of this investigator that the systematic inquiry into the perspectives of blind consumers increases knowledge of what is needed and what is useful in rehabilitation services. In addition, understanding the role of hope in the perspectives of the consumers adds to the overall application of this theory to a rehabilitation setting, thus extending the research on hope and visual impairment and blindness which fills a gap in what currently exists. The goal of a qualitative inquirer is to become "one whose interpretations are another

contribution to an ongoing process of the interpretation and reinterpretation of meaning” (Smith, 1993, p. 199).

Ultimately, minimizing the unemployment of people with disabilities is not only an individual benefit but a social one. Hope has been shown to promote the attainment of goals in other areas and it may make a significant contribution to the vocational development of blind consumers active in VR services if it is intentionally integrated to the extent that it can mediate goal attainment. VR is a goal-directed process with short-term and long-term goals. Hope as defined in hope theory by Snyder et al. (2006) has the potential to impact rehabilitation training, services and outcomes for consumers who are blind and visually impaired. This chapter provided a brief overview of the purpose and theoretical perspective of the current study. The following chapter will provide a summary of the literature on hope and rehabilitation ending with the seminal study on hope and visual impairment.

Chapter Two: Review of the Literature

This chapter begins with a discussion on theory and theoretical frameworks in order to provide readers with an understanding of the literature review and its relevance to the current study. Following this discussion is an overview of the theoretical background found within Positive Psychology and hope theory. The remainder of the chapter is devoted to a summary of the literature on hope and rehabilitation. First, there is the section on Summary of Earlier and Implicit Literature on Hope. This section includes the works of Beatrice Wright, Hanoch Livneh and other innovative theories including those by Bishop, Mpofu and Bishop, and Parker, Schaller and Hansmann. Next follows the section on Summary of Recent and Explicit Literature on Hope. This section includes the seminal work of Snyder on hope and rehabilitation. These publications share a consistent message within the rehabilitation literature, i.e., the importance of hope in successful rehabilitation. The literature review ends with a key piece of literature which discusses the role of hope and visual impairment.

HOPE THEORY AS AN INTERPRETIVE FRAMEWORK

There are differing viewpoints on the role of theory in qualitative research found within the limited numbers of qualitative texts (Anfara & Mertz, 2006). Some believe theory has no role in qualitative research at all (Anfara & Mertz, 2006), while others believe theory is relevant in qualitative research but only to the extent it determines the particular methodology (Anfara & Mertz, 2006; Crotty, 1999). Since others place case study on the same level as other qualitative

designs, e.g., ethnography or grounded theory, they believe it is essential to establish the theoretical framework at the beginning of the research process (Yin, 1993). In contrast to those who believe there is no theoretical relevance in qualitative research, some assert that a researcher's theoretical framework saturates all aspects of the research process from identifying the purpose to interpreting the findings (Merriam, 1998, 2009; Miles & Huberman, 1994). Anfara & Mertz (2006) note the absence of a clear definition of a theoretical framework among qualitative texts and therefore offer the following definition: "any empirical or quasi-empirical theory of social and/or psychological processes, at a variety of levels (e.g., grand, mid-range, and explanatory), that can be applied to the understanding of phenomena" (p. xxvii).

A researcher's theoretical frame stems from a particular body of literature with its concepts and terms (Merriam, 1998, 2009). Qualitative researchers are open to the application of theoretical frameworks to the research problem under investigation (Anfara & Mertz, 2006). When choosing a theoretical framework for disability research, it is imperative that a researcher selects one that is appropriate to the disability community (Mertens, 2005). The theoretical framework underlying the current study is hope theory, which is an evolution from the field of Positive Psychology and is in itself a transformative paradigm (Mertens & McLaughlin, 2004).

THEORETICAL BACKGROUND

Positive Psychology

According to the founder of Positive Psychology, Martin Seligman, "psychology should turn toward understanding and building the human

strengths to complement our emphasis on healing” (1999, n.p.). In simple terms, Positive Psychology proposes that people can learn to be authentic, reach their potential, and find meaning by practicing specific strengths and virtues (Snyder & Lopez, 2007). These strengths are universal and not specific to culture, gender, age, ethnicity or economic class (Seligman & Pawelski, 2003). It is a psychology for the masses, a psychology of flourishing, the science of positive traits, institutions and subjective experience (Seligman & Csikszentmihalyi, 2000). In short, it is the psychology of potential based on positive emotions not negative ones.

In recent centuries, traditional psychology focused on the difference between various categories of mental illness such as depression, neurosis, and personality disorders (Seligman, 1998). Traditional psychology focuses on pathologies, their causes and treatments. The Diagnostic Statistical Manual (DSM) is the foundational tool that implements the categorization of mental illness. In contrast, Positive Psychology studies the differences among various positive emotions and tries to readdress balance by being strength based, not deficit based (Seligman, 1998). Furthermore, psychological states can be learned and are not simply biological reactions to stimuli (Easterbrook, 2001). In the early development, it was discovered that learned helplessness can have negative outcomes specifically tied to pathologies (Seligman, 1998).

Hope is the key to affecting a different outcome. It prevents helplessness from becoming long lasting and instead transforms the helplessness into just a fleeting moment of demoralization (Seligman, 1998). Hope makes the difference in whether an outcome is negative or positive. It is the phenomenon that makes

one persist through the constancy of challenges and never succumb to helplessness (Seligman, 1998). Positive Psychology focuses on identifying the persistent factors or strengths which seem to create positive outcomes. Unlike traditional psychology, Positive Psychology focuses on positive emotions and not negative ones as they produce more benefits and social capital (Seligman, 1998, 2000, 2003). Additionally, positive emotions have the capacity to undo negative emotions (Seligman, 1998).

One of the core principles of Positive Psychology is that the future can be affected through positive emotions and interpretations; one's level of optimism significantly affects the interpretive forecast (Seligman, 1998). When positive permanent and universal explanations are attached to events, outcomes are influenced in a positive way. The explanations used and attitudes chosen toward future events are in one's control. There is a way to change pessimistic outlooks in order to increase optimism and hope in the future. Thus one of the main techniques in achieving hope is the ability to recognize and dispute negative thoughts and cognitions. Such disputation can be an effective way of increasing a positive outlook and ultimately outcomes. By doing this, confidence and belief in oneself are increased. Hope can be learned and it is one of the key strengths defined in Positive Psychology.

Hope is associated with a positive future outlook. Furthermore, out of all the possible strengths hope is mainly correlated with happiness and well-being (Dean, 2005). People who possess hope as a signature strength feel they can create the future and can make it the best (Park, Peterson & Seligman, 2004). Hopeful people are goal oriented and expect that good things will happen (Park

et al., 2004). Hope is defined as "Hope [Optimism, Future-Mindedness, Future Orientation]: Expecting the best in the future and working to achieve it; believing that a good future is something that can be brought about" (Park et al., 2004, p. 606).

To summarize, Positive Psychology is focused on prevention of pathology by bringing about wellness through capitalizing on strengths and competencies (Gray, 2003). It is taking an opposite approach to traditional psychology which is focused on correcting pathology, repairing the damage, or fixing the illness or weakness which is common within the medical model and its approaches (Snyder & Lopez, 2007). Positive Psychology promotes the development of strengths and virtues which affect outcomes and, more importantly, these things can be learned (Seligman & Csikszentmihalyi, 2000). Most importantly, hope is shown to have significant impact on the future of individuals and their explanatory conclusions about current events (Seligman, 1998). However, there is a need to further the research in this area and create new generations of practitioners that can implement the best approaches (Seligman & Csikszentmihalyi, 2000; Snyder & Lopez, 2007).

Hope Theory

Snyder (2002) has extended the concept of hope inherent in Positive Psychology. In his theory, hope is defined as "the perceived capability to derive pathways to desired goals, and motivate oneself via agency thinking to use those pathways" (Snyder, 2002, p. 249). His emphasis on thinking rather than emotions makes hope theory a powerful model in the reconstruction of individual and group cognitions. Snyder asserts that hope is pervasive yet unidentifiable

throughout literature because it is hidden in other ideas. He compares hope to the yeast in bread; it is there but not identifiable. Snyder asserts that the highly unexplored hope construct is the source for many powerful individual and social outcomes in history. It is not genetic or passive; it is learned and deliberate.

In hope theory, there is a distinction between those with high hope and those with low hope. Those with high hope view barriers to the desired goal as a challenge that needs to be overcome. They use alternate paths and are motivated by their positive emotion. On the other hand, those with low hope view barriers as obstacles; they are stuck because of their negative emotion and the goal attainment is halted. Furthermore, "hope theory proposes that the successful pursuit of desired goals, especially when circumventing stressful impediments, results in positive emotions and continued goal pursuit efforts" (Snyder & Lopez, 2007, p. 190). Even if a situation is initially considered stressful, the high hope person has thoughts throughout the event that render it less stressful, resulting in a meaningful action referred to as coping (Snyder, 2002). Thus, hope feeds on itself and creates a cycle of positive thinking which results in meaningful action. Likewise, when barriers prevent goal pursuits, negative thinking results and hope is undermined. However, before the hoping process can continue, sufficient value must be placed on the goal pursuit by an individual. In other words, only the goals that are valued by the individual are applicable to hope. It is also important to note that goals can be short term, long term, preventative or focused on reaching a desired goal (Snyder & Lopez, 2007).

According to Snyder & Lopez (2007), hope is not hereditary, but a learned cognitive process regarding goal-directed thinking; it is taught by the parents

and developed by age two. The child receives cause and effect learning which results in pathway thinking as it is acquired from caregivers. The more the child sees itself as the causal force in its cause and effect sequences, the more agency thinking is increased (Snyder & Lopez, 2007). Research shows that a strong connection to nurturing caregivers creates hope while trauma or loss decreases hope. Hope is more than a state of mind; it is an electrochemical connection that affects the entire efficiency of the human organism (Snyder & Lopez, 2007). In other words, human existence is significantly determined by the presence or absence of hope as well as the varying levels it may manifest in individual and group experience.

Finally, it is important to note that hope is measurable. Snyder developed an assessment tool that has strong validity and reliability. This self-report hope scale measures pathway thinking and agency thinking. Additionally, this assessment has high predictive positive correlations with other similar concepts such as self esteem and optimism (Snyder & Lopez, 2007). It has predicted positive outcomes in areas such as sports, academics, physical health, adjustment and psychotherapy (Snyder & Lopez, 2007).

To summarize, the hope construct is defined as "goal-directed thinking in which a person has the perceived capacity to find routes to desired goals (pathway thinking) and the requisite motivations to use those routes (agency thinking)" (Snyder & Lopez, 2007, p. 35).

The following section summarizes the literature on hope and rehabilitation. Keep in mind that the range of literature covers a variety of views on hope and does not share a consistent definition of hope. In addition, some

pieces discuss hope explicitly while others discuss hope in a more implicit fashion. In either case, one point is clear: hope does play a role in successful rehabilitation and it is a worthy topic of investigation.

SUMMARY OF EARLIER AND IMPLICIT LITERATURE ON HOPE

In considering the concepts from publications on hope, it is important to understand that hope is discussed within the context of adaptation, adjustment, recovery and reaction to disability. These terms are used interchangeably and there is evidence that these terms are synonymous (Livneh & Antonak, 2005; Parker et al., 2003). The rehabilitation publications either implicitly or explicitly discuss hope as a thread throughout the psychology of disability. Though the focus of this review is on hope, it will have to be explored within the greater context of disability since it does not stand on its own as an end but it is a means to an end.

The Work of Beatrice Wright

Earlier writings on hope and rehabilitation begin with the work of Beatrice Wright, a pioneer in psychology of disability. Her earliest work discussed and emphasized the importance of hope over 40 years ago. Though her views on hope were generic in approach common to layperson's views, it served as a platform for others to extend her work implying the role of hope in rehabilitation (Mpofu & Bishop, 2006; Wright, 1960, 1968, 1983). Though hope is not fully developed as a psychological construct within her work, she introduced tasks of hope which move one toward adaptation to disability (Wright, 1983).

Inherent in the work of Wright is the importance of one's readiness to make forward progress. The foundation of care centers on the individual. In

addition, balance is essential and reality should not be more emphasized than the hopes one holds for the future. Wright's (1968) insistence on focusing on a dream even if it is unrealistic challenges the medical model of disability. The medical model considers disability to be pathological and abnormal. Since the emphasis is on curing or preventing the disability, the focus is on the limitations associated with the disability. Emphasis is placed on the elimination of the disability. In contrast, the work of Wright emphasizes hope. She focuses on the entire person. The holistic approach of Wright (1983) views disability as one characteristic among many. Wright's approach to disability keeps balance as the goal, neither ignoring nor discounting the disability but moving toward integration of the adjustment experience.

Under the medical model as a foundational framework, an individual's goals are thwarted as the medical model requires grief, loss and devaluation and is oppositional to hope by its nature. The disability often becomes the central focus and the person is identified through the characteristics of the disability (Wright, 1983). The medical model is inconsistent with the goal of vocational rehabilitation whose emphasis is the promotion of hope through the action of striving (Wright, 1983).

Hope moves the will forward as a motivating force and provides a basis for evaluation of progress (Wright, 1968). High hope is a form of expectation which is more fruitful than focusing on limitations and liabilities. Predictions become realities; positive predictions have better outcomes than negative ones (Wright, 1983). Put another way, "the harsh, realistic view in the early stage of

adjusting to severe disability leads to despair and the severest suffering” (Wright, 1960, p. 301).

The balance between hope and reality is a common negotiation in many types of human adjustment (Wright, 1960). It is in the striving for the unachievable that produces momentum not the achievement of them (Wright, 1960, 1983). “Being unrealistic can be a source of hope, achievement, and redefinition of the boundaries of new realities” (Wright, 1968, p. 296). High aspirations are a necessary disposition for goal achievement. Improbable goals have a place in rehabilitation as long as they create valued present gains and support the adherence to rehabilitation goals (Wright, 1960, 1968). Not all realities need to be assimilated and not all hopes need to be discounted (Wright, 1968).

The Work of Hanoch Livneh

One researcher that has contributed extensively to the field of rehabilitation is Hanoch Livneh. Hope is embedded in his work (Livneh, 1986a, 1986b, 2001; Livneh & Antonak, 1990, 1997, 2005; Livneh & Parker, 2005; Livneh & Sherwood, 1991). According to Julie Smart (2001), author of one of the most comprehensive publications on disability and society, Livneh’s stage theory promotes hope for people with disabilities. Though the stage approach differs from the work of Wright who promotes a more flexible view of adaptation, the work of Livneh continues challenging the medical model. The stage theory tries to capture the experience of adjusting to disability and presents a somewhat linear approach to one’s response. Livneh asserts disability is socially defined by its impairments, resulting in restrictions of the integrated activities expected of

the whole person. Furthermore, he states that this can have significant detrimental impact on the person especially regarding their level of hope (Livneh & Antonak, 1997). Narrow views toward disability as in the medical model ignore all other aspects of the individual. It appears that when functional limitations interact with social prejudice, the person with a disability is reduced to a subordinate status which presents barriers in goal attainment (Livneh & Antonak, 1997; Livneh & Parker, 2005).

The onset of a disability presents a psychosocial crisis which has a limited timeframe (Livneh & Antonak, 1990, 1997, 2005). Psychological, behavioral and social disturbances may occur and may progress into greater pathology (Livneh & Antonak, 2005). According to Livneh's stage theory, it is not uncommon for the person to experience grief, loss and despair (Livneh & Antonak, 1997, 2005). Successful adaptation is not always achieved. It is possible to have an unsuccessful adjustment process which can result in feelings of anxiety, depression, psychogenic pain, chronic fatigue, social withdrawal, cognitive distortions and other maladaptive behaviors (Livneh & Antonak, 1997, 2005). Livneh concludes that most people do move toward renewed personal growth and functional adaptation (Livneh & Parker, 2005).

Innovative Frameworks

Finally, within other innovative frameworks hope is imbedded as a key component of rehabilitation (Bishop, 2001; Mpofu & Bishop, 2006; Parker et al., 2003). These publications continue the work of Wright by emphasizing the importance of challenging the status quo and relying on a flexible approach to adaptation to disability. They begin to discuss concepts of restructuring or

rethinking crisis conclusions (Bishop, 2001; Mpofu & Bishop, 2006; Parker et al., 2003).

In the work of Mpofu and Bishop (2006), restructuring values can help one to adapt and accept change. Restructuring can stop the cycle of devaluation commonly present in the medical model. Values refer to those things that are priority, deemed worthy or appreciated and are inherent in beliefs, traits and conduct. The transformation of these learned social values is significant in coping, adjusting or adapting to disability. Values are “enduring but flexible, represent an evaluation resulting in a preference, influence behavior, are learned and culturally dependent, and exist within a complex and fluid system” (Mpofu & Bishop, 2006, p. 149). Since values are learned, they are fluid and adaptable and can be changed at the individual and societal level.

The work of Mpofu and Bishop (2006) is similar to the work of Wright. They emphasize the importance of separating from external values and creating internal values. Since society and its institutions including the family have a large influence on the individual’s self-perception and disability, it is essential to recreate one’s reality (Mpofu & Bishop, 2006). According to them, a rehabilitation outcome should consider the realignment of the value system as a result of incorporating changes to the individual caused by the disability (Mpofu & Bishop, 2006).

What is needed is the opportunity to try and try again or, put another way, the right to fail; it is an upward trend with lots of starts and stops (Bishop 2001). The process of recovery, adjustment or adaptation to disability opens the

doors to the possibilities. Recovery gives hope to rehabilitation counselors and consumers with disabilities (Bishop, 2001).

Other innovative frameworks capture the process of adapting to disability by capitalizing on the potential of the unknowing. Sometimes small changes have huge impact according to Parker and colleagues (2003). They view possibilities as emerging with only small shifts in behaviors, cognitions or feelings (Parker et al., 2003). The emergence of a new life brings hope for the future (Parker et al., 2003). Reorganization of hopes and goals result from the adoption of new and adaptive patterns of cognition and behaviors (Parker et al., 2003). It is suggested that theories that view psychosocial adjustment as a complex, multidimensional, nonlinear, and discontinuous behavioral process be adopted. They suggest using catastrophe, chaos, and complexity theories to describe the adaptation process to disability (Parker et al., 2003). The undefined and disordered state is a part of the process toward action and emergence (Parker et al., 2003).

Like earlier works of Wright, balance between realistic and unrealistic pursuits is thwarted when progress is structured in a linear fashion (Parker et al. 2003). According to Parker and colleagues (2003), adaptation to disability is a dynamic, interactive and sensitive process where order may be established out of what seems to be disorder. These approaches present a more well-rounded normalized view of disability. Life is often full of complex, chaotic uncertainties and change is inevitable. Inherent in these models is the view that the human organism is an open system full of possibilities, organization and reorganization with a drive toward renewal and energy. Open systems are complex as they

exchange energy, material, and information with their immediate environment (Parker et al., 2003). This approach resists the common trends of viewing disability as a disorder, isolated in pathology with no room for positive and higher reorganization (Parker et al., 2003). To expect the adaptation to disability to be captured by a sequential and rigid process promotes castification which is all too common in society. The self-generating nature of these approaches place the consumer at the heart of the process of adaptation which is the key to positive outcomes and crucial to hope.

In summary, this section presented several publications within the rehabilitation literature that discuss hope. Hope is often seen within the dynamic of adaptation, recovery and adjustment to disability, and is a necessary part of a successful outcome. It is clear from these publications that hope is an essential part of moving forward and promoting a flexible approach to crisis. The most prevalent theme among these pieces of literature is the importance of challenging the status quo and not relying on limitation driven views of oneself. All of these publications agree: negative emotion can only produce low hope (Bishop, 2001; Livneh & Parker, 2005; Mpofu & Bishop, 2006; Parker et al., 2003; Wright 1983). Early and innovative writings within the field of rehabilitation imply the importance of hope and its role in adjustment to disability. These theories, which overall uncover positive processes of adjustment, open the door to hope and define ways to make it happen.

The result is a change in the self-identity, representation or concept of the individual (Livneh & Antonak, 2005; Livneh & Parker, 2005; Parker et al., 2003; Wright, 1983). The movement from dependence to independence and

interdependence is supported by these positive models of adaptation (Livneh, 2001; Livneh & Antonak, 1997; Livneh & Parker, 2005; Mpofu & Bishop, 2006; Parker et al., 2003; Wright, 1983). It is essential to adopt new paradigms of adaptation that challenge the old perspective found within the medical model. New paradigms such as those previously mentioned have the potential to foster hope through flexibility and positive thinking which may result in better outcomes.

These publications share the perspective that successful psychosocial adjustment to disability is not only a means to quality of life; it is a bench mark of the quality of life where hope can be found (Livneh, 2001; Livneh & Antonak, 1997; Livneh & Parker, 2005; Mpofu & Bishop, 2006; Parker et al., 2003; Wright, 1983). Hope is at the core of the adjustment process and essential to the evolution of the disability experience (Livneh & Parker, 2005). Though these publications address hope within the context of rehabilitation, it was not until the recent work of Snyder that hope was explicitly discussed as a part of rehabilitation. His seminal work on hope and rehabilitation introduces the construct of hope as an essential part of goal attainment and sustained forward movement (Snyder et al. 2006). His theory is applicable to a variety of situations and populations. The next section provides a comprehensive view of the work of Snyder on hope and rehabilitation.

SUMMARY OF RECENT AND EXPLICIT LITERATURE ON HOPE

The Work of Snyder

The seminal work of Snyder explicitly discusses hope and rehabilitation. The use of hope theory in the practice of rehabilitation has not been extensively

explored. In 2006, Snyder et al. discussed hope theory and suggested that reliance on this theory as a model for rehabilitation promotes client goal achievement. The following list of factors and dispositions are associated with higher hope as outlined by Snyder and colleagues (2006):

- Higher amount of goals in life
- More goal oriented focus
- Exerting more effort toward goals
- Preference toward positive self referential input
- Higher academic performance
- Being less distracted from goal pursuit
- More adjusted in rehabilitation treatments
- More involvement in medical and rehabilitation treatments
- Higher self worth
- More involvement in prevention in self care
- Higher coping
- Higher tolerance for pain
- Fewer symptoms of mental illness and better psychotherapeutic outcomes
- Maintaining an adaptive positive approach for working toward the improvement of one's condition
- Higher psychological adjustment
- A greater ability to overcome obstacles
- Ability to redirect or even terminate unobtainable goals
- Ability to work for higher goals requiring more effort
- Greater confidence

- Greater competency

Hope is defined as one's internalized belief that goals, pathways and agency can be produced (Snyder et al., 2006). It is the perceived capacity to produce these three components that is the defining characteristic of hope (Snyder et al., 2006). Unlike other theories such as learned optimism or self efficacy, pathway and agency thinking are necessary elements of hope theory. Seeing oneself as a causal agent in reaching goals is a core hope concept. The more defined the goal, the more attainable it is and hopeful people will even alter the goal in order to achieve it. Here is where Snyder's construct on hope differs from the earlier work of Wright. In contrast to earlier writings of Wright that promote the usefulness of vagueness, Snyder emphasizes the importance of establishing clear goals since vagueness slows down goal attainment. However, hope theory states that a non-attainment outcome will be used by persons with high hope to identify the problematic steps that need improvement in preparation for new goals (Snyder et al., 2006). Additionally, it is important to note that the person with low hope focuses on failures, creating self-doubt and undermining their sense of agency. However, Snyder (2006) warns, this is not to be confused with the importance of integrating reality in the pursuits of goals. Over time, low hope becomes a hindrance to goal attainment. In the process of vocational rehabilitation, a poor adaptation to disability can result in low hope which ultimately impacts goal attainment. To be reached, the goal should match the self-defined level of valuation before it is attempted (Snyder et al., 2006).

Although a pathway may be the primary route in reaching a goal, a person with high hope identifies alternate pathways when barriers are

experienced. Agency thinking is based in the belief that the pathways will work and that one has the capacity to reach the goal using a chosen pathway. Thus without belief, goals are not obtainable. These authors stress it is one's perceptions toward the goal pursuit and not their results that is essential in the hope process. The ability to meet challenges is dependent on the level of hope. According to previous research, hope is low at the beginning of the rehabilitation process (Snyder et al., 2006). However, patients who were involved in goal setting maintained treatment gains after rehabilitation (Snyder et al., 2006). Adaptation and adjustment are core to the recovery process; they manage the cycle of barriers and responses.

To summarize, hope theory is a cognitive motivational model in which hope is a goal-directed process. Goals are short or long term and range from being unrealizable to probable. To reach goals, people must value them. Often they will alter goals to make them achievable. They believe they can form pathways to the goals and they have the motivation for carrying out the pathway. In other words, they see themselves as the causal agent in obtaining the goal. How obstacles and barriers are negotiated or not negotiated depends on the level of hope.

According to Snyder and colleagues (2006), the role of hope has not been explored much within the context of rehabilitation. Until recently, hope has been an undefined psychological construct within the psychology of disability though it was implied in earlier rehabilitation publications. The works of Snyder and earlier publications have much in common. Collectively, these models promote a flexible person-centered approach to achieving outcomes which can be learned

and developed throughout one's lifetime. Hope theory, however, provides a specific definition with measurable hope components and it is one of the most suitable theories for application to people with disabilities.

Hope and Visual Impairment

In reading the work of Snyder, it is clear that hope plays a significant role in all types of adaptations. However the one area of most interest was Snyder's review of hope and visual impairment. In his latest publication on hope, Snyder identifies hope as the intervening factor between coping and functional abilities for people with visual impairments (Snyder et al., 2006). In the study conducted by Jackson et al. (1998), the assertion that hope plays a role in personal goal achievement leads researchers to conclude that higher levels of hope are related to more adaptive behaviors in persons with visual impairments. Though the participants were older adults, the research showed that those with higher hope had higher self-rating of ability and took a more active approach to everyday stress (Jackson et al., 1998). There are two significant conclusions regarding hope and persons with visual impairment in this research that are worth highlighting. First, "hope might mediate the relation of adjustment to functional ability in this population" and second, "higher levels of hope may, in fact, permeate one's self-reported coping repertoire and adaptive daily living skills" (Jackson et al., 1998, p. 183). The research on hope and visual impairment is limited and since this study was conducted within a rehabilitation facility, the researchers conclude there is a need to continue investigating hope in relation to visual impairment beyond residential settings. In other words, it is not unusual for hope to be elevated within a rehabilitation facility, however, the issue in question is what

happens to hope when the program is over and the negotiation with the real world begins.

SUMMARY

This chapter outlined significant publications on hope and rehabilitation including the seminal work of Snyder on hope and rehabilitation. Based on all of these publications within the area of rehabilitation, it is evident that hope is at the heart of rehabilitation, mainly in its role of promoting a successful outcome. Hope as defined by Snyder produces outcomes and helps people overcome impediments to barriers. Though the literature on hope and rehabilitation is available there is still a gap in understanding. There is no research available on the role of hope and its impact on consumers of vocational rehabilitation after residential training. Additionally, an even greater gap exists within the literature on hope and blindness rehabilitation from the perspectives of blind adults themselves. One can assume that his theory is applicable, but, until it is investigated, no final conclusions can be made. Snyder asserts that hope mediates adjustment and functional skills for visually impaired consumers however this was based on an “in house” training environment where encouraging hope is both natural and a part of the training. Research on the role of hope in the lives of consumers after residential training is needed. The following chapter provides an overview of this type of research. The chapter describes the methods used to begin the investigation of consumers and their lives after a residential rehabilitation training program.

Chapter Three: Methods

The purpose of this study was to describe and understand the role of hope in negotiating life after residential post-secondary training through the perspectives of blind adults.

The research questions driving this exploration were:

1. What participant characteristics and qualities influence their individual outcomes?
2. What trends illustrate either high or low hope among the participants?
3. What were the most significant program components and how did they impact the participants during and after residential training?
4. How does the post-secondary program training foster hope?

This chapter provides details about the study methods. Topics include the design of the study, sample selection, data collection, analysis and chapter summary.

DESIGN OF THE STUDY

Qualitative research can be described as having four defining characteristics. In brief, this approach is focused on

1. Process, meaning and understanding;
2. The researcher as the main instrument of data collection and analysis;
3. An inductive process;
4. An end product rich in description (Glesne, 2006; Merriam, 2009).

What follows is the rationale for why this approach is best suited for the current study.

Focus on Meaning and Understanding

Interviewing, observing, analyzing and interpreting are all significant components that are defining characteristics of a qualitative research design and make up the core of this study. According to Merriam (2009), “understanding how people interpret their experiences, how they construct their worlds, and what meaning they attribute to their experiences” (p. 5) is the essence of qualitative research. Merriam (2009) defines research as “a systematic process by which we know more about something than we did before engaging in the process” (p. 4). Though the focus of this research is on the lives of young adults who are blind and have graduated from a residential post-secondary program, the goal here is to extend knowledge within the field of rehabilitation. Through the understanding of the perspectives of young blind adults, beneficial knowledge will be gained.

Researcher as Instrument of Data Collection and Analysis

In this study, I am the main instrument for data collection and analysis rather than a survey tool and a statistical analysis program. As stated by Merriam (2009), human beings are most suited for this role since it is necessary to have a data collection instrument that is sensitive to underlying meaning. This process is interactive since the researcher adjusts interpretation and perspective as information is clarified, summarized and verified (Merriam, 2009). It is a process of engaging and disengaging, participating and observing (Wolcott, 1992). Here is where I have an unusual quality of being both researcher and member, outsider and insider. I have worked in the field of rehabilitation, I am a researcher, and I am blind. This interesting trilogy of viewpoints makes me

keenly sensitive to the data as it is collected and analyzed. The existence of this study points to the interests and world views I possess, but more will be covered on the subject of researcher positionality in the next chapter. For now, I am pointing out the dual role of insider and outsider.

An Inductive Process, Rich in Description

The current findings emerged from the raw data of participant narratives and through analysis were grouped into general broader concepts. This is what is called an inductive process. It is neither naive naturalism nor without theoretical background, however, it is often based in educated imagination (Schwandt, 1993). These concepts are commonalities found within and across participants. They are illustrated through themes and sub-themes (Glesne, 2006; Merriam, 2009).

The findings of this study are supported by extensive use of words in the form of quotes and excerpts from interviews, field notes and communication with program staff (Glesne, 2006; Merriam, 2009). The findings are described with great effort to represent the phenomenon of interest with detail and accuracy and include description of the setting, context and supporting materials (Glesne, 2006; Merriam, 2009). It is the rich description through words that set this approach apart from more common approaches that rely on numerical representation of their findings (Merriam, 2009). The findings hypothesize about particular aspects of practice which are based in theoretical frameworks that drive investigation and interpretation (Merriam, 2009).

THE RESEARCH STRATEGY

This study is specifically a case study which is one type or methodology within the realm of qualitative research designs (Glesne, 2006; Merriam, 2009). What follows is a discussion about case study and why it is an appropriate methodology for conducting this study.

At its most basic description, case study research is characterized by the focus on a bounded system or social unit (Glesne, 2006; Merriam, 2009). In the current study, the young blind adults are each a case of someone who has graduated from a residential post-secondary program and is in the process of adapting to life beyond the residential training. Thus each interviewee represents a bounded phenomenon of analysis (Glesne, 2006; Merriam, 2009). The current study is a collective-case study since it includes several cases that share a common phenomenon (Glesne, 2006; Stake, 1995). Qualitative case study research is often described as grounded, longitudinal and holistic (Merriam, 2009). Qualitative case study research does not rely on specific techniques; rather it uses a variety of techniques and theories that illuminate understanding of experience (Anfara & Mertz, 2006; Merriam, 2009; Stake, 1995).

Besides the characteristic of being a bounded system, the types of questions asked determine the suitability of choosing a case study method. According to Yin (2003), "how" and "why" questions tend to be typical of case study research. The less control a researcher has, the more appropriate case study methods are. The current study asks the "how" and "why" questions and there is no experimental control. Lastly, case study research often has an evaluative quality to it and can be used to make judgments based on grounded investigation (Merriam, 2009).

Sample Selection

Since the intent of this study is understanding rather than generalizability as in quantitative research, the sampling method I used is purposeful sampling (Glesne, 2006; Merriam, 2009; Mertens, 2005). In purposeful sampling, cases are selected because they offer the most that can be learned, i.e., cases are selected because they are rich in information (Glesne, 2006; Merriam, 2009). When investigating a traditionally under-represented group as in the current study, purposeful sampling is the best method (Mertens, 2005).

Selecting the Program

Understanding what happens after a consumer attends a residential post-secondary program for the blind was the underlying interest of the current study. After obtaining permission, two independent programs were approached for the recruitment of participants: the Independent Living Skills (ILS) program in California and the Post-Secondary Program (PSP) in Texas. After working to solicit expressions of interest in participating in the study, efforts at the ILS produced one consumer response and the PSP resulted in ten responses. Thus it was determined that this study would be conducted with the PSP only. The PSP is a joint program between the Texas School for the Blind and Visually Impaired (TSBVI) and the Division for Blind Services (DBS), a division of the Texas Department of Assistive and Rehabilitative Services (DARS). Students in the PSP take rehabilitation training at the Criss Cole Rehabilitation Center (CCRC) and academic courses at TSBVI. In depth detail about the program is covered in the next chapter.

Selecting the Cases

Since I was interested in understanding the perspectives of young blind adults after attending a residential program, the criterion used in selecting cases was straight forward: I was interested in obtaining the perspectives of participants who had completed the program. A recruitment letter explaining the study purpose was sent out to the coordinator who then facilitated getting it to the consumers. If the individuals were interested in participating in the study, they contacted me directly or through the coordinator. At the time of recruitment there were 26 consumers who had participated in the Post-Secondary Program since its beginnings in 2002. There were ten respondents who responded to the recruitment letter but only seven of them met the criterion for this study, that of having completed the program. Though this interpretive work relied on a small sample size, the depth of information gained from the seven participants can be of tremendous benefit (Mertens, 2005).

DATA COLLECTION

Qualitative data is collected in many ways and, simply stated, it is a tool for learning something about people and things (Glesne, 2006; Mertens, 2005). It provides researchers with the foundation for conclusions, recommendations and creates a platform for theoretical thinking (Glesne, 2006; Mertens, 2005). In the beginning of my inquiry, I was interested in learning about the perceptions of young blind adults in their negotiation of life after a residential post-secondary program. As data were collected, I also developed an interest in learning something about the program they attended and perspectives of the staff from

both agencies collaborating on the PSP. This section will describe the data collection techniques used in qualitative research and for this case study.

Qualitative data is very different from quantitative data. First, let's address the question as to what is data. According to Wolcott (1994), "Everything has the potential to be data, but nothing becomes data without the intervention of a researcher who takes note – and often makes note – of some things to the exclusion of others" (pp. 3-4). Second, let's address the question as to what is qualitative data. Again, referring to Wolcott (1994), "qualitative data are data that qualitative researchers generate, or, with a slight refinement, qualitative data are whatever data qualitatively oriented researchers collect that are not intentionally and recognizably quantitative" (p. 4).

Qualitative data is obtained through words that result in direct quotes from people who typically share their feelings, experiences and knowledge through interviews (Glesne, 2006; Merriam, 2009). Qualitative data is also obtained through observing people, activities and environments in which detailed descriptions are recorded (Glesne, 2006; Merriam, 2009). Finally, artifacts or prepared documents provide information either in part or in its entirety as it relates to the research (Glesne, 2006; Merriam, 2009). Wolcott (1994) describes data collection in 3 modes which are referred to as inquiring, experiencing and examining. He also notes that data is not out there waiting to be collected like garbage but instead, the researcher notices it and identifies its relevance to the research (Wolcott, 1992). Consequently, it was my experience with the research topic, the purpose of the study, the identified gaps in the literature, my theoretical framework and the sample selection that guided

decisions about data collection. All of these things influenced the techniques used and the identification of information as “data” for the current study. Interpretive research such as this one incorporates interviews along with observations and documents (Glesne, 2006; Merriam, 2009; Mertens, 2005).

Interviews

Interviews are helpful when you want to thoroughly understand someone’s impression, gain depth of understanding and information, and learn about their experiences (Glesne, 2006; Merriam, 2009; Mertens, 2005). Interviews can facilitate relationships with the participants of a study but they can also take a lot of time (Glesne, 2006; Mertens, 2005). Interviews are especially helpful in obtaining information about development of identity, problem solving and issues surrounding the dominant and minority interactions in society (Mertens, 2005). The most common type of interview in qualitative research is the person to person interview which is basically a conversation with a purpose, i.e., a research purpose (Glesne, 2006; Merriam, 2009). There are varying types of interviews: they can be structured (highly organized with set question guides), semi-structured (flexible with little structure and some guides), or informal (without guides and open ended) (Glesne, 2006; Merriam, 2009; Mertens, 2005). The advantage of using interviews is to provide access to information that can not be otherwise observed, for example, it is impossible to observe feelings, thoughts, previous situations and the meanings one attributes to the world around one. Asking questions is necessary in order to enter into the perspective of another (Merriam, 2009). Additionally, interviews are necessary when there is interest in

past events which are not replicable. It is also cost effective and some researchers think it is the only way to obtain information (Merriam, 2009).

For all of the reasons mentioned above, the data collected for this study was obtained through person to person semi-structured telephone interviews. Telephone interviews were the most appropriate method of communication since the participants lived all over the state of Texas. The interviews lasted at least one hour in length and the interviews were recorded using a digital recorder. All recorded interviews were transcribed into an accessible format. Though the consumers already signed a consent form, permission was verbally obtained at the beginning of each interview. Additionally, the consumers were informed of their rights to end the interview or skip a question at anytime during the interview. Although there was a question guide, the interviews contained an atmosphere of flexibility and questions were posed in such a way that participants could freely tell their story. As Glesne (2006) puts it, the interaction was a "process of getting words to fly" (p. 79).

Although a question guide was used, it served as a tool to provide consistency in content among the interviews but often the dialogue between participants and researchers led into other questions as is preferred in most kinds of qualitative inquiry (see Figure A1 in Appendix A for the initial interview question guide). The question guide was organized under the supervision of Dr. Karrie Shogran, who served as a faculty sponsor on the study. The interviews were conducted in two phases: the initial interviews were conducted in 2007 and the follow-up interviews in 2009. As primary investigator, I conducted the first round of interviews with another doctoral candidate, Mike Foster. After my

initial analysis of the data collected from the first round of interviews, I determined that follow-up interviews were needed. I conducted the follow-up interviews by myself, and these were also recorded and transcribed (see follow-up interview question guide in Figure A2 of Appendix A).

Since the focus of the study was to understand the consumer's negotiation of life after residential post-secondary training, the questions focused on their current functional, educational, vocational, and recreational activities. Additionally, questions were asked regarding their training experiences and life prior to attending the program in order to gain understanding about what their life was like before, during and after the residential training. Data collection and analysis occurred simultaneously throughout the study (Glesne, 2006; Merriam, 2009) and, as a result, it was apparent that interviews with the coordinator of the program as well as the two counselors from the rehabilitation agency were an important perspective to obtain. In total 14 participant interviews and 4 staff interviews were conducted. Like the initial interviews, the staff interviews were person to person semi-structured telephone interviews supplemented by additional face to face informal interviews with the assistant coordinator (see staff interview question guide in Figure A3 of Appendix A).

Observations

Observations are conducted in order to identify factors that help the researcher understand the context of a study (Glesne, 2006; Merriam, 2009; Mertens, 2005). They are also incorporated with interviews for the triangulation of findings and contribute to the thick description needed in a qualitative study (Glesne, 2006; Merriam, 2009; Mertens, 2005). As the observer, I took the position

of being the participant observer, as it is often called in field research. Participant observers rely on their “knowledge and expertise in interpreting what is observed” (Merriam, 2009, p. 119). Observations are a technique used to get first hand information about a situation or if a participant is unable to discuss an issue (Merriam, 2009).

After data collection and analysis on both rounds of interviews, I determined it would be valuable to observe the post-secondary program in action. I conducted 3 formal observations of the program each lasting between 3 and 5 hours. Additionally, I conducted 2 shorter observations of parent trainings. Informal observations were done to get an overall idea of the environment. I obtained permission from the consumers attending the program at the time in order to observe their program sessions. Since the current study is focused on the PSP itself, I was very much interested in observing what goes on at the apartment site which is also where the staff offices are located. There are 4 consumers in the program at one time so it was more important to have a lengthy time on the premises than to have many short visits. My interest was to see the PSP staff in action with the consumers at the site where they lived and created their program. I wanted to see first hand what the participants described in the interviews. Though the formal observations were conducted with current program consumers and not the participants of the current study, the information was valuable since I had the opportunity to watch, experience, and review the PSP program.

Since the purpose of the observations was to crystallize the data already gathered, I was not looking for new consumer information. Instead, I was

looking for a process or an interaction with the staff and overall philosophy of the program. As a participant observer, my main role was to be a researcher and gather information. I had limited interaction with the people being observed and I took notes as I observed. I was not a complete outsider and yet not fully a participant. I took field notes and after the sessions wrote up my thoughts and interpretations on what I had experienced to capture the most accurate data I could in my observations (audit notes).

Documents

In conjunction with conducting observations, the purpose of using documents was to augment and crystallize the data that resulted from the analysis. The inclusion of documents supplemented the interviews and observations (Merriam, 2009). For this reason, I used program documentation and I selected those things that communicated the intention of the program. I used the student handbook (PSP coordinator, personal communication, November 1, 2010) as the main source of written information, as handbooks are often referred to as the cross between biography and history (Merriam, 2009). In addition, I used the program objective grid (PSP coordinator, personal communication, October 27, 2009) which was used to assess consumer progress. Finally, I referenced the program brochure (PSP coordinator, personal communication, November 1, 2010) which is the first document people receive when inquiring about the program. I used parts of these documents since they highlighted the goals and objectives of the program. These decisions about documents were made in consultation with the case study professor during the

course where we identified the components of our data gathering and study purposes.

DATA ANALYSIS

Data collection and analysis happen simultaneously and the two procedures are very interactive (Glesne, 2006; Merriam, 2009). At the beginning of my journey as a qualitative researcher, I did not understand this interaction until I began to see the study take on a life of its own. Instead of driving the research to be what I wanted it to be, early in the collection and analysis process the data were directing me to investigate what it wanted to communicate. It was an interaction between the data, my interpretations and what was available to crystallize the data.

In his book on *Transforming Qualitative Data*, Wolcott (1994) emphasizes the value of the “story” being told and the benefit of something being learned. He maintains the position that it is not necessary to know the whole story in order to learn something about a particular phenomenon (Wolcott, 1994). Likewise, it is not possible to understand fully the experiences of young blind adults negotiating their lives after a residential program but it is possible to have access to narratives that represent how they experienced this time in their lives. Clearly, this study is just the tip of the iceberg of research needed and to be conducted on this topic. It provides a beginning into the understanding of the process of leaving a residential program and entering a life without the enhanced supports. Data analysis makes this understanding and meaning accessible through systematic procedures that transform the data (Glesne, 2006; Merriam, 2009; Wolcott, 1994).

The data analysis process is a matter of consolidating, reducing and interpreting (Merriam, 2009). It is a process of moving back and forth between the concrete raw data and abstract concepts, between description and interpretation (Glesne, 2006; Merriam, 2006; Wolcott, 1994). It is the point where these components connect and the result is some kind of understanding which make up the findings of this study (Merriam, 2009). The findings of the current study result in the reporting of categories or themes that make sense of the raw data – in this instance, the narratives. The categories represent recurring regularities in the data (Glesne, 2006; Merriam, 2009). At a basic description, the raw data is broken down into pieces and then assigned to a category where they are gathered in a new organization different than when they first occurred (Glesne, 2006; Merriam, 2009). The categorized data is even further divided and represent sub-categories (Glesne, 2006; Merriam, 2009). This data sort process includes reading, assigning and reassigning based on comparing, reflecting and interpreting (Glesne, 2006; Merriam, 2009). The categories are the themes, patterns, focus and findings of the research (Glesne, 2006; Merriam, 2009).

The above process is referred to as thematic analysis and is commonly used in qualitative research (Glesne, 2006; Merriam, 2009). This is not the only data analysis technique available but it is the one I used since it is the most common especially among beginning researchers (Merriam, 2009). I began analysis by reading the first interview and making note of the things that stood out to me based on what I wanted to learn in the study. At this point, hope theory was not a part of my theoretical framework. I was looking for connections in the data that were relevant to the focus of the study, specifically, information

that would help me understand what the participants were doing with their lives and what was helpful to them during the residential program.

As I read through the first interview, I came up with words or phrases that described what I was finding in the raw data and this process is referred to as coding (Glesne, 2006; Merriam, 2009). The coding was based on my reflection and interpretation of what the participants said in the interview (Glesne, 2006; Merriam, 2009). I repeated this coding process for the remaining interviews and compiled the codes into a master list. Each interview contained similar themes and after coding the fourth interview, there were no new emerging themes. Over a period of time I read through the interviews and finalized the master list into categories which are the abstractions from the raw data (Glesne, 2006; Merriam, 2009). According to Merriam (2009), "The challenge is to construct categories or themes that capture some recurring pattern that cuts across your data" (p. 181).

Throughout the data collection, the categories were refined and revised and this process continued up to the time of writing up the findings (Merriam, 2009). Over time it became clear to me that my initial categories were representing the professional "lingo" used in the field of rehabilitation and that these terms objectified the participants instead of communicating their perspective. It was at this point I made a tremendous positional change in the research and, as a result, I chose words that were everyday terms that honored the experience of the participants instead of looking at them under a rehabilitation "microscope". I realized that the words we use have a positional meaning and are to be used carefully (audit notes). For example, one original category used the term "self-determination" which later became "directing self"

and still later became “negotiating needs” and finally became “navigating needs”. It was at this point I first had the thought that I was really being led by the research and not the other way around (audit notes). I became aware of how I was relating to the data as a rehabilitation professional and as a blind adult which I found quite challenging. I had to throw out any preconceived notion that I fully understood the data and yet rely on the preconceived notion that I did understand. It was a sensitive balancing act between using my knowledge and listening to their story, making sure their perspectives were always visible. Here is where I became a receiver of meaning and not the translator. I learned that in order to translate a message, I had to first receive it in its pure form. Merriam (2009) refers to this as sensitizing. As a beginning qualitative researcher and an aspiring doctoral degree candidate, I learned very quickly that qualitative research was not a “cake walk” as I first thought entering this study (audit notes). Peer reviewers and other independent coders were used but this will be discussed in more detail in the next section. For now, it is important to keep in mind that the categories and content of each theme were confirmed by other investigators.

The process of coding is very tedious especially when there are multiple interviews averaging 45 pages each. Originally I separated the interviews using a word processor but often found this inefficient. My goal was to code each line of text and have it assigned to a category. I spent time looking into already existing qualitative computer programs but eventually decided to custom make a program for sorting data using Access. This is a database application that already exists in the Microsoft Office Suite and it allowed me to use key strokes that I

already used on a daily basis. I worked with an Access programmer and in time had a system that allowed for numbering, reading, sorting and subcategorizing each line of the interview text. Additionally, this program made it feasible to have multiple levels of coding for the same line of text (Merriam, 2009).

Up to this point I have been discussing the inductive part of data analysis but as categories develop and emerge, and text are assigned and reassigned, the process becomes more deductive (Merriam, 2009). Over time categories are combined into others, some are eliminated and, toward the end of the study, one looks for information that supports the master list of categories (Glesne, 2006; Merriam, 2009). When there is nothing new emerging and one reaches information saturation, one has entered the deductive phase (Merriam, 2009). After the first set of interviews, I began looking for a theoretical framework that would capture what I was understanding in the interviews and became acquainted with Snyder's hope theory. Hope theory expanded my perspective on the study and expanded the scope of the study. According to Merriam (2009), "every study is situated in some body of literature that gives you the tools to even come up with a purpose statement and research questions" (p. 184). Since each study has a theoretical framework, it is important that conceptual congruence is reached (Merriam, 2009).

This conceptual congruence happens when the purpose of the study, the researcher's background and theoretical framework and categorized data are compatible (Merriam, 2009). As the results of the initial analysis were generated, it was decided that more knowledge was needed and follow-up interviews were conducted. The participants were contacted and a second round of interviews

were conducted all averaging an hour long again. These interviews were transcribed as well and entered into the database for line numbering, reviewing, categorizing and re-categorizing. Ultimately, there were nearly 7,000 lines of text that were each numbered and assigned into a category. After conducting the second round of interviews and as a result of continual analysis, it was determined that some program observations were needed as well as interviews with staff. The categories or findings based on the interviews, observations and documents/artifacts capture the essence of researcher interpretation and yet, “data often seem to beg for continued analysis past the formation of categories” (Merriam, 2009, p. 189). It was my belief that my interpretation of the data and its generated categories did not tell the whole story and I had a need to link the narrative analysis in such a way that another level of understanding was achieved. Through the use of multi-case displays, I was able to isolate conceptual content and further the reduction of the data (Miles & Huberman, 1994). Additionally, I further refined the concepts by attaching descriptives to the displays that described key adjectives or behaviors associated with the content (see chapter 7 for more detail). One researcher compares the need for more linkage to climbing a mountain where at each level of the climb the view changes and in some instances becomes clearer (Merriam, 2009). The study was answering the question of what happened after the consumers left the residential program but another question still needed to be answered, that is, what was the role of hope in all of it? Here is where I used borrowed themes from the hope theory to further my understanding of what was happening in the lives of the young blind adults (Merriam, 1998). I extended the conceptual content within the

data displays to include pathway and agency thinking in order to understand how hope played a role in the life negotiation of the participants.

VALIDITY AND RELIABILITY

Since much of the vocational rehabilitation field is still dominated by its positivistic values, any qualitative research conducted in this field must apply rigor in establishing trustworthiness and authenticity (Hanley-Maxwell et al., 2007; Merriam, 2009). As previously stated, this study is not about finding causes as in quantitative research but about seeking understanding of a particular phenomenon. This requires questions and techniques different from quantitative research (Merriam, 2009). Additionally, it was mentioned that all research maintains a theoretical perspective; what one studies, the questions one ask, and the results one seeks are all driven by a researcher's framework and complete objectivity is not feasible (Anfara & Mertz, 2006; Merriam, 2009). Keeping this in mind, it is still important that a study is conducted in such a way that others have confidence in it (Merriam, 2009). Qualitative researchers have specific criteria for establishing this confidence and illustrating its validity and reliability or "trustworthiness" (Hanley-Maxwell et al., 2007; Merriam, 2009).

Since this study was conducted as part of a doctoral program requirement, it is first important to acknowledge that the IRB training, documentation and reviews were all met throughout this research process. This study met all IRB requirements and presented no risk to participants. In addition to ethical considerations, qualitative research establishes credibility, transferability, dependability and confirmability as alternatives to reliability and validity (Hanley-Maxwell et al., 2007; Merriam, 2009).

Credibility

When qualitative researchers measure what they set out to measure, they have established credibility (Merriam, 2009). Credibility is present when the findings match what is really there and is equivalent to internal validity (Merriam, 2009). Whether the findings match reality is dependent on the interpretation; the data does not speak for itself (Anfara & Mertz, 2006; Merriam, 2009). In qualitative research, reality is not fixed, it is multi-dimensional and constantly evolving and mostly holistic (Glesne, 2006; Merriam, 2009). Hence, validity is a goal, not a product, it is relative, not proven and its strength is the interpretation of human beings (Merriam, 2009).

Triangulation is a strategy that is used to ensure credibility within a study (Merriam, 2009). Triangulation occurs when a researcher uses multiple data, investigators, methods or theories to confirm findings (Merriam, 2009). The postmodern concept of crystallization recognizes many ways of knowing a phenomenon rather than a static knowing limited to three points of a triangle (Merriam, 2009). In keeping with this concept, I used multiple methods for data collection in this study by first conducting initial and follow-up interviews, coordinator and staff interviews, observations and program documentation for the purposes of cross checking information. Additionally, I discussed the research with several peer reviewers throughout the research process from selecting an appropriate research design to identifying the initial themes. Lastly, I sought their review of the findings. Some of the peer reviewers were familiar with the field of rehabilitation and some were not, some were blind and others were not but all of them received thorough information about the research and every discussion helped me in this process. The reviewers were helpful in

determining whether the findings were plausible based on the data collected. Finally, I used more than one theory to review the data, including hope theory (Anfara & Mertz, 2006; Miles & Huberman, 1994). Though the findings were generated out of the raw data, the main components of hope theory were applied to gain more understanding about the text.

Dependability

The concept of dependability has to do with whether or not the results are consistent with the data and it is the equivalent to reliability (Merriam, 2009). Replication of the findings is not possible when dealing with contextual and multi-dimensional information (Merriam, 2009), however, triangulation, peer evaluation and researcher positionality address this area of consistency and dependability. As already mentioned, there were several peer examiners for this study and crystallization was achieved through interviews, observations and program documents/artifacts. Researcher positionality has been discussed throughout this chapter but the next section will go into more detail. For now, it is important to state that I as the researcher took great effort to critically reflect and process information with the awareness of my world view and position to the research. This is referred to as researcher reflexivity and speaks to the integrity of the researcher as instrument (Glesne, 2006; Merriam, 2009).

Finally, member checks were conducted throughout the research and the original transcripts were shared with the participants as well as the transcripts divided into their initial codes and final codes. This process of establishing credibility was meaningful to the participants as they felt positive about reading

all of the accounts. Furthermore, the transcripts helped them see how much has happened over the years.

I found the participant feedback to be extremely encouraging as it definitely indicated this study had high social validity. Additionally, confirmability of the findings was reached through secondary coders who coded the data and reviewed the findings. Inter-rater dialogue produced consistency within the findings and the debriefing enhanced the dependability since the data was coded by two investigators and reconciled with final review by a third coder.

Confirmability

A strategy I implemented for achieving confirmability was the generation of historical notes called the audit trail (Glesne, 2006; Hanley-Maxwell et al., 2007; Merriam, 2009). Audit notes are basically a researcher's study journal that keeps account of how the research was conducted (Merriam, 2009). This account confirms the research process was inductive and the findings were created by the data itself through researcher interpretation. It creates authenticity within the study when a researcher can talk about how they arrived at their findings.

Transferability

Purposeful non-random sampling and the small number of participants make it impossible to generalize the findings of this study, however, transferability is possible. There is something to be learned from this study and the reader determines how this gained knowledge can be applied elsewhere. This is referred to as reader generalizability (Merriam, 2009). Applying information from this research to other settings is only possible through its thick

description. This gives the reader enough information to make applications to other areas (Merriam, 2009). Instead of generalizations, the reader can make speculations or what is called a working hypothesis – not conclusions, but theoretical examples that can be transferred to a similar area (Merriam, 2009). This study has high transferability as it captures the perceptions of young blind adults facing their lives after a residential program. There are many residential programs across the country and I believe the findings will provide examples that can be applied to this phenomenon. Additionally, transferability is achieved not only through thick description but through what is called participant variation (Merriam, 2009). Each participant in this study has their own unique characteristics and story. They are not all the same nor do they all share the same individual outcomes though they all completed the program.

SUMMARY

This chapter provided a discussion about the design of the study and its beginnings. The rationale for the program being investigated was provided as well as how the cases were selected. Data collection and data analysis were described showing how I met critical issues in research such as the commonly held concepts of reliability and validity. In doing so, I discussed the ways of achieving these criteria from a qualitative research perspective and indicated how transferability, credibility, confirmability and dependability were met. Finally I discussed my positionality as research instrument and highlighted key points for consideration when the reader embarks on this topic of investigation. A few things should be clear at this point. First, there is congruency between my position, the topic at hand and the methods I chose to use in this study. Second,

as a qualitative interpretive collective case study, it has been shown that significant time and rigor was given in its development and completion. Third, it is hoped that the reader will have confidence in this research and find it trustworthy, based on the details provided in this chapter. The following chapter provides a description of the context of the study including researcher positionality, program setting, and individual case biographies.

Chapter Four: Context of the Study

This chapter provides an overview of the context of the study. Readers will be introduced to the researcher positionality, the program setting and a brief biography of the participants in the study. The participants' names will be replaced by pseudonyms in order to protect their identity. Additionally, some editing of the reported content will be done in order to eliminate detailed description that has the potential to disclose individual association with the data. Since blindness is a low incidence disability, the field is small and there is high risk of participant identification. Therefore, great effort is taken to protect the confidentiality of the participants without changing the meaning of the data. Researchers must take care in resolving issues of confidentiality with the ethics of reporting data when conducting research involving human factors (Wolcott, 1994).

RESEARCHER POSITIONALITY

"It is clear that the interpretation of meaning must take place within a context" (Smith, 1993, p. 186). In qualitative research, it is necessary to convey the biases, interpretations and relationship to the topic of investigation. As the primary instrument of data analysis, a self review of professional and personal factors that are influential in the transformation of data is essential to the integrity of the research (Merriam, 2009; Wolcott, 1994). If readers can understand the values and expectations of the researcher, they can understand the research and its conclusions (Merriam, 2009).

Experiences, Biases and Relationship to the Topic

Of all the characteristics that influence my world view, it would be blindness. As a blind person, I rely on adaptive products, work toward an integrated world and participate in a variety of organizations that aim to improve the experiences of blind people. Consequently conducting research centered on the experiences of young blind adults was of high interest to me because I identified with the participants. In addition to the reasons already mentioned in chapter one, I believe the perspectives of young blind adults are under-represented and this particular group of individuals has a lot to offer to the knowledge within the blindness field.

Like the participants in the current study, I graduated from an orientation and adjustment center for the blind. Throughout the series of interviews, many memories came to mind as an uncanny familiarity surfaced in hearing their narratives. I could stand in their shoes because I once wore them, too. Looking back, I remember how the residential rehabilitation program opened the doors to the world in a way I never knew before. For me, attending the residential program was the most life changing experience as I learned for the first time it was respectable to be blind. This insider perspective created immediate connection with the participants and helped me to be sensitive to the things they said, the nuances of the emotion shared, the inflection of their voice, and the moments of silence as they were putting things together and figuring it all out. I had reached "reflexivity" which incorporates the influences that contribute to the understanding and interpretation of the data, the ways in which researcher and participants behave, and the overall development of the study (Glesne, 2006; Schwandt, 1993).

In framing the context of the study, qualitative researchers clarify the theoretical commitments, values and perspectives that influence the findings of their studies (Glesne, 2006; Schwandt, 1993). Values affect what you look for and, consequently, how you describe what it is you "find" (Glesne, 2006).

I do not subscribe to the thinking that reflections do not count as meaningful data. Some believe that it is just a snapshot of an event and not truly representative of what occurred. For some, the only reality that matters is the one that is observed in a controlled environment. In contrast, I know from my own experience and the results of the interviews in the current study, reflections are powerful ways to integrate and understand a series of events from the past. The process of residential training is very intense; it is an immersion experience. I still come across situations that cause me to reflect on what I learned at the orientation and adjustment center, and new awareness and learning emerges. Going through the center training is one level of experience; applying what was learned throughout one's life is another level of the experience. Graduating from an orientation and adjustment program is not an ending but a beginning.

As one lives, learns and negotiates life, the lessons take on new meaning and become more integrated into one's identity if the training was internalized. For me and, as it turned out for the participants in the current study, the reflection on what was learned held significant information. The participants were quite proud of how far they had come:

- "I just can't believe how much has changed over the year or so since I talked to you" (correspondence 6/09).

- “I love what you have done with this. I hope I can see it, when you are all done” (correspondence 3/3/10).
- “Yep, you got it all right and that is everything as I see it too. It is really something to read and look back” (correspondence 5/17/10).
- “‘WOW’ is all I can say!” (correspondence 6/24/09).
- “It’s weird looking back on how I answered those questions then and how I answered them now. It’s as if nothing has changed except the level of my determination has gotten much higher” (correspondence 6/24/09).

Theoretical Orientations, Frameworks and World Views

Qualitative research has been referred to as being laden with theory since theory plays a core role in every step of the process (Anfara & Mertz, 2006; Merriam, 1998, 2009; Miles & Huberman, 1994). Readers might find a discussion of contributing frameworks helpful in understanding my perspective toward the data and its interpretations (Merriam, 1998). I have worked in the field of education and rehabilitation for almost 20 years. My area of specialization was adolescent and career development. My training in systems therapy and career counseling provided me with a wide range of knowledge. I have particularly been interested in the area of vocational development and disability. As a rehabilitation professional, I have been involved with many residential programs for the blind. I spent time with J. Omvig and I, too, embrace the framework put forth in his book, *Freedom for the Blind*, which states that with the right training and opportunity, blind people can strive for an equivalent life as those who are sighted (Omvig, 2002). To my knowledge, Omvig's book is the only one to date that describes the necessity for and components of a residential program for the

blind. His empowerment model was implemented in the program I personally attended. A reasonable explanation for the gap in quality of life between young blind adults and those who are not blind does not exist. If inequalities occur, let it be due to differing motivations, talents and efforts, not the instruction or opportunities available. As one who has had sight and now one who is blind, I do not understand why there is a difference in life expectations and outcomes for these two groups. Yet, there is evidence as previously mentioned in chapter one that there are significant gaps in the lives of people with disabilities and those without disabilities. As a rehabilitation professional, I align with the philosophy inherent within our country's legislation that all can participate. I subscribe to the goals of universal design which is defined as "the design of products and environments to be usable by all people, to the greatest extent possible, without the need for adaptation or specialized design" (Center for Universal Design, 1997, n.p.).

It is the previously stated world view that draws me to grand paradigms within the post-positive arena such as critical theory, symbolic interactionism and interpretivism (Anfara & Mertz, 2006). Additionally, other middle-range theories such as critical race theory, empowerment models such as the one by Omgig (2002), and hope theory are some of the underlying frameworks that influence how I think about things.

Conceptual Context

Whether conscious or unconscious, researchers can no longer avoid nor discount the examination of theory and the role it plays in their research (Anfara & Mertz, 2006). Thus far, I have described significant experiences and theories

that contribute to the conceptual context of the current study. According to Maxwell (1996), the conceptual context connects and interacts with all aspects of the study in a nonlinear, noncyclical way and embodies the "goals, experiences, knowledge, assumptions, and theory you bring to the study and incorporate in the design" (p. 6, as cited in Anfara & Mertz, 2006, p. xxiv). According to Schram (2003), the conceptual context is aligned with theory which can include formal explanations to general ideas that guide action (as cited in Anfara & Mertz, 2006). I join those researchers who assert theory is more than the methods used because theory pervades all aspects of the research in a subtle way (Anfara & Mertz, 2006; Flinders & Mills, 1993; Maxwell, 1996; Merriam, 1998; 2009; Mertens, 2005; Mertens & McLaughlin, 2004; Miles & Huberman, 1994; Schram, 2003; Schwandt, 1993; Yin, 2003).

My conceptualizing of the current study, the identification of what was important to report, and the literature I chose to assist with the interpretation reflect my perspective and relationship to the data. To come to the research conceptualization without any theoretical reference whether formal or informal is to be a blank slate which is impossible. When I conducted the first round of interviews, the wheels in my head began spinning upon interaction with the first participant. Already their responses caused me to rethink what I believed was effective rehabilitation. It was my first example of the data causing me to examine my professional and personal beliefs and consider the adoption of new ones. This interaction between my world view and what I was receiving from the data continued throughout the research process up to the point of submission. The data and the interpretations from the current study have compelled me to

change. Based on what I have read and understood, this is the way it is supposed to happen. As the instrument of analysis approaching the research with my own conceptions, I had to be careful that I was not creating what I wanted to see. Quite the opposite happened; the data forced me to throw out concepts about rehabilitation and expand what I knew in order to be helpful. The research influenced me and, in turn, I influenced the research.

I can confidently assure readers that my conceptualization of the research is not deterministic or reductionistic; it does not fit the data into pre-existing codes or concepts. I was critically aware of my entering conceptualizations regarding the analysis of the data and I explicitly sought another conceptualization that would take me beyond the ideology that could potentially restrain the naturalistic complexity of the phenomenon being studied (Anfara & Mertz, 2006). The data helped me to choose a theoretical framework that provided a language, attitude and flexible interpretation of the data and most importantly, re-educated my perspectives (Schwandt, 1993).

Since data collection and analysis occur simultaneously in qualitative research, (Glesne, 2006; Merriam, 1998, 2009), I was initially already drawn to the ways participants discussed their process of change and adjustment to life before, during and after the residential program. At this point, I had already been reading adjustment literature within the field of rehabilitation for 3 years. It was Dr. Randall Parker, my academic advisor, dissertation chair and mentor who first introduced me to Snyder's hope theory. Little did I know at the time that the work of Snyder would turn out to be a profound influence not only in my research but also in my life. Since I became blind, I was always in search of a

theory that captured the experience of what I had gone through. Though I admired many theorists, none captured my experiences with disability. When I first read the seminal work of Snyder et al. (2006) I felt like I had come home. Finally, here was somebody who understood my experiences of becoming blind and the adjustment to it all.

I did not subscribe to the over-used theory within rehabilitation of Kubler-Ross because for me, becoming blind was not a death, it was a beginning. The work of Snyder was a breath of fresh air, rich in empirical basis, not just an opinion but extensive research with a simple model I could understand. Not only did Snyder's work describe what I had gone through but it described the instruction and support I had received that changed my life in a very proactive way. Snyder's hope theory provided a psychological construct that produced outcomes, was easily understood, was flexible and most importantly, did not require grief and mourning. It is my hope that the current study is the inspiration for more investigation into hope and rehabilitation.

After initial analysis and identification of themes, I adopted hope theory as an alternative conceptualization into the continuing data collection and analysis. Under the direction of Dr. Karrie Shogran, faculty sponsor and mentor during the initial research, I made the transition into using pathway thinking and agency thinking as a way to understand the perspectives of the participants. To my surprise, I later learned that Snyder had lived with a chronic illness and he had recently died. Again, the "Aha!" phenomenon occurred for me as I realized the reason his theory resonated with my intellect and my heart: he understood the issues around living with a chronic condition and the importance of

continuing forward. His theory captures the process of adaptation, and his legacy lives on every time a person acquires a disability and then finds the hope and motivation to go on. Snyder believed hope can be measured, taught and reinforced; his theory is a message of future possibility, the dignity life offers and the purpose for existing that we all want to find for ourselves.

PROGRAM SETTING

One of the most innovative residential programs for the blind is the Post-Secondary Program which is a joint endeavor between the Texas School for the Blind and Visually Impaired (TSBVI) and the Division for Blind Services (DBS) under the Texas Department of Assistive and Rehabilitative Services (DARS). An outstanding feature of the program is the programmatic partnership between education and rehabilitation as both agencies contribute to the staffing, resources and training for the program. Another unique feature of the program is that students live in their own apartments instead of a dorm-like facility. According to the assistant coordinator, "The thing that separates this program from others is that it is a life classroom" (personal communication, April 12, 2010). The post-secondary program provides remedial academic and independent living skills training necessary to meet the needs of young blind adults. It is the need for both academic and independent living skills remediation that make this program an appropriate residential training option for consumers between the ages of 18 and 22. The program was of particular interest to me since I had first hand experience with it when I worked for these agencies as a program specialist many years ago. Additionally, the consumers entering the program represent a developmentally homogeneous group with similar levels of experience and independence. It is not

unusual that I would be interested in this program and according to Glesne (2006):

Currently, many researchers are drawn to studying their own institution or agency, to doing backyard research. Doing so is attractive for a number of reasons: They have relatively easy access; the groundwork for rapport is already established; the research would be useful for their professional or personal life; and the amount of time needed for various research steps would be reduced (Glesne, 2006, p. 31).

The PSP serves all of Texas although it is located in Austin, and many of its consumers relocate to attend the residential training program. The program serves four students at one time and there are two staff members on the premises of the apartments, one coordinator and one assistant coordinator (communication with coordinator). Since the participants in this study have already graduated from the program and no longer live there in the apartments, I thought it would enhance the data for this study to actually observe the program in operation.

I made a few informal visits to get a grasp of the environment and the setting. Being blind, I had a "reader" with me to visually describe those things I was not able to see. For people not familiar with the concept of using a "reader" to access information, I will provide a brief explanation. People who are blind access information through many methods including electronic documents such as Word or PDF files, audio files and CD's, Braille either through a mechanical display, note-taker or paper documents or books, scanning print materials and many other sources beyond what I have mentioned here. Sometimes a blind person needs to rely on the eyes of a sighted person to access certain information or to do so more efficiently. In cases where blind people hire a sighted individual

to “see” for them, this tool is referred to as relying on a “reader”. Using a “reader” is basically relying on the visual description or reading of a sighted person. It is important to understand, though, that the “reader” does not think for the blind person, nor does the “reader” edit or do work for the blind person. A “reader” is a trusted and trained tool for seeing some necessary information that is not available in another way. For example, blind people may use a “reader” for accessing an article that is not easily scanned, a film that does not have sound, the layout of a setting or a family photo.

In this situation, I had a “reader” describe the details of the setting, using descriptive language but without their personal judgments. I directed the descriptions based on what I wanted to know and directed the observations through questions about the setting. The information the “reader” described to me about the PSP setting was based on the things I wanted to see. The description of the setting was not something that another person wanted me to see, so readers of this study can be assured the description of the setting is indeed of my own observation without influence of my “reader’s” opinions or judgments. This was important since I was both the researcher conducting the study and the observer.

Location and Exterior of the PSP Building

The PSP building is on the northeast corner of the campus of the school for the blind (TSBVI) though it is not inside the fence that surrounds the campus. The apartment building is in a neighborhood that has both residential living and state buildings. A major bus line runs along the main street on the north side of the building and is accessible through a connecting sidewalk. When I first

entered the parking lot of the apartments, the entering vans caught my attention. Other vehicles from the school park behind the building as well with people coming and going which made it feel less isolated. The people getting out of the vans were energetically talking and from an outside view, seemed engaged in whatever it was they were coming from or going to. I walked around the premises of the apartments which had easy access from a sidewalk that surrounds the building and leads to the entrances of the 4 studio apartments.

The reddish stone building with sage siding is surrounded by grass and shrubs, like catnip and a mulberry bush among other species unknown to me. The south side of the building faces the parking lot and is where the entrance to the office is located. When I entered the office, the room had a cool airy feeling. There is a single corner-shaped desk with a computer on the left followed by a four-drawer filing cabinet and some shelves. There is a four month planner board sitting on top of the filing cabinet. In front of the desk, in the corner next to the window, is a small refrigerator and microwave. On the right side of the room there is a love seat facing the desk and another two-drawer filing cabinet. This space was shared by the coordinator and assistant coordinator. It is also the room where the student goal setting and planning meetings occur with the PSP staff. When sitting in on the planning meetings, the room did not feel as airy as when I first walked in. I felt crowded during the meetings as I shared the sofa with the students at the same time, I felt like one of the students as the staff sat on their desk chairs facing us. There were differences in height and I wondered if the students felt like I did sitting there with the staff looking down toward us. During the meetings, I did feel more comfortable than sitting in a business

setting with a more formal atmosphere. The comfort of the room seemed to encourage open communication. The throw rug in the middle of the room, the sage green room colors along with the refrigerator and corner bathroom made it feel more like a living room than an office. In feng shui, green represents healing.

From the sofa to the right is the doorway into the common room which is connected to each of the four apartments by an exterior secured door. This room contained the shared technology for the participants, a washer and dryer and a supply cabinet. Since there are no windows to this room it felt cooler and more spacious with the live acoustics. Students can come and go in the common room and in the office as they want. The door between the office and the common room usually stays open and is always unlocked. It seems to be a perfect introduction to independent living; each participant has their own studio apartment and access to neighbors or staff is just a short distance from their back door. It is the best of both worlds, independent living with the support of other students going through the same experience.

Observations of the PSP Setting

As a part of DBS, the rehabilitation center (CCRC) works to provide students with the core skills necessary to achieve successful outcomes. These core skills were identified by the DBS staff as being essential for the confidence and competence necessary to live life and work independently (PSP coordinator, personal communication, June 26, 2007). Additionally, the PSP objective grid (PSP coordinator, personal communication, October 27, 2009) is consistent with the core skills of DBS. It is apparent that both agencies on paper identify similar key goals to work toward in the program. The PSP building is situated between

both agencies and students plan their schedules accordingly. The PSP staff work with the students to plan their goals, schedules and develop a program to meet their needs. I observed two students at the PSP on different days. They were planning their schedules, making arrangements for the following week and reviewing previous goals with the PSP staff. These meetings were student-led and arranged by the students. The PSP staff played a supportive role, offering suggestions, feedback and summarizing what the student stated about achievement from previous goals. They were very positive and offered praise and affirming feedback to the students as they planned and reviewed their progress. These meetings occurred in the office located at the PSP and, though the meeting had structure, it was held in an informal discussion type setting. During an informal observation, I watched as a student headed out of her apartment. She walked briskly and assertively and moved with ease without dragging her cane. She had a sense of purpose as she hurried along to the office. No doubt she was heading for a meeting but took care of the trash along the way. I heard no hesitation in her moves and she appeared quite confident as she moved with intention (audit notes).

During another observation where I was in the staff office, I observed students gathering in the common room and making plans to head out down the street to one of the local fast food facilities. It was late in the afternoon and after a long week, the students were ready to go out and "kick it" as one of them said. I watched as two students approached the third and invited her to join them. They all seemed very able to make plans and just go out to do what they wanted to do without hesitation about who would take them there. Clearly they were going to

walk to the restaurant. Not one time did any of the students seem hesitant or lack confidence to achieve this task. I was observing as they all sort of urged each other on in a sense of excitement – they were even a bit hyper. This is what I would expect to see from young adults hanging out on a late Friday afternoon, and so it was pleasing to see that they just made plans and "kicked it" – with no hesitation or limitation of their lack of skills or self consciousness over being blind. There was definite group camaraderie (audit notes).

PARTICIPANT BIOGRAPHIES

The following brief descriptions are profiles of the 7 participants in the study. As previously mentioned, all of the participants completed the program. These students attended the PSP because they were in need of both academic and independent living skills training. Finally, these students are all legally blind and at the time of attending the PSP, they were all active consumers with the VR services for the blind in Texas – DBS under the Department of Assistive and Rehabilitative Services. At the time when the interviews were conducted in the fall of 2007, there had been 3 different coordinators for the PSP since it began in 2002. The participants represent training under these coordinators and represent each year of the program from its beginnings. Since the fall of 2007, there have been 2 other coordinators serving the program. The assistant coordinator was hired in 2003 and has been working at PSP until present. Table 4.1 displays a summary of the biographies.

Participant interview	1	2	3	4	5	6	7
Participant pseudonym	Shea	Jessie	Harley	Casey	Pat	Lee	Terry
Adventitious / Congenital Blindness	congenital	adventitious	congenital	congenital	adventitious	congenital	congenital
Usable vision	yes	no	yes	no	no	no	yes
Completed PSP	yes	yes	yes	yes	yes	yes	yes
Post-secondary education or training	dropped out of college	in college	finished technical training, some college	in college	no college attendance	in college	no college attendance
Employment status	not working	not working	not working	not working	working toward self employment	occasional performing & teaching	working
Living status	with family	with roommates	alone	with roommates	with roommates	with family	with family
Preferred reading format	print	braille, audio	print and audio	braille, audio	audio	braille, audio	large print
Relies on a cane for travel	Only at night	yes	yes	yes	yes	yes	no
Community involvement	no	no	no	no	no	yes	no
Relies on non-visual ILS techniques	no	yes	yes	yes	yes	yes	no
Uses adapted technology	no	yes	yes	yes	yes	yes	no
Involved with support groups	no	yes	no	no	no	no	no
Has 5 & 10 year goals with pathways for getting there	no	yes	yes	yes	no	yes	no
Would recommend program to others	yes	yes	yes	yes	yes	yes	yes
Would you consider yourself independent?	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Would you change anything in the PSP?	Yes, let participants have pets in the apartments	No	No	No	No	increase community integration	make more opportunities for students to get work experience, help them find jobs
Did you miss anything during your time in PSP that should have been addressed?	No	No	No	No	No	budgeting instruction at the beginning	No

Table 4.1 Participant Profiles – Initial Interview

Interview 1: Shea

Since leaving the program, Shea has lived at home and is not working. Shea is not involved with any education or training program. For a brief time, Shea lived alone after attending PSP but moved home when the bills got out of control. Shea tried some college but when they did not provide necessary modifications on time, Shea dropped out. During the time at PSP, Shea had a job but was fired. Shea still wants to know the reason but believes it is because of being visually impaired. In 5 years Shea hopes to be working in a family business selling security cameras. In 10 years Shea hopes to be living in a house.

Shea spends most days at home. Leisure time includes watching TV and drawing video characters on the computer. Shea intends to send in the drawings to a video company when the confidence emerges and hopes they will have a job offer. Shea is not involved with community activities or groups and does not volunteer anywhere. Since there is no special transit for people with disabilities, Shea finds traveling in town challenging. Shea reports being a loner and does not currently have any friends in town. Socialization includes going to Walmart and the hunting lodge with family. Despite living at home, Shea reports being independent and in control of life and decision making. Shea does not use any of the alternative techniques learned at PSP but does use a cane at night for traveling since it is hard to see. Shea recommends the PSP for others since it helps people to become more independent.

Interview 2: Jessie

Ever since leaving the PSP, Jessie has lived with roommates. Jessie attends college and does not work or participate in any groups or volunteer experiences.

In 5 years Jessie hopes to obtain a degree in marketing and in ten years hopes to have a Master's Degree and a teaching credential from the University of Texas where the academic program of interest is located. Jessie had a job and attended college before becoming blind. Jessie relies on alternative techniques learned at PSP and attributes current success to the program. When not studying or cleaning house, leisure activities include watching TV and hanging with friends who are both sighted and blind. Though the town offers special transit for people with disabilities, Jessie prefers to rely on family or friends and hires drivers when it is more efficient. Jessie uses "readers" for college tasks and adaptive technology. Jessie would recommend the program to others because it was a time of laughter, learning about blindness and gaining inspiration. Jessie reports it being the best time in life. Jessie is interested in finding work and is networking with friends and staff on campus to find a job but thinks the town is closed-minded about blind people working.

Interview 3: Harley

Harley has lived alone ever since completing the PSP. Harley attended college and a technical program. Harley uses the alternative techniques learned at the PSP but rarely uses Braille. Harley relies on a screen enlarger and a screen reader like JAWS. Health issues have been a problem but Harley is recovering. Currently Harley is looking for a job in a field related to previous training. Harley is filling out applications and going on interviews. After achieving the goal of finding employment, moving into management is the next goal with hopes of combining travel with work. Leisure activities include traveling, hanging out with friends who include both sighted and blind people. Harley

would recommend the program to others because it is the best of both worlds: education and rehabilitation.

Interview 4: Casey

Casey has been living with roommates since leaving the PSP and is attending college. An apartment locator assisted in finding an apartment close enough to walk to campus and other stores. Five- year goals include finishing a degree and transferring to a university. Ten-year goals include obtaining a music degree and owning a music studio for teaching. Currently Casey is not working and has never worked, but did do some volunteer work during attendance at the PSP. Casey was recently diagnosed with Attention Deficit Disorder (ADD) and has been taking developmental coursework. The current semester is the first time Casey is taking college credit courses and reports it is going very well. Previous semesters were challenging because of time management difficulties and getting things done. Many books about college students with ADD have been extremely helpful and Casey has been finding out about a variety of strategies for success in college. Casey relies on alternative techniques for many areas such as travel, cooking and cleaning. A Braille note-taking device is used for accessing course materials since getting Braille materials on time is not reliable. The Braille note-taker helps Casey be in control of completing assignments and course deadlines. Casey is not involved in any community or volunteer activities, or any other clubs or groups. Leisure activities include talking on the computer, watching movies and hanging out with friends. Casey reports not having a lot of friends but has both sighted and blind friends. Most days are spent doing school work and practicing on musical instruments. Private piano and voice lessons take up a

lot of time. Casey would recommend the PSP program since it was helpful in gaining confidence and learning to live life independently.

Interview 5: Pat

Pat moved home for a bit after leaving the PSP and then moved out with roommates. Through looking around and networking, Pat found a place to live. Pat had some work experience during time at the PSP. Pat reports trying to establish a sales business under a family company. Pat is learning web development and intends to set up a business web site. Pat did not attend college but took technical computer courses. Pat is qualified to take the Microsoft certification exam for desk top publishing but reports procrastinating on taking the exam. Five-year goals include becoming a stone broker and establishing a business, since the family business already has lots of contacts in the field. Pat imagines a business where people would make contact with the business since it would sell all types of stones. Ten-year goals are unimaginable at the current time for Pat. Pat uses adaptive technology such as a Braille note-taker and the screen reader JAWS. For fun, time is spent on the computer and hanging out with friends and just being there with family during deer hunting season. Pat also uses alternative techniques for traveling, cooking and cleaning. Though the town has special transit services for people with disabilities, Pat prefers using friends and hiring drivers to get around because it is more efficient. Pat would recommend the program to others since it is a good way to test oneself. According to Pat, the PSP is like living on your own but not totally because there is support.

Interview 6: Lee

Since leaving PSP, Lee spent time looking for work and decided after several months to go to college. Lee plans to set up a business web site to advertise music lessons. Lee plays music and teaches casually a few times a month. Lee began to play for money during the time during the PSP and has continued ever since. Lee tries to apply the skills learned at PSP. Currently, Lee uses the skills from the industrial arts course to repair instruments. In 5 years Lee wants to have a thriving music business and do some part-time political analysis. In 10 years Lee wants to own a building where a variety of music services can be offered. Lee also hopes to own a house. Lee teaches and plays by ear and is currently developing a web site for this kind of instruction. Lee does not read Braille and doesn't believe in Braille music – not in replication of music for replication's sake. As a result, Lee's major in college changed from music to political science with a minor in audio production and sound engineering. Lee relies on alternative techniques for traveling, cooking and cleaning. There is no bus service nearby and family and friends provide rides but Lee reimburses them for the cost of gas. Lee relies on adaptive technology. Lee participates in the young adult campus ministry, is a member of the local music society in town and volunteers with the homeless outreach at church. Lee would definitely recommend the program to others but says it requires self motivation and discipline.

Interview 7: Terry

Since leaving PSP, Terry has lived with family. Initially Terry moved in with parents, and then with a brother and his family in order to be closer to

work. Terry currently works as a customer service representative for a national company. In five years Terry does not want to be working in this job but would like to work in the clerical field. Terry is also engaged and hopes to be married and relocate to another town in a few years. A job placement specialist provided assistance in finding the current job. Terry has never attended college and currently does not participate in any community groups or volunteer experiences. Terry participated in a church group for a bit when living at home. Since moving in with a brother and his family, the church group is too far away for Terry to participate. The only alternative techniques Terry uses are to check if counters are clean by touching them. Though Terry knows how to read Braille, large print is the preferred mode of reading. Terry does not use a cane or adaptive technology. Terry does enlarge the font on the computer screen, reads large print, and uses a regular pen for writing things down. Terry has sighted and blind friends. Terry would recommend the program to others since it was beneficial – it can help people to be more independent and confident.

SUMMARY

This chapter provided an overview of the theoretical and conceptual framework underlying the current study. A description of the PSP setting, informal observations, and a review of important documents revealed clear and consistent goals between both agencies. In addition, the staff appears to support the objectives toward student independence. Finally, participant biographies were provided to give the reader an overview of the participants in this study during the fall of 2007. The following chapter begins to discuss the findings based on the categorical data from the initial interviews conducted in 2007.

Chapter Five: Initial Findings

INTRODUCTION

This chapter begins with a discussion of qualitative research findings followed by the summary of the findings from the initial participant interviews. Additional reference is made to the staff interviews, program documents and observations for purposes of crystallizing the data.

In qualitative research, the findings refer to the "outcome of the inquiry" and embody what the "the investigator learned or came to understand about the phenomenon" (Merriam, 2009, p. 247). Though qualitative research findings are reported in a variety of ways, it is important to keep in mind that there is no "right way" of presenting data when reporting findings: "There are no 'true' representations" (Glesne, 2006, p. 193). The findings are a reflection of the researcher's style, though tending to the readership is important (Glesne, 2006; Merriam, 2009). Increasingly, qualitative research is often thought of as an art as well as a science (Glesne, 2006; Merriam, 2009). Qualitative researchers report findings through a variety of media including poetry, drawings, drama, film, fiction and many more representations of data as one could imagine (Glesne, 2006; Merriam, 2009).

The findings of the current study are organized in a more traditional fashion. Conceptual typologies, which were generated from the interview data, are illustrated through a discussion of themes and their associated sub-themes (Glesne, 2006). This is a more common approach to reporting data among neophyte researchers (Merriam, 2009). Conceptual focus can be facilitated by further reduction and analysis using data displays to capture reoccurring

thematic concepts which are centrally ordered (Miles & Huberman, 1994). When using multicas e displays, "the aim is to be more conceptual, seeing main trends across the cases" (Miles & Huberman, 1994, p. 184).

The findings in this study were achieved through a process of further data reduction and analysis using multicas e displays (Miles & Huberman, 1994). The four themes which emerged from the data and their two associated sub-themes will be described in this chapter. In addition to the descriptive reporting of the current findings, tables and charts are used for further illustration of information. One additional category, the extraneous theme, was designated for data that were not included in the findings and will not appear in this chapter. The extraneous theme contains data that were considered redundant or not significant to be included with the abstracted data. Table 5.1 illustrates the conceptual findings of the current study.

Theme	Sub-theme
Cultivating Confidence	Developing Self-Concept Learning from Others
Implementing Independence	Incorporating Skills Pursuing Vocational Options
Navigating Needs	Dealing with Barriers Responding to Expectations
Setting Goals	Envisioning the Possibilities Taking Action
Extraneous	None

Table 5.1 Conceptual Findings

Some themes are larger in content due in part to the importance it had for the participants. The participants had more to say about some topics than others, which in itself is an interesting phenomenon that will be addressed later. These themes with more data than other themes provide insight into the participant perspective. As a result, the themes will be discussed according to the size of the content in descending order. Figure 5.1 is a chart depicting the themes according to percentages of content by word count in the narrative data.

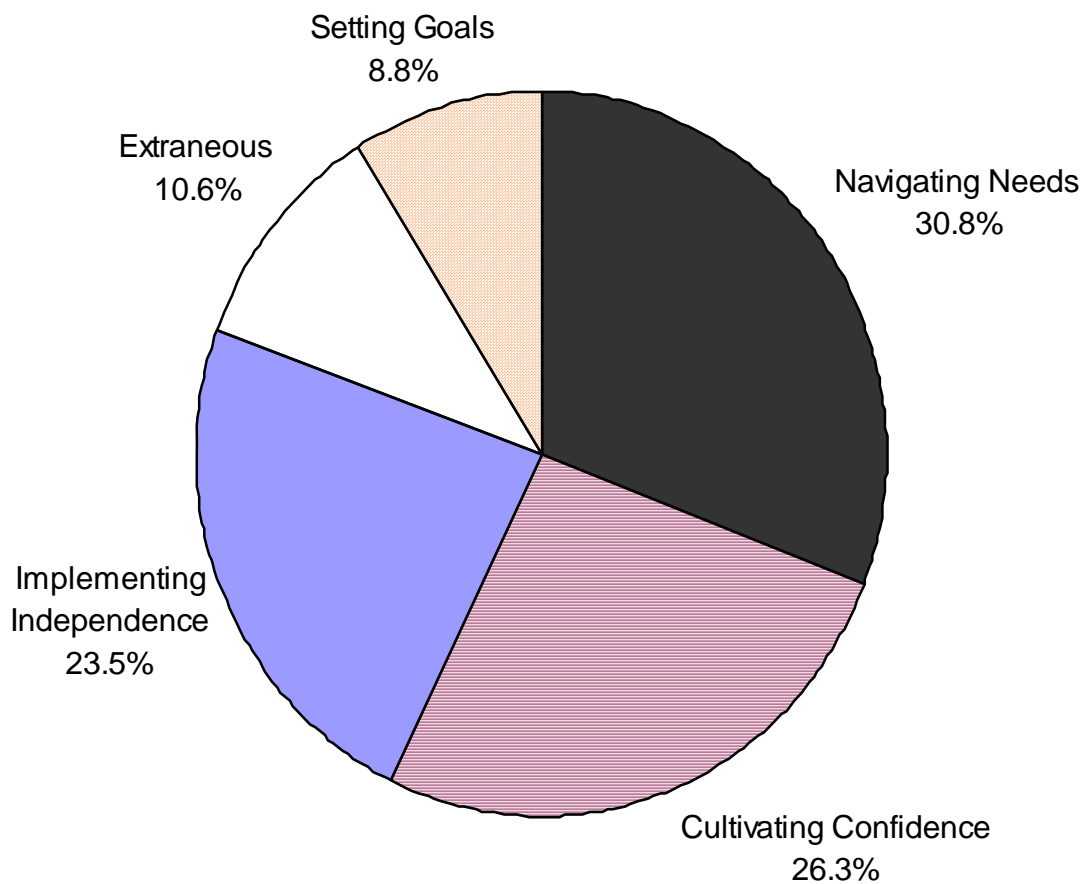


Figure 5.1 Theme Content in the Initial Interviews

THEME: NAVIGATING NEEDS

During their residential training, student progress is measured using the PSP objective grid (PSP coordinator, personal communication, October 27, 2009). The grid measures student progress in their ability to take initiative in getting needs met. For example, how effective they are at identifying needed services, additional vocational training and resolving conflict are behavioral examples found on the grid. Additionally, the student handbook supports the idea that students are in the program to learn how to meet their needs. According to the student handbook (PSP coordinator, personal communication, November 1, 2010), the stated goal of the program is to meet the individual student's needs. During my observation at the program, the assistant coordinator emphasized one of the unique features of the PSP is the student directed programming: the students set their schedules and designate goals and the steps for meeting them. It is no surprise that the theme "navigating needs" emerged as the largest topic within the first round of interviews. The perspectives of the participants were congruent with the stated goals of the PSP.

Sub-theme: Dealing with Barriers

Across the cases, dealing with internal and external barriers emerged as a commonality among participants.

Internal

Participants talked about how they have changed personally since the PSP. For some, it was a process of changing internal barriers. "I learned how to talk more. . . . I used to be very shy . . . but I am still working on it. If this would have been back then before the program, I wouldn't have done this interview."

Some participants talked about how difficult it was to ask for help and through PSP, asking for the help one needs became easier.

I don't have much trouble with [issue] any more, but one thing I had a lot of trouble with was asking for help. I learned that you know if you work with others you can learn to be in control and, you know, that things can get done. And so once I started to realize that, then it just kind of all came together. . . . I used to have a lot of problems going into the tutoring lab at the college and asking for a tutor, [or] doing things that are not fun at all or that can be challenging. . . . It's important to do all those things.

These two examples exemplify the courage these participants chose to exert in their life situations. At some level, they have learned to be comfortable with the uncomfortable and to increase their stamina in facing life through meeting their needs.

In contrast, another participant who also had difficulty asking for help didn't deal with these issues during attendance at the PSP and, in fact, reports distancing from the program:

During PSP I didn't ask a lot of questions because I was afraid I was supposed to know this stuff already. . . . It's the fear of failing to learn from your failures that you should be worried about . . . and I am constantly reminded of that. . . . It really wasn't until after [PSP] that I really started to change things around. That awakening didn't really take place overnight. . . . It happened afterwards.

Some of the internal change that occurred as a result of attending the program had to do with how one self-corrects in approaching situations. "I kind of learned it from being at Post Secondary. If I can't do it this way, and I keep doing this wrong, doing it this way, then I gotta kind of turn around and try it a different way." Yet in contrast, even after attending a program like PSP, some participants seemed to continue their internal views about blindness and

ultimately themselves: "You know, me having a visual problem, I can't drive, so . . . Yeah, I think because I'm visually impaired I can't get a job that easy." For this participant, the internal barrier of deficit thinking still exists.

External

Overcoming external barriers was another common trend in the interview. Some participants took responsibility for creating the changes they wanted.

There are a lot of things that have happened, at my college campus that have never been addressed, because no one has addressed them. But I was addressing them. . . . I wasn't rude; I just went in and said "Hey, you know, this needs to be fixed. You know, just because there's another place you can go doesn't mean you can't have it here."

Overcoming barriers in higher education such as transportation, access of materials and classroom modifications seemed to resonate among the participants. "I was like, 'I really gotta figure something out, because, you know, I gotta get to college and [transit for people with disabilities] is not happening.' So, I've hired drivers, and readers, and stuff through the college." In contrast, some participants let these barriers determine their educational choices: "They are supposed to enlarge my papers and have it ready when I got there, but I guarantee you when I walked in there, it wouldn't be. But 25 minutes later I'd get that, you know? . . . People down there [at the college] weren't really cooperating with me, so, so I just got out of there."

One participant changed majors a couple of times because of barriers to accessing coursework. In particular, this participant did not read Braille which was a skill necessary for the major of choice. In some ways, this internal barrier

created the external barriers in education, primarily, limiting the choice of majors.

I was going to be a music major. But that fell through, because of my beliefs as far as music and I'm not one to compromise because of my passion for music. And so I left the music department and I went for a business major. And business, as I found out, was not exactly something I wanted to be in. . . . A lot of time there's too much politics involved with that, requirements involved in getting a business degree. It's kind of political. So I left that, and ironically, I went to political science which isn't as political in its degree methods as the other academic studies.

Problem-Solving

In looking at problem-solving approaches, some participants have a clear philosophy to meeting the challenges of internal or external barriers.

If there is something that does get in the way, I am very, very firm on finding a way around it. I think there are ways around everything, even if there are barriers in the way. I think if you approach things right and you talk to the right people, you can get around those and achieve any goal you want.

Similarly, one participant describes it as, "I try to find a way over them, or around them, or, you know, try to figure out the best way to get through them." And still another states, "I try very hard to not let anything get in my way. Instead of seeing it as a problem, I do my best to come up with the solution to fix it." In contrast, one participant takes a very opposite approach to problem-solving barriers: "You're not going to cooperate, then I'm not going to cooperate." Some take a more careful approach to meeting barriers, "I do have to reflect on things . . . you know, before I do it. I have to weigh the risks involved," while another falls back on family for direction: "For that, I get help. The brother I'm

living with right now . . . is the one that I ask help when I need something or I just need to talk to somebody."

Sub-theme: Responding to Expectations

The similarities across the cases focused on how participants interact with others including parents, the PSP staff and others. Expectations for oneself also emerged as an interesting topic.

Parents

The navigation of parental expectations emerged from the interviews with a lot of energy around the topic. According to Smart (2001), dealing with parental expectations is a common trend in disability research. Many individuals with congenital blindness report their parents had low educational and vocational expectations for them. Parental expectations before and after the residential training had tremendous influence on the participants' decisions. As one participant stated it, "I don't know if it was overprotectiveness or me just not wanting to say, 'Hey, let me try that.' I just never wanted to."

Across the cases, participants shared a similar perspective on the motivation for attending the PSP. They did not have the ability or confidence to live independently. This was a crucial turning point for participants since the parental expectation often was that they would stay at home even after attending the program. The PSP helped some participants learn how to navigate this common expectation in a proactive way. Making the decision to move out and not live at home was not always a popular one for parents, but some participants learned to deal with the disapproval: "After PSP, my whole family was like really

upset when I chose to move to [my town] instead of moving back home. . . . They don't like it, but they are supportive."

In contrast, other participants made the decision to move back home for financial or convenient reasons. The decision to move home was apparently conflictual since maintaining independence was of utmost concern returning to an environment where independence was not previously established. One participant described it during the initial interview as follows:

I still tell them what I want done and how I want it. . . . I told them if I move back home, you'll have to follow a few guidelines . . . you know? Leave me to myself. Let me do what I want, don't tell me what to do and all this other stuff. I like my independence to know what time I need to go to bed, what time I need to get up and I don't need to be told what to do all the time.

Attending the PSP changed the lives of the participants and in turn, it changed the way some parents had to respond to their blind son or daughter. It was a tremendous systemic change for everyone. As stated by one participant,

Well, I think had it not been for me getting into the program and getting all the assistance, especially with mobility training, I'd still be living at home. I had basically no travel experience without somebody taking me somewhere. When I was growing up even though things I would want to do were right down the street, I would still have somebody take me. That was not necessarily by my choice, but it was also an adjustment for my family as well. They are still having to learn to let go a little bit especially when I tell them I am traveling out of state!

Participants were aware of the choice they had to make – stay at home and live according to someone else's expectations or make a decision to begin living life according to their own expectations. They could have succumbed to the pressure to keep the status quo but instead took a step toward independence,

toward their own lives. The PSP helped them to change these familial dynamics but it didn't happen overnight. The process of change happens over time and navigating needs in response to parental expectations continues even after completing the program. This is why some specialists in the blindness rehabilitation field speak about the need to make an emotional adjustment to their blindness. Living under the low expectations of others forces one to suppress their own drive for life (Wright, 1983), as evident in one participant's description of the change process:

Independence came little by little. I have the type of parents that they just wanted me to be at home and pretty much not do anything and there was a time I didn't do anything. They also wanted me to be with somebody I didn't want to be with. At that time, I guess it was like a depression. . . . All those things were happening and I didn't want them to any more. Taking the first step from there [PSP] . . . I realized that I could make decisions on my own. I could do the things I wanted to do. And that I needed to do.

According to Seligman (2002), the best buffer against the tribulations that put young people at risk for depression is to nurture their strengths and competencies. This is achieved through developing interpersonal skills, work ethics and future mindedness. The PSP assists students to navigate the necessary parental detachment in a healthy way. During their time at the program, participants report being concerned about their families not keeping up with the changes they themselves were going through. They were concerned that though they were becoming more independent, families would still respond to them with the same low expectations as before the program. During one of my observations, I observed the coordinators coaching a student on how to update parents on her progress and goals in such a way that the parents could be

informed about her changes and development of independence. Additionally, keeping parents in the loop of the program process would minimize the parental anxiety that is most likely to occur when their son/daughter is away from home living on their own. Learning how to navigate needs includes knowing how to interact with parents especially when, in the past, one had a role of being a dependent child even into adulthood. Since the PSP is a "life classroom" according to the assistant coordinator, it makes sense during the program that students inform parents of their progress and move the interaction along a new direction keeping the lines of communication open and positive. This is effective only if the air of communication is one of information and not permission. The participant is not responsible to take care of a parent's anxiety through suppression of their needs in order to elevate those of the parent. What better way to learn to inform parents of what is going on than while being surrounded by an affirmative environment encouraging independence. The PSP is providing students with an opportunity to practice with the hope it will continue afterwards. In the words of one participant,

A lot of the good things I think that came out of it [PSP], came about because us students spoke up and said "I think we should do this" – for example, the parent weekend that happened. . . . All the students that were there were concerned our parents would never understand why we wanted to move out on our own instead of coming back home. And so I think that was a great new added on thing that we put in there. . . . They [the staff] were willing to work with us, to figure out a way to make it so that not only we students benefit from the program, but the parents do. Because we are able to teach our parents, you know, we are able to take charge and show them all the things that we have learned from that program. And I think that's a great thing. . . . It's a great program. . . . When I was graduating, all the stuff I had to do – that was kind of

difficult. I always had the instructors to fall back on, and I would always think . . . "Well, why are they having us do this certain thing, and saying things that my parents didn't approve of so that I would be able to get the best of my life?" And that was difficult because that involved going against how I was raised.

During one of my observations, parents were attending the PSP on the first night of the parent weekend. As I entered the building, the aromatic smell of the dinner filled the room. This night was the dinner hosted by the students. They made the food and set up the facility for an evening with the parents. This took place in one of the apartments. The atmosphere was casual and comfortable. The new staff were friendly and the overall feeling I had was a feeling of warmth and openness. It was a time for the parents to begin seeing their son or daughter in a more independent role – one of leader, one of adult, one of competence. The energy was electric and I felt very enthusiastic being there yet I didn't want to interfere with such a special occasion. During my visit, I chatted with one student who was finishing the program that night; it was his last day in the program. He said he came to the program to learn to be independent. He wanted to learn to cook, clean and travel as he needed to. He also said he didn't feel like he was independent before attending the program and though he felt a bit nervous about moving out on his own, he believes he is ready to move on to the next venture of his life. As we chatted, I noticed his confidence, his sense of ease with himself, and his openness to share what he had learned there at the program. His story made me smile because like he did, I also knew he was ready. He had an honest sense of himself, a future direction based on his own initiative, and he was preparing to move into his apartment and start college. His story was ever consistent with the stories of the participants in this study. The issues

seemed very familiar and like they, he would highly recommend the program to other students who want to learn how to be independent by working hard. He also mentioned how hard the program was on him and that it taught him to rely on himself – not an easy lesson for those who grow up with the barrier of low expectations.

The PSP

The PSP was student driven in its approaches and, according to participants, it made a difference in the way they viewed themselves and the world around them. According to Omvig (2002), society (which includes the family, education and rehabilitation system) is full of misunderstandings and misconceptions about blindness. The residential programs for the blind must be "attitude factories" since blind individuals often internalize these erroneous ideas about blindness themselves (Omvig, 2002). Achieving this emotional adjustment that Omvig talks about comes with a price, and that price is hard work.

The participants often referred to the PSP as one of the hardest things they had to do. The PSP had high expectations for participants and basically being a "life classroom" meant learning by doing. The participants had to live their lives and function on their own, keeping up with a varying schedule which included some form of independent living classes, academic classes and at some point work activity. Across the cases participants found this difficult, but some rose to the occasion and internalized the PSP expectations for themselves. Instead of doing things for somebody outside of themselves, they saw the importance of the tasks as being significant for their own benefit: "There was some stuff that . . . I didn't really want to do but I am glad I did." Recognizing the importance of hard

work was meaningful for some participants. "I didn't really like the whole inspection every week but it is helpful."

In contrast, some participants seemed to resist the opportunity for independence through hard work. For them, the demands of the program were too overwhelming: "After classes we had to do the independent thing . . . like cleaning, or the volunteer type job. . . . It was just too much." It seems like the "independent thing" was some task out there that had to be done, not something within the participant that was embraced as a personal value. Still, others seemed to struggle with the internalization of program expectations. "All of the independent training programs I had been through . . . do the same things. I still don't understand it." One participant appeared to be resistant to the benefits of the program opportunities for independence since hanging out with friends was a greater priority. "There were times they wanted me to do some stuff and I didn't want to do it so . . . I had to step up and tell them, 'no'. I had plans with my friends. I told them 'no'".

Still another participant spoke of the barrier of too much prompting. "I was being reminded so much of what I needed to get done, that in some cases it would just make me want to totally stop out of frustration." It is difficult to determine through participant reflections whether this was a case of micro-managing on the part of the program or a case of blaming as a defense mechanism against the demands of living independently. As one participant stated it previously, independence comes little by little – especially when you are expected to not do anything. It is not surprising to find resistance among cases,

because the PSP is holding participants to standards never held before. That standard is independence.

Others

Navigating needs not only means responding to expectations of parents and the PSP, it includes responding to expectations of others. Participants describe how expectations of others impacted them. For some, the permission of others made it okay to be self-directed: "[My friends & brothers] told me I didn't have to do like what [others] told me just because certain things happened." What others think seems to be more important to some participants as they feel responsible in the interaction to influence what others think: "The first thing right off the bat that I need to do . . . is to educate. If I don't educate, I have failed. I have done myself and the other person a disservice." One participant discusses how the lack of reciprocity in friendship impacts self-esteem. The inability to contribute is internalized as beliefs about oneself instead of being externalized as erroneous beliefs from others: "I felt like a burden because [my friend] had to drive me around everywhere."

In contrast, some participants notice the opinions of others and it does not make a difference in what they do or how they think of themselves. "A lot of people aren't going to accept you being blind and that you know is something you have to deal with but if you deal with it right, then you can get what you need done." For these participants, they recognize the social misunderstandings of blindness and they have detached from it. "The people in [my town] think we should all stay at home and, you know, do nothing for ourselves. So I am trying to make revelations for [my town] and I'll be like, 'Look, I can do this.'" For some

participants, the expectations of others were important, while for others not so important in the navigation of needs.

Self

According to Omvig (2002), residential programs help their students internalize a new constructive and positive attitude toward themselves as blind people. As a result of attending the PSP, participants reported changes in their own expectations. For some, it was the beginning of a new realization of freedom. "After PSP I realized I could make decisions on my own." Others found meaning through comparison to less independent blind people. "Some of my blind friends . . . just do nothing for the rest of their lives. . . . I like to be busy." According to Omvig (2002), empowerment comes not from comparison to others but through internalizing self-acceptance through the right kind of adjustment training.

Other participants spoke proactively of life-long lessons that were learned through participation at the PSP which changed how they related to the world around them. "I was able to get the courage to speak up for what I believed in, that made me more um – you know, a good advocate for myself." Similarly, one participant spoke of their life philosophy after the program: "This is my life; this is how I am going to do it." Another participant had a different world view: "It could take time for [others] to adjust. . . . If I can show them that I can do it, then they are that more willing to let me have my chance."

THEME: CULTIVATING CONFIDENCE

Not surprisingly, this theme emerged as the second highest topic during the first round of interviews. Confidence has been a topic of focus within the

blindness rehabilitation field as evident in the confidence builders initiative (Texas Department of Assistive and Rehabilitative Services [TDARS], 2008) implemented several years ago by DBS, one of the agencies that developed the PSP. DBS also established the core skills which, based on their experience and research, are areas that are necessary components in any rehabilitation training for the blind. The mastery of the core skills result in the confidence and competence needed to live independently and work competitively. According to a coordinator of PSP, "The main goal for everyone is to give them enough experience and confidence so they can live independently and work, give them the skills of blindness – the core skills . . . including travel, independent living skills, vocational skills, communication skills and adjustment." Additionally, the coordinator pointed out that one of the unique features of the PSP is that it gives students opportunities to practice their skills and build confidence in themselves, which is so necessary for learning to live in the world as a blind person. During my interview with one of the staff from DBS, they stated the aim of the program was to "help young people to develop the independence and confidence so they can move to the next phase of their life" and that the core skills are the necessary components to do this.

According to Omvig (2002), a program that has high expectations can point to a healthy self-confidence as a result of its proper training. When examining the student handbook, confidence is a central concept. The handbook states that the PSP gives students opportunities to build confidence in oneself and one's future through living independently while participating in training (PSP coordinator, personal communication, November 1, 2010). The operative

words here are living independently while participating in training. Confidence happens as a result of something. Similar to the core skills developed by DBS, Omgvig outlines those training components that encourage independence and confidence. The adjustment to blindness and increased self-confidence are necessary dispositions to enable one to live in a world that is dominated by misconceptions about blindness (Omgvig, 2002). Stated so clearly in his book, "The [program] has to help the student get to the point where he or she can say, 'Yes, I am blind, so what? I like myself, and I'm OK! I can do what I want to do.' If the [program] doesn't build self-confidence and self-esteem, then nothing else it can do makes any difference" (Omgvig, 2002, p. 136).

Sub-theme: Learning from Others

This sub-theme represents how other people influenced or impacted the participants and includes mentors, individual staff in the PSP beyond the classes and instruction as well as family members.

Many participants talked about being around other blind people and how they were impacted by them. As one participant stated it, being around other blind people helped reduce the fear around relying on a cane. "Yes, they were . . . helping me not be scared. Because I was fearful . . . [and] they would just go anywhere. . . . They weren't scared or anything." In addition to having blind mentors, participants had collaborative learning experiences, a significant, empowering concept within the area of education (Liang, 2004).

Being with those [other blind] students, us living together, seeing each other, after the staff left, and us hanging out – we'd be like playing cards or something, we all kind of got to know each other, and I learned that it's ok to work with other people . . . not because of the types of things that we

did, but because of what I would see. . . . The other students would start doing things . . . I would kind of learn . . . That's where you know, working with the team and learning from each other kind of also made me realize, you know, it doesn't all have to be me.

Learning from other blind people was not just something unique during the program but it is a tool one participant continues to use.

It's kind of just reassuring to know that I'm not the only one out there. And to know that somebody else has done this before me and they know what they are talking about, and I can just pick up the phone and . . . say "How am I going to do this being blind?" And they'll just go like, "Right, you can do this, this, this, and this, or you can do this."

Not all of the participants found relief in working with other blind students. For one participant, asking other students for help was not the training experience expected. "I did not know what to do. I had to go to a neighbor and they were like, 'Alright you kind of have to do this . . . you kind of have to do this yourself.' And I was like umm . . . 'That's not the way this is supposed to be done.' So you were kind of thrown into it."

Being around other blind people provided participants with more knowledge about how to live and function as a blind person. Mentoring is an important tool in the blindness rehabilitation field (Omvig, 2002). As previously mentioned, establishing self-confidence is one of the aims of a good residential program. When one is surrounded by misconceptions about blindness, it is hard to feel good about oneself thus pointing to the need for positive role models. As one participant described it, growing up with negative feedback about blindness can influence how one feels about oneself and one's future. "Family and friends don't let you [blind people] do anything because they are real scared like

something is going to happen. And you grow up with that thought, you know, that you are never going to get no where."

The PSP helped participants to gain the courage to be themselves and establish independence, and sometimes this realization of internal change came after leaving the program.

I didn't realize until after I left what a good program it was, and how much I learned. I learned a lot about myself in the time I was there. And I learned that growing up, I was always influenced by family members or other friends . . . I was always the type of person to just do things because it seems nice, because, you know, it would seem like a good thing. But after that program, it was like, I found myself with my own opinions and my own beliefs and if there were people that didn't agree, well then ok. I learned a lot from attending that program, about myself, about people, working with others, being independent and feeling confident and happy about myself, feeling, you know, knowing that I could accomplish things if I just worked hard enough.

Role models don't only come in the form of other students; often the staff serve as role models whether they realize it or not. There was significant discussion about how the coordinator influenced the participants during the program. The importance of modeling what is taught should not be underestimated. If a program wants to impart confidence, what better way to achieve this than to demonstrate confidence through the actions of the staff? One case spoke of a blind coordinator who served as a mentor for the participant during attendance at the program: "Seeing the confidence of the coordinator who was blind – doing ordinary things, looking at the kind of struggles she went through and how aggressive she was, and seeing other blind adults . . . If they could do it, then I could do it, too. . . . Well, it left me with no excuse." Another participant stated it clearly, "The coordinator was kind of like my mentor

basically, I mean like, you know, it really amazed me all the stuff they did and I'm like, 'You do this and you're blind?' The coordinator was independent and it was inspiring. If they could do it, so could I."

Sub-theme: Developing Self-Concept

This sub-theme deals with how identity evolved over time especially in attitudes about blindness as a result of attending the program.

Most participants talked about how they became more independent or self-determined after attending the PSP. They viewed themselves as having more self-reliance, self-confidence than before they entered the program:

I went in wondering, "What exactly can I do?" I was unsure about a whole lot, and then through the program, talking to other people, talking to the staff there, it was to show you that you can do it – maybe a little different, but it still can be done. I'd kind of hang back. I wasn't exactly sure, and then afterwards, I'm kind of more . . . outspoken and a little bit more confident about "Yeah I can do this" or "You can do it this way" or "I can do it this way."

One participant spoke of the program and its influence in considering higher education – a different future than what was possible prior to the program:

You have to be self-motivated. . . . No, I would have probably been self-determined, but not as self-determined as I am now. I don't think I would have been inspired . . . I don't think I would have been encouraged to go to college. And even if I was encouraged to go to college, I wouldn't have taken it up . . . just because of my nature before I came here. So, I really . . . I don't think I would have been where I am today if it wasn't for Post Secondary.

Besides helping participants become more independent, the program helped some participants with the adjustment process. Adjusting to their blindness was a significant topic for some participants who needed to have a better view of

themselves as blind people. For one participant, blindness was merely a nuisance.

I was really relieved when I got to Austin and into the Post Secondary and then I met a whole bunch of other people and . . . I just feel like Post Secondary prepared me for dealing with people. People are going to stare; people are going to ask questions. You can either decide to be comfortable with it or not. I just see it as more of a nuisance than anything.

The adjustment to blindness is key to overall success. One participant spoke of how the acceptance of oneself is a necessity for moving forward:

I learned from them that it could be done. And that helped a lot by giving me more confidence by watching them, and I think that's why I'm very firm now . . . a lot of people feel like when they come out of this type of program, that they are just trying to brainwash you in thinking that being blind is great. But I don't think so. I don't think it's great, I think it's a challenge, but I think there's one thing between accepting it and not accepting it. And people that go into [PSP] are afraid, and they don't want to accept that they are blind, and I have a lot of confidence, and I always try to think on the bright side when there is a problem or when something's not going right. So a lot of the thinking that I have, I think a lot for myself, and I don't . . . I try not to get influenced by what other people think.

Many participants spoke of themselves as being blind and having a clear philosophy about themselves in relation to the world around them. For these participants, blindness is not a barrier, it is something they have learned to adjust to and accept. Some participants did not get the same concepts from the program. The focus of the program is achieving independence through many factors, one of which is the adjustment to blindness. It appears this is one hurdle not yet achieved as some narratives display denial and internal conflict around the topic of blindness. As one participant stated it:

I'm not technically blind, I'm just visually impaired. But, during that time I was there, they have you going to Criss Cole during the day. And I'd be under blindfold everyday . . . and I'm used to it. I don't have any problems with it any more. I don't use non-visual skills. I do things visually now, but I know how to do them just in case they ever do go completely blind though. I can see fine. I only use a cane at night though, because I can't see well at night. I'm really good about independence. I really don't like to have help unless I have to. I make my decisions all the time, because I don't like someone making them for me. I think I'm pretty well in charge of my life. Oh, I'm pretty happy. I'm always pretty cheery though. Yes. I try to keep a positive attitude.

Like the previous participant, the adjustment to blindness is measured by the participant behaviors:

. . . that's like one thing that's holding me back. Because I'm still real uncomfortable until I get to know a person at first. It's like I look outside myself and I feel how others are perceiving me . . . and I can't help wonder if they are thinking "Oh, my God, how does [he/she] do this, how does [he/she] do that? Do I really want to be friends with [him/her]?" This that and the other . . . so I'm still kind of having some issues with that.

THEME: IMPLEMENTING INDEPENDENCE

This theme ties the mastery of alternative techniques with achieving independence. During my observation at PSP, I watched as a student struggled to figure out her way around inside the building. The staff did not prompt her but continued with their duties as the student problem-solved the challenge of finding her apartment. For some, this scenario might have seemed uncaring and, indeed, this is the common public misconception when a blind person uses their cane to problem-solve challenges during travel. I was impressed with how the staff did not jump in to prompt the student, but trusted she would figure it out by applying techniques learned through cane instruction. I watched as the

student methodically reviewed her path and encountered clues for orientation. Eventually she figured it out. The beauty of it all is that she will know from experience from that time forward how to find her way around the building. She touched things and stood and thought out the layout of the room and eventually problem-solved how to navigate the space. The staff was comfortable – not nervous but just continuing with their work as the student made her way around through their office. True independence and self-confidence is achieved by doing (Omvig, 2002). According to the coordinator, the PSP is a program where students learn to be independent and practice the skills of blindness; they learn problem-solving skills and are given opportunities to put their skills into practice. The PSP can't prepare them for every situation that will arise but can give them training and opportunities to rely on themselves by practicing their blindness skills and learning to solve problems.

Sub-theme: Incorporating Skills

This sub-theme captures how participants rely on alternative skills or not, and includes all forms of independent living skills.

For some participants, moving home after the PSP limited their reliance on themselves. One feature of the PSP is that it is located near 3 main bus lines and provides students with abundant opportunities for independent travel. Three participants found themselves relying on parents for transportation to school and work once they moved home. As one participant stated it,

When I was at PSP, I experienced more transportation opportunities . . . I was right there at the bus stop. I could easily go anywhere. At the time of leaving the program, I was like "YES!" No more having to ask questions. I can still skip around some things. I knew what to do, but I could regress.

And that was a big no-no. For about 6 months after I left the program, I was still kind of . . . you know . . . I wasn't really doing anything.

Some participants still use the techniques learned at the PSP and even share them with others:

One thing that I use now that I never used before PSP is a long white cane, so when I graduated from the program, I got one of those canes for myself. And now I always tell people to use those because they are much lighter. And I tell them about my experience since I had long mobility lessons where I had to walk a long time, you know I would use that cane along with the new technique that I learned. I got introduced to a lot of different tools that I could use besides Braille, I clean a lot . . . and I cook for myself, and so I do a lot of that. I've got a friend that I taught her how to do certain cleaning techniques that I learned from PSP – things that I didn't even realize could be done. . . . With all the skills I've learned, I've been able to teach other people these techniques.

For participants, the PSP taught skills that were incorporated for life:

Regarding independence, I don't think it's really a matter of maintaining, I just think it's a matter of me just getting out and going for it full force. Just because I graduated the program, and yes I'm independent, you know, it doesn't mean hey, I'm going to stop and not do anything. I mean, that's pointless. I mean if you aren't using what you are learning, then you're out of luck. I eat out and cook, I travel around the city, or around the state and around the nation. Post-Secondary was the big hurdle that I had to overcome in order to insure my independent lifestyle. To make sure that, yes, you know, I definitely can do it. Now, what do I want to do? And that was what actually initiated my interest in the field I am in.

For some students, the training at the PSP helped them afterwards to figure out how to do things on their own. Additionally, the academic training was helpful for one participant who is starting a business:

PSP gave me a chance to figure out how to do things, for example, getting out on your own, like figuring out how to take out the trash when it isn't a

clear route. I never cooked before, now it doesn't even bother me. It was the experience of having to do it on your own. When I first went to the Post-Secondary, I was really bad about punctuation, spelling wasn't quite that great. Now that I'm corresponding with businesses through email, it kind of makes things a bit easier.

Most participants understood how PSP prepared them for life beyond performing a specific task. These participants made a connection between the skills, independent living and overall adjustment to their blindness so that they could meet the everyday challenges of life and work. In contrast, some participants saw the training as only performing a task. One student seemed to not grasp the holistic approach of the program, and so it was an issue of learning a specific task:

PSP taught me some things I'll never forget, you know the vacuuming? That's always hard for a blind person. I just remember the vacuuming. I remember that very well. The only things I really got out of it were cooking, transportation, and cleaning. Those were really the only things I wanted to learn. Living at home, my Mom likes to cook, so I let her do that. They only have me take care of my room, so . . . they told me as long as I keep my room up, you know, they won't have any problems with me.

Sub-theme: Pursuing Vocational Options

This sub-theme captures any vocational behavior or activity in order to gain understanding about the vocational development of the participants. Keeping in mind the varying experiences and levels of maturity, disability and especially blindness compounds the complex subject of vocational development (Enright & Szymanski, 2010). The data includes examples of occupational exploration, work experience, and vocational activities.

The participants had a variety of vocational activity during their attendance at PSP. Only one participant was employed at the time of the first round of interviews. This participant had received help through VR to find a job. "After PSP I worked for 2 different companies in customer service. Through my rehabilitation counselor, I worked with a job placement specialist to find my current job."

Three participants were attending college and working toward their vocational goal. Some participants were looking for work while in college and had begun to investigate possible opportunities. One participant noticed other students in class getting jobs and tried to network through them but this appears to be the only avenue used to find employment. It is interesting how the participant made reference to what other students were doing in terms of being in school and working:

I'm in the process of looking for a job. I've been talking to a few people at the college. I've been trying to network my way through. All the people in my classes, work different places and I'm like you know, they are always looking for new jobs. I'll ask them if they know, "Do you know anybody that's hiring? Like anywhere, let me know and I want to apply too." So, they keep me updated on what's going on. I really don't care. I need something I can do.

Another participant tried a more direct approach in finding work and had the idea of starting a business venture teaching classes. It isn't very clear how the participant will gain students and there is no business plan in place though a web site is being developed: "It's only been this year that I've gotten the idea to start a business. I did some casual teaching on the side before hand, but I didn't

really take it seriously until this year. . . . I'm working on starting my business web site. . . . I do teach. I don't have any students. I've had students before."

One participant completed technical training and is in the process of interviewing for a job within the field of study:

Since finishing the technical school training, I'm currently filling out applications and doing job interviews for certain entry level positions in my field right now. I've had a few interviews with them, unfortunately, no offers were made. I actually tend to do odd jobs like photography or computer work relating to my family's business. I actually tend to do odd jobs relating to my family's business. In the past, I attended work programs in high school. My rehabilitation counselor emailed me and she was like "What's your status? What are you up to?" And at that point, I had already had two interviews and she was like "Whoa, you are doing great on your own, but if you need us, we are here, but good job doing it on your own."

Other participants were not working but made reference to volunteering while attending the PSP and it seems to be the only work activity: "I've only done volunteer stuff and that was when I was at the Post Secondary." One participant had a job but lost it and concluded it was due to being visually impaired. The issue seems to be that the participant did not have a real job, i.e., something that is designated as a position. Rather, the participant had a task to perform at the place of employment and when it was completed, the employer couldn't find any additional tasks. It is unfortunate the participant internalized this situation as being caused by being blind, not due to it being a less than acceptable job match.

I did have at least one job . . . I was working at a restaurant; they had me in the back, mixing hot sauce. The guy let me go though. It was only for about 2 weeks before he let me go though. You know what? I'm still wanting to know why he let me go. . . . He called me up on the phone when I was at PSP. He said, "I'm just going to have to let you go 'cause I

can't find anything for you to do." I'm like, "What??" I think he based it on my vision. I had my cane with me when I went up there, so he's probably like "I'll let him try that." Then he called me up and said he was going to let me go.

On the other hand, while attending the PSP one participant found out the vocational goal of choice was not a good match. The participant explored computers and is now trying to establish a sales unit under a family business:

Lately I've been trying to get my – well, it's not really my own business but it's kind of my own business. I'm the main one on it. And so I'm kind of taking over, basically, the sales department type deal for a family business. I'm either on the phone from 9 until 3 or 4 or sometimes 5 in the afternoon. Basically, what I'm doing is, I get [the product] from them at the normal cost and then I find other people that they aren't selling to who . . . don't buy it from us already, and then I contact them tell them what we've got. I'm in the process of trying to get pictures and stuff, possibly be trying to set up my own website. Not my own, but for the business.

THEME: SETTING GOALS

Setting goals and identifying the steps to reach them embody the rehabilitation process. In reviewing the student handbook, there was no reference to student goal setting or achievement. However, the handbook did have language that discussed the program goals: "YOUR SUCCESS IS OUR GOAL" (PSP coordinator, personal communication, November 1, 2010). In reviewing the PSP objective grid, more references about goals were identified, however, how students identify goals or establish steps was not available:

- Student wrote and decided upon steps to reach short-term goals and activities weekly that further their long range goals.
- Student determined resources and/or further training needed to meet vocational goals.

- Student improved technology skills that enhanced his/her academic training and future goals.
- Student learned to self-monitor progress toward attainment of his/her goals and readjust as necessary.
- Did the student meet 80% of the programmatic goals?
- Student wrote an Action Plan to achieve future goals in academic remediation, transition activities, and networking (PSP coordinator, personal communication, November 1, 2010).

When interviewing the coordinator, I learned that the program is individualized based on the student's goals. The PSP has a weekly ". . . planning and goal meeting where students review past goals and discuss how they met the goals, identify what could be done differently. The aim is to reflect on what went well and what needs improvement. It is a time for questioning and reviewing."

During one of my observations, I was able to sit in on a graduation planning meeting where the student discussed plans for moving into his own apartment and registering for college courses. The student was reviewing all the things he had done to get to this point and though he seemed nervous about the upcoming venture, he was clear on the steps he would need to take in order to establish future arrangements. One of the staff members from DBS also verified they help students "work on setting goals and how to achieve those goals".

Sub-theme: Envisioning the Possibilities

This sub-theme looks at how participants dream about future possibilities. Across the cases, employment seems to dominate individual projections for the future. When asked about future goals more than half of the participants had a

clear vision of what they wanted their life to look like in the future. These participants had goals that were thought out and based on their interests and preferences. One participant in particular talked about a back-up plan in case the original goal was not met:

I hope to have at least my Associates in Marketing, and in 10 years, I hope to have my Master's in Marketing. I am interested in Public Relations mostly. I've also been planning on getting my teaching certificate, so that way I have another profession to fall back on if I can't find something Public Relations related. I am getting my A. A. degree and then transferring to a program that you can get your B. A. and Master's in the same degree. I researched it.

For some, their future vision not only included getting a job but moving up in the preferred field:

I want to stay within the industry I was trained for, right now, I would like to start at an entry level position, but hopefully just kind of gradually to move up to maybe a future position in management or maybe a different area of the industry altogether like airlines. I'm real interested in that too. I love to travel.

These participants have a plan based on self-direction and their motivation was evident in how they talked about the future. One participant teaches music occasionally and hopes to expand into a larger practice:

With this business, in about a year, I expect to have 10 students, hopefully in the near future I see myself in a house, alright? Teaching, you know, running my business out of my house. This will include teaching bass and guitar instruction but it will also include teaching individuals how to run sound for a business like sound consultation. In about 10 years, I'd like to have a building – an actual building which will have various areas for instruction and also for studio to do production work in. And I will have other individuals who will be working as instructors who have been students who have worked under me and know my teaching methods.

In contrast, some participants did not have a plan for future goals, they appeared unaware of how the world of work operates and their lack of motivation was evident in how they described their goals:

I design characters, and when I feel confident enough, I'm going to send it into . . . which ever company I want to look at it, and see if they'll publish one of my characters for a game. Right, that's what I want to do. I'm trying to get my practice in because I've always thought about that . . . it's like if nothing else works out, I'll go try to find a video game company that wants to hire a video game artist to design characters for them. I'm hoping it works out, but I'm not really sure though. I never really thought about a long term goal, just a hobby to pass the time. Like I said, if I get the confidence basically, you know, I might go find a company and see if they'll hire me so I can draw characters for them. And see if they'll put them in one of the games that they make. I've developed art on my own. I hope I have a successful life – not having any problems. I just come up with bizarre ideas to help keep my life going. You know, like the video game designing characters thing. I do that hoping that, I can go sign up either as a video game designer or a video game tester. I'm pretty sure those guys have it easy.

One participant who previously expressed interest in computers appears to be thinking about some future goal but it isn't clear what the plan is or for what purpose. This participant seems to know the areas of interest yet the future outlook is somewhat vague: "I have some idea of going back for more web development stuff. I've just been kicking the idea around . . . nothing too serious. So I'm not exactly sure if I'm going to take some more classes on the same computer work or different area." One participant who had found gainful employment revealed their main goal for the future and it didn't include work. Though this participant was a successful VR closure, it does not appear that it was a placement based on self-directed interest: "I don't think I would like

working in this job that long. I would really like clerical type work. It's that I'm engaged right now, so I plan on getting married like in the next year or so and then I'm going to move from here. . . . I plan on working for just a short time."

Sub-theme: Taking Action

This sub-theme is about establishing steps toward a goal. The ability to consider more than a single plan includes housing arrangements after leaving PSP. One of the first life tasks students negotiate after leaving the PSP is to locate housing. Taking this action may seem like an ordinary feat but considering the limited independence these participants had puts it into the challenging context where it belongs. As mentioned previously, the goal of the program is for students to live independently.

More than half of the students interviewed live alone or with roommates. Some participants did seek assistance from parents in making the transition from the PSP to an apartment, "I live alone and my family helped me find an apartment that is close to campus." The common factor in seeking support from family is that it was not a permanent situation. These participants sought out family support to supplement the process, not as the whole process. One participant moved home until an apartment was located through hiring an apartment locator: "I moved home for about a month, a month and a half, and then started looking at apartments . . . now I'm moved into my first apartment and I live with roommates."

Other participants moved home with family after leaving PSP. One participant tried living alone but eventually moved home: "I was living by myself. It went pretty well. . . . I did basically everything they taught me to do at

PSP. Then I moved back home because the bills were getting to me." Money was a factor in making the decision to move home, however, these participants did not consider other alternatives to keep from moving home such as getting roommates. "I've been living with my parents, and that is . . . due to the fact that apartments around here are quite expensive."

Moving away from the status quo is hard; it takes discipline to challenge it (Omvig, 2002). Participants took action regarding their goals such as finding employment. One participant solved the problem of not being able to find a job by enrolling in college: "For about 6 months I was looking for a job . . . and that didn't really work out at the time . . . so I decided to go to college and now I am a student." Finding gainful employment is not easy for people with disabilities. Of all the times to have a positive adjustment to and attitude about blindness it is when looking for work: "I had had a goal, to have a job by the beginning of this month. And whenever I didn't reach that goal, I was so depressed, and down, and I'm like, 'Why is this stuff not happening for me?' And then that's when my friend was like, 'Oh, you need a vacation.'"

SUMMARY

This chapter provided the descriptive data from the first round of interviews. The information was categorized according to the themes and sub-themes. Additionally, participant data was crystallized with the PSP documentation, observations and staff interviews. It appears the participant information was consistent with the supported documentation, meaning the participant experience was consistent with what the program tried to achieve. The issue that seems apparent is that some participants were more ready for this

type of program than others. Some followed through on the goals of the program while others did not for various reasons. The next chapter provides the findings from the second round of interviews.

Chapter Six: Follow-up Interview Findings

This chapter summarizes the themes and sub-themes from the follow-up interviews. Almost two years after the initial interview, participants provided information on the current status of their life, their pursuits and use of skills since their attendance at the PSP. This chapter begins with the themes and sub-themes followed by an updated bio on the participants. Like the previous chapter, the findings are crystallized by reference to observations, program documentation and staff interviews. Additional charts and tables are included for clarity of illustration of material.

THEME: NAVIGATING NEEDS

Sub-theme: Dealing with Barriers

Some barriers that were uncovered in the initial interviews were still being negotiated at the time of the follow-up interviews. This participant continues directly dealing with the issues surrounding a recent diagnosis of a secondary disability:

As far as this disorder, it is kind of . . . right now I feel like it is kind of in the way. Not just academically, but socially in other ways. So, I am slowly working on ways to fix that. Anyone that is very, very close to me, they do know about it or they recognized it, and they agree with me that I do have this. As far as school goes, I'm just telling myself to stay in school because this is my dream. This is what I want to do. It is very hard to do that. It's very hard to keep with my assignments, and sometimes I forget what's being said, even after it's being told to me but it all works out very well, and I'm very optimistic.

For other participants, the challenges of being in higher education are still present and they continue to meet these difficulties head on: "The available

transportation is still not very good. They're still very flaky, so I just hire a driver each semester to take me back and forth to school." Some participants continue to meet their challenges in a different way: "Basically, my mother drives me around because we don't have much of transportation around here, being in a small town and all."

Some participants experienced new barriers since the initial interviews which caused significant life changes. This participant had found gainful employment only to lose it due to an onset of a chronic illness:

A lot of people with this disease for example, are not able to function in a normal work environment. Unfortunately, I had a place of employment, just recently was terminated at the beginning of the month. The initial shock tends to get you. At first, it's like okay, well, I've been dealt this hand. I can't pick another card or change cards. So, let's just go with it. It happens. And there are times where I need to slow down and take a rest or whatever the case may be. But, I ultimately . . . no matter how far I may fall so to speak, either I get myself back up or a friend of mine aids me in getting myself back up to my normal spirit. I personally, I have to find something that motivates me to keep going. Luckily, what I have found what works for me really, really well and has been for several years, and that's been my passion for music and anything music related. Just, it's almost as if whenever I'm in that sort of environment, I know the problems are still there, but I forget about them for a little bit.

In contrast, one participant facing unexpected life changes decided the best solution was to quit a job instead of relying on alternative solutions:

Right now, I'm not working anymore. I stopped working 9 months ago I believe, when the brother I was living with moved. My counselor would have helped me to find a place to live. In fact my job – they were wanting to help me because I was doing so good at my job. In the mean time I was living with another brother. I couldn't even make it one week there. My job was 30 minutes away and he would drive me. For him, it was hard

because he had to go leave me very early. I got there probably an hour and a half before I had to start my job. He had to go work, and he says he was getting late to work, so it was just a mess. Basically, I've just been travelling. Try to forget a little bit about all that was happening to me.

Overall, the participants can be seen in two different ways, those that embrace the challenge and those that don't. One participant loves music but decided to major in a degree that did not present any struggle:

I did not need to be stressing over it for four years or fighting over it for four years. No, not as much [struggle with political science] as trying to get into the music department, which is what I first started out with. And then with business, I just lost interest with business. But political science, I did not have many struggles. I altered the goal to get something I could achieve. In general, yes, if I have to alter things, I will. I make do.

In contrast, another participant who happens to be a music major seems to embrace the challenges of life as a person who is blind:

I always look on the bright side, and I think that's definitely what has kept me going. I mean, with a lot of situations that I need to work at and problems that I need to solve, I think I've always learned that, even if I don't have a solution to something right away, something always turns up in the end. And it might be in a place that I least expect it. I think it would really be just staying hopeful and confident. And working with what I know and not what I don't know. If there is something wrong, whether it be a blind related issue or any type of issue, I always look for the key point of the problem. If there's someone I can talk to about it, I will. I think in the past, I have been very reluctant to get myself involved in certain things. I felt very safe in my own corner. But now, because of influences in my life and because of just confidence, I've grown up and I've learned that if there's something wrong and you see no one else is going to fix it, then you need to fix it yourself if you want it done the right way. I try to face things head on . . . I have learned that sometimes when you try to change things, you have to sacrifice some things. It could be friends it could be anything, and I'm willing to accept that if that means that there is going to be a good change.

For some participants, problem solving takes a process of thinking, talking to others who have experience and drilling down to the main issue:

I freak out, I cry, I think about it, and then I figure it out. It's all part of the process. I have to do all four steps. It developed in my process of getting through hard things, because before, I would just go find a book. Now that I can't just pick up a book and read it, I have to sit down and think about what I've heard and who I know that knows what to help me figure it out. Then I call somebody or I figure it out on my own. Then I get things worked out. It wavers. When I get down, and I can't figure something out, I don't have very high confidence in myself. Once I figure it out, I feel a lot better and have a higher confidence.

More than half of the participants developed a style of meeting their barriers head on, adapting to a personal philosophy toward problem solving which incorporates flexibility and more than one consideration:

I kind of eliminate it down to which ones are the best choices. Pretty much see where I'm at, see if I've made it anywhere, and then I pretty much do the same thing again. Either say, well I can go this direction with it or go this direction with it. Just keep playing it out until something, something will eventually happen.

Sub-theme: Responding to Expectations

Parents

As in the initial interviews, the issue of responding to parental expectations emerged with a lot of energy. Almost two years later, some participants seemed to have established a way of relating to family while still maintaining independence: "I am not as close to my family like I used to be before I moved out. I have chosen to make more decisions on my own. I think that's a good thing." One participant describes the increased understanding of

one parent and the nature of their interaction in order to maintain independence: "She's become more and more supportive as time's gone on. She realizes that when I do need her help, I will ask for it. She knows if I don't ask for it, then more than likely, I can do it myself. It takes a lot of griping from me. Telling my mom, 'I've got this' and guiding her in the right direction." For these participants, distancing themselves is not only a natural stage in the relationship between child and parent but it is a necessity in order to establish independence. In contrast, some things have not changed for those participants who moved in with their families. These participants still live at home and the expectations have not changed since the initial interview. One participant describes how parental expectations differ from one sibling to another. It seems acceptable for one child to live at home without any direction because of a disability but it is not acceptable for one without a disability:

Living at my parents' house I just have to keep my room clean, and I do that. And I do anything else they want me to do. I'm still trying to take care of stuff to show that I do know how to do it, when I do manage to get my own place. When I lived on my own, I had to ride the bus to go get groceries. I could have my parents take me back home instead of having to carry all that stuff in a taxi or something. So I found that real helpful. So once every month they would drive six hours to help me and they normally stayed with me. My younger brother lives at home, we're trying to get him out of the house. . . . We think if we move, he'll want to continue on with his life. He was going to school for awhile and he's back, so my parents really want him to get a move on with his life. Sometimes, the only way to get someone to do something is kind of to force it on them – to make sure he does what he needs to do because he has a lot of potential. I told him this before, too.

For this participant, having high expectations seem to be something feasible for somebody else. Whether one lives alone is not a definition of

independence, it takes more than that, it takes relying on oneself. Here the participant shows clearly that though parents were far away, about 6 hours away, the reliance on their help was still a necessary factor in achieving basic life functioning like grocery shopping. The choices were limited to relying on parents or taking a cab and carrying all the bags that way. Other means of getting this task done were not part of the feasible solutions.

Others

The expectations of others can open or close the doors of independence. For one participant, the high expectation that she could participate opened the door to a new business venture:

She asked me, "Would you be interested in becoming a rep?" I said, "Oh, I don't know. That seems like too much work for me. I don't think as a person, I don't think I could handle it." And then the fact that I'm blind and some things you have to work with the orders and write receipts. I didn't see how I could do it. And she said, "Well, here's my information if you ever think about it." So many people were telling me it wouldn't be a good idea. Then I thought, "Well, I'll show you. I'll show you I can do it." It turned out very well when those same people that said they didn't think it would be a good idea ended up buying from me!

Sometimes, opportunities are the result of exploring and doing. This participant along with another person who was visually impaired discovered that teaching music did not require print. Had they not challenged the status quo, a teaching technique would not have been uncovered:

I participated in a music study awhile back on teaching the blind music. Some college professors felt that it would be more difficult teaching the blind, and so I volunteered to participate in that study. And I was taught music theory by a visually impaired grad student. It was amazing. We would do stuff in a restaurant. She'd teach me music. And then we both

realized that we don't need to be around each other. It's not like I'm showing you anything as far as on a piece of paper or something. We can do all this through the internet, and that's when I heard about Skype. I'm sure it was very interesting for her to realize all these things, and how easy it was to teach someone who was enthusiastic!

THEME: CULTIVATING CONFIDENCE

Sub-theme: Learning from Others

As in the initial interviews, participants spoke of the impact other blind people had on them during the program and afterwards. Being able to see the possibilities for oneself in the actions of another was an empowering process. One participant decided to use a dog instead of a cane after being introduced to this way of traveling by a friend. This participant prefers the freedom that traveling with a dog provides: "I really enjoyed it, and I felt like I had more sense of freedom with that type of mobility than a cane. And so I applied for a guide dog."

One participant bases vocational interest on what other blind friends are doing. They are blind and create graphic art for video games but as a hobby. The types of associations have great influence on one's view of possibilities: "One of them I know who does that lives in Austin right now. No, [not for work] he does it for fun."

Sub-theme: Developing Self Concept

Some participants are still living at home and it impacts how they view themselves: "Right now I don't feel like I'm independent because since I'm living with my parents; I can't do nothing." On the other hand, one participant was not able to have such an honest self appraisal as the previous one: "I've increased

[independence]. Yeah, I don't want to say it decreased because I'm living with my parents . . ." One participant felt adjusted to blindness except for a couple of areas: "The only time it would really affect me is when, say, I don't have a sense of humor. Well, the problem with today's sense of humor is that it is so often visually oriented, as is the sense of fashion, which I don't have. I am well aware that I don't have, and I don't really choose to obtain that." In contrast, one participant felt independence has increased over time:

If you were really thinking of one word, it would be just optimism, confidence. [What] I have now is from . . . Post-Secondary and has continued with the experiences that I've had afterwards with the friends I made while I was there or in college. I still consider myself to be a very independent person, and I think even more so than what I was.

Similarly, another participant who has had major health issues since the initial interview finds the strength to go on and meet challenges in a proactive way: "I just do it because I'm me. That's all I know how to do. I want to live a life that I want to live being the fact that I have so many hobbies and such desires to travel and see the world and what not. Then, I have no choice but to get up. There was more light at the end of the tunnel that I still had to reach for." One participant talks about the challenges faced during the training in the PSP. Over time, the ability to accept challenges enlarged. "It was the challenge. That was okay. Now, it's okay. I can accept a lot more challenges than I used to. I do try to."

During my observation at the PSP I attended a student group. The developing self concept is a common phenomenon for the students. Though the students are currently attending the PSP, they spoke of how they view themselves differently because of the challenges in the program. Similarly to the

participants in this study, the PSP students spoke about how they never thought they could do things. They did not travel alone, they did not cook and they didn't speak up for themselves. The students thought the program helped them to be different and have more confidence because they were challenged. Again, it was the hard work, the discipline, their response to someone else saying "Yes you can!" As I observed, I listened to the enthusiasm of the students, the apparent awakening of self as powerful, as purposeful, as an individual.

THEME: IMPLEMENTING INDEPENDENCE

Sub-theme: Incorporating Skills

It was established from the first round of interviews that the participants needed training in basic independent living skills in order to achieve independence. It was interesting to see almost 2 years later what was the status of relying on these skills. For the participants who moved home, nothing seems to have changed: "[I clean] mainly my room. You know, where I stay. You know, I keep my room in order here." For some participants, moving home meant a loss of reliance on skills as well as independence: "I'm with my mom most of the time."

One participant is navigating the world as a confident blind person and attributes success to the training in the PSP:

I'm not afraid to show it. I'll tell people I'm blind and they're like, oh, okay, just one second, let me get someone to help you. And I'll say, oh, well I can follow you. I'm able to follow someone very well because of my auditory skills and my cane technique. I have a lot of pride in the skills that I learned because I worked hard. My training wasn't easy. It wasn't always fun, and you get scared doing some things. I would get terrified, and I would think, "Man, today I'm going to die." But it was all worth it,

and because of the good support I had, from friends and from instructors, I was able to have this confidence in everything I do.

Another participant is still navigating participation in higher education and dealing with the challenges each new semester brings:

I have to adapt my learning processes from what everybody else uses to something that works for me. Yes, every time I get a new reader for a different class over the semester, they're like, "Oh, my gosh, I've never worked with a blind person before. I don't know how to do this. You're going to have to help me." I'm like, "No problem." I said, "Everybody works differently with me, and every time I get somebody new to work with me, I have to adjust to working with them. I'll tell you how you can help me. If you're doing something wrong, or something ends up not working for me, I'll let you know. I'll let you know what works for me." This is different for everybody that I work with.

Sub-theme: Pursuing Vocational Options

The participants had varying work experiences and vocational outlooks. For many, finding a match between occupational categories and their interest created a lot of energy around the subject: "I am getting sales. I try to advertise my business anywhere I can. I was able to get help, and I got business cards, my own webpage, that kind of thing. It is very exciting. I mean, I would have never thought three years ago that I would be doing something like this." Self employment seems to be a common interest among the participants. Some have made great strides in making it happen and others have made a significant start toward interfacing with the world around them:

So pretty much from then 'til now, I created the website. During that current time, it was the whole web building, coding kick I was researching. Then, I got it going, and then pretty much that helped send a few people my way – one or two. Pretty much from now on, I get e-mails and calls from people buying from the website. So, I got the website up, I

have a few people that call, a few customers. Nothing major, but it's just enough to fall back on.

One participant found a major that is a good match for their skills and abilities:

I'm choosing accounting because it makes sense. There's reasons for why it makes sense. It does what it's supposed to do, all the time. . . . I like numbers. I like to do math and stuff. . . . I had a teacher last semester that turned me towards accounting because she realized I was good with numbers. I was good with math, and all things logical.

Some participants are in the middle of finding a job. One participant who had health issues was laid off but immediately began to find another workable situation: "That same day that I was let go from one job, I had already applied for a couple of others. And as a matter of fact, I got a phone call just a couple of hours ago for an interview that I have tonight." Another participant is looking for work related to a music interest but not much related to their educational degree: "I have a resume that I have been sending off to people. But for the most part . . . I've been kind of doing minimal work in that [degree major] area and focusing more on my music playing to see if I can get something going with my music because that's what I love to do." For some participants, thinking of a career or an area of interest is more difficult, even when they had a job previously:

I really don't have a . . . career. I've never really had one in mind. Not that I know of. I don't know really [what I will be doing]. . . . I don't know in what. I don't know if I'll be in the same job that I'm planning to go back to. If I was able to start there again, I have hopes of moving up. . . . I'm not saying it was the best job in the world. It's just basically a job.

Another participant is still doing the same thing as during the initial interview. For this participant, there seems to be an unawareness of the working world and how to establish work:

I kind of got tired of . . . going every day. I haven't [volunteered] worked since the Boys and Girls Club. . . . Basically [drawing on the computer], that's all I do. Probably about 2-3 [hours]. . . . I'll be able to place it in the game if I get hired somewhere. . . . When I get hired I can go in and program it when they teach me the code and things. . . . Like I show them what I want, and they tell me how to do it.

During a recent observation at the PSP, I learned that students have opportunities for work experiences. One student talked about how he was originally going to attend massage school because it was a blind-friendly job. Since attending the PSP, he has changed his goals when he discovered what he enjoys. He likes working with kids and enjoyed having experiences working with kids. It was a good job match, and now he is building his career in this area. He will be attending college to be a certified child development specialist. This student's experience is consistent with the rehabilitation legislation that focuses on finding vocational goals that are consistent with one's strengths. It is a winning combination that creates motivation and endurance because the student is interested. The participants in the current study did not seem to have an equivalent work experience during their time in residential training. For them, the work experience they have thus far was just a job, not a reflection of who they are as individuals.

THEME: SETTING GOALS

Sub-theme: Envisioning the Possibilities

The participants are still working toward their goals since the initial interviews. For some, it is a vague notion and a lot of time has been spent dreaming without a plan:

Still trying to figure out where to start, but I'm still hoping that becomes my dream, or you know, make it happen. . . . Oh, [I] look around on the internet [to research it]. That's where everybody gets their information these days. Moving out is always a goal. Moving out, becoming a graphic programmer. If I get those two, I'll have it made.

For others, envisioning the possibilities is tainted with feelings of fear instead of confidence. The more participants put off living independently, the harder it seems to embrace this step:

I'm planning on going back to work and living on my own. The only time I lived on my own was over there in Austin. I'm actually a little scared, but I don't know, think I can make it. It might be hard the first few days. Over the days, I had more hopes that things were going to be better. They actually are now.

Having confidence seems to provide the motivation for others to keep pushing through to the goal:

I think as far as my music, my dream for music goes, that was always there growing up. But I think it was more of a possibility than before because of my increased confidence and my optimistic attitude. . . . I think it amazes me . . . sometimes I wonder, "Why am I still in school?" It's so exciting to have that to look forward to. I think it's going to be a long hard road, but if it's something that I do want, I'm going to get it. Many ideas I plan to use in the future that I think will help me. It is a very exciting thing I think I have started for myself.

Likewise, other participants talk about their persistence and the meaning of their goal to attend college:

. . . it's going to be a matter of what I'm more comfortable with. I'm determined, and I'm hardheaded. Once I set my eyes, goals in my head to do something, then I'm going to do it. I'm not one for quitting . . . my goal is to graduate college and to move onto a four year university are mostly my own goals. But to feed the determination, my mom didn't have that option when she was my age to go to college, and I also want to do this, I

want to do it for her. . . . I also want to do it for myself because I want to say I did that. That was all me. I don't believe you can put a time limit on things. If you want to achieve them, sometimes it takes more time than you think it will, so you have to allow that time for it to happen. I have, as far as I can remember, I've seen that I've always achieved what I wanted to do. Or, if I didn't think it was feasible to reach that goal, I would alter it a little bit – something that I think would be a little bit more feasible.

Participants talk about altering a goal in order to reach it:

I set goals I'm pretty sure I can reach – think of it more like a step ladder. Get a goal go one step up, and then I get there and I'll bump it up a little bit. I just meant that's kind of the whole goal setting, goals too high to reach, so I set them in reach. It can go up to the next, once you reach one then you raise them up just a little more. It kind of works, usually [I feel] good for just a little while. Then I move onto the next problem. I learn how to do whatever it is. I keep saying that because most of the time I'm always finding new junk to do. It's kind of the whole, "Ha! I've figured it out, I can do it now."

According to the coordinator of the PSP, the brochure is the first document anyone receives when they want to know what the program is about. At the top of the brochure, the qualifications for acceptance into the program are listed. This list includes the phrases "planning to work and live independently" and "able to apply and integrate learned skills" (Program coordinator, personal communication, November 1, 2010). I believe these words represent a message of personal responsibility and expectations for students. The brochure communicates the nature of the program and it also emphasizes the program philosophy which is "We believe with training and the opportunity to achieve, a student who is blind can live and work independently in an integrated world" (Program coordinator, personal communication, November 1, 2010). Though I do not agree that the world is integrated as much as it can be yet, I do agree with the

overall philosophy stated here. Learning to be independent is the responsibility of everyone involved. The student must have the ability to meet the demands of the program and ultimately life responsibility; the program and parents must provide the student with the opportunities to learn. Everyone working together is a formula for success and the end result is independence. During my observations, I found these concepts in action. Each visit was filled with student anticipation of what was possible coupled with the exhaustion of hard work. I encountered staff who provided opportunities for students to succeed if they wanted to. Most importantly, I encountered parents during the parent weekend who began to have the courage to let their adult blind child go.

Sub-theme: Taking Action

The first step toward goals was establishing independent living after PSP. Since the initial interviews, nothing has changed for these participants. Those that were living with parents are still living with parents. Those that were living alone or with roommates are still maintaining this arrangement with the exception of one participant. Losing a roommate was the impetus for starting a business venture in order to pay the rent: "Moved to the house, lost the roommate, and that's really it, I needed help with making rent. . . . It was the whole, I'm not sure if I can afford this place now."

FOLLOW-UP PARTICIPANT BIOGRAPHIES

The following descriptive information is a summary of each individual case. Additionally, Table 6.1 on the next page provides a summary comparison of the participants at the time of the follow-up interview.

Participant interview	1	2	3	4	5	6	7
Participant pseudonym	Shea	Jessie	Harley	Casey	Pat	Lee	Terry
Congenital / adventitious blindness	congenital	adventitious	congenital	congenital	adventitious	congenital	congenital
Usable vision	yes	no	yes	no	no	no	yes
Completed PSP	yes	yes	yes	yes	yes	yes	yes
Post-secondary education or training	dropped out	in college	finished technical training, some college	in college	no college attendance	graduated college	no college attendance
Employment status	no	no	no	establishing own business	commission	occasional jobs	no
Living status	with parents	with roommates	alone	with roommate	with roommates	with family	at home
Preferred reading format	print	audio	large print, audio	braille, audio	audio	braille, audio	print, some large print
Relies on a cane for travel	no	yes	yes	yes	yes	yes	no
Community involvement	no	yes	yes	yes	no	yes	no
Relies on non-visual ILS techniques	no	yes	yes	yes	yes	yes	no
Uses adapted technology	no	yes	yes	yes	yes	yes	no
Involved with support groups	no	yes	yes	yes	no	no	no
Established steps towards goals	no	yes	yes	yes	no	no	no

Table 6.1 Participant Profiles – Follow-up Interview

Interview 1: Shea

Shea still lives at home and relies on parents for transportation. Since the last interview there has been no attendance in any educational or training program. Shea does not use a cane and reads print. Other than soaking steaks in coke, Shea reported not using any other alternative techniques since attending the PSP. Shea reported not relying on any non-visual techniques so there is no need to use adaptive technology but there are times when it is helpful to enlarge the font on the screen. Shea does not participate in any support systems or groups. When asked about friendships, Shea reported not having friends in town but maintained contact with friends in Austin.

At one time, Shea was hoping to work with family in a camera business but that didn't work out. Shea did volunteer for about 6 months at the girls and boys club but got tired of it. Shea reported liking how the kids would ask for help and this created a sense of esteem. Shea's grandmother helped to coordinate this volunteer opportunity since she too worked at the club. The volunteer position required 2 to 3 hours a day. At the time of the interview, Shea had a portfolio with 2 drawings to show for the effort however, according to Shea, it is hard to come up with ideas for drawings. So far the time spent searching on the internet has resulted in an occupational name for what Shea wants to do which is graphic programming. Though Shea does not know how to program, Shea reported the company will teach the programming required to create the art. Shea appeared to believe that having the idea was all that was necessary and the video company would provide the training to program the ideas. Shea reported having friends that are graphic programmers and testers and they write code on the side.

Shea felt adjustment to blindness was not an issue however skills are maintained through cleaning the bedroom and occasional cooking. Shea reported having the dream of moving out and working as a graphic programmer and had plans to return to Austin. Shea's parents will move to Austin as well to be able to help Shea. In the past, Shea's parents drove 6 hours once a month to help with grocery shopping because it was easier for Shea. Shea's brother lives at home and the family including Shea want him to move out and go on with his life. Shea reported telling the brother that he has so much potential. The house was up for sale and they will move to Austin when it sells. When asked about independence, Shea reported not wanting to say it had decreased because of living at home so Shea reported that independence had increased.

Interview 2: Jessie

At the time of the follow-up interview, Jessie was still in college, moved into a house and acquired a guide dog. A friend of Jessie's had a dog which influenced Jessie's outlook on traveling techniques. Jessie continued to hire drivers for each semester and in addition Jessie relied on family to help with transportation around town. Jessie had a lot of support through the college counselor and networked on campus to find readers and drivers. Jessie's mom is a continual support however over time this relationship has improved with feedback from Jessie on how to interact with a blind person. Jessie taught and guided family members and others on how to provide appropriate help and mostly to wait for the blind person to initiate asking for help before jumping in. Reliance on those alternative techniques learned at the PSP provides Jessie with the necessary skills of independence. Jessie's mom also provides cooking

techniques as needed and will change instructions for recipes so they are using non-visual techniques as well. Jessie reported being in the middle of researching colleges to transfer in the near future. The criterion is locating a college that is the most accessible campus. Jessie found a way to communicate with professors through email; otherwise a reader assists in accessing materials that are not accessible. Since the last interview, Jessie increased community activities and was vice president of student government and participated in many local fund raisers.

Jessie reported being determined and once a goal is set it will be reached. When support is needed, Jessie reported having blind friends to turn to. There are times when Jessie needed input on how to face a barrier and these friends were able to discuss non-visual approaches that were helpful. Jessie reported being ambitious and setting goals that are of personal interest and direction. The key for reaching goals as Jessie described it, was keeping a focus on the goal. Jessie's success is based on setting goals that were reachable but also flexible. For example, Jessie stated that it was important to realize that some things may take more time than originally thought so one should be adaptable. Jessie attributed these attitudes to past training in the PSP. Jessie was not looking for part-time work as mentioned during the first interview because accounting takes a lot of time and effort. Jessie changed majors because of having an affinity for numbers. Eventually, Jessie wants to be a CPA. As a blind person, Jessie reported having barriers but found ways to work through them by getting frustrated, seeking support and then picking a strategy to use. Jessie doesn't watch TV as much for fun since reading has become such an interest.

Interview 3: Harley

At the time of the follow-up interview, Harley was still living independently and continued to use alternative techniques. Harley used screen enlarging software and has usable vision. Since the last interview, Harley has developed a chronic condition that affects balance and hearing. Consequently, Harley reported being active in a support group for this condition. At the time, Harley was mentoring somebody in the support group who was losing vision. Regarding travel, Harley continued to travel independently but when needing to attend long distance specialists, family helps out with transportation. Harley reported having difficulty resolving increased dependency on others due to the onset of these chronic health issues. Harley was intent on maintaining independence but finds there are episodes of hearing and balance issues that require more assistance from others. These chronic health issues cost Harley the ideal job since it was with a major organization in the field that Harley trained for. These health issues are random and ongoing so even though the company was willing to adjust hours and schedule Harley found there were too many days when work wasn't possible. The company had to lay Harley off.

To cope with this great disappointment, Harley began to apply for other positions immediately. Additionally, Harley started doing free lance PR support for local musicians. Harley reported enjoying the local music scene and through networking began to work with local musicians on marketing and promotion. Harley found the music environment helped to keep a positive attitude and deflect the focus on the negative stuff. Harley is self described as being determined and energetic despite the current health situation. Harley's motto is to practice what you preach. Harley supports others with positive input and

encouragement trying to incorporate these personally as well. When first diagnosed, Harley reported being in shock but has learned to navigate the changes in functioning. Harley attributed the ability to move forward to having hobbies and desires. For example, Harley holds on to dreams of seeing the world. According to Harley, there was something more to reach for.

Harley felt the PSP helped to prepare for times like these because they taught students to adjust to changes. Harley takes full responsibility for choosing the right attitude, and believes it is an individual choice and not something others can give you. Harley's plans included working on recovering from these health conditions and getting back to work. Harley reported not looking into the future because it may be disappointing but Harley found strength in taking it one day at a time. Harley found that the occupation of choice definitely met personal interests and strengths. For example, Harley has always loved traveling since attending the PSP and hopes to find work within the field Harley was trained for as it entails a lot of traveling. Harley tries to focus on the good things and ignore the bad. It is important for Harley to maintain a sense of empowerment even though Harley felt independence has decreased.

Interview 4: Casey

At the time of the follow-up interview, Casey was still in school and navigating higher education with a learning disability as well as blindness. Casey reported being excited about college life however having a learning disability presented new challenges. Though it was difficult to be in college, Casey reported this being a dream and was finding ways to make it work out. Casey did not let these challenges present barriers but found ways around them.

Casey reported being hopeful and confident in dealing with these challenges and transferred the adjustment to blindness process to the newly diagnosed learning disability. Casey reported being aware of the difficulties and first accepts them and then takes the steps necessary to work things out. For example, Casey found the learning disability presented challenges in social situations so Casey takes time with these situations, practices positive self talk and is up front with others about the learning disability.

Casey also reported having increased independence and confidence. Casey still uses the alternative techniques acquired from the PSP. As a mentor to other blind friends, Casey found opportunities to teach others the techniques learned. Casey has become the vice president of a local organization and has started a self-employment venture. Casey attributed these leadership skills to the PSP experience. According to Casey, the PSP awakened the self-awareness of strengths and abilities. For Casey, it was the blind staff and seeing them in action that influenced Casey. Additionally, being exposed to other music students on campus motivated Casey to push toward the goal of being a performer. Casey was fully aware that the road will be long and hard but because the goal is self directed Casey was highly motivated to achieve it.

Casey reported having pride in the alternative techniques used by blind people and regrets that a lot of blind children don't learn Braille. Casey uses other non-visual techniques and adaptive technology. Casey described how barriers are faced and they are met head on. The ability to overcome fears was learned in the PSP. According to Casey, it requires being willing to face discomforts in order to achieve a necessary change. This increased tolerance for

difficulties, getting out of one's comfort zone, was first learned in the PSP and has continued ever since. One of the biggest challenges Casey talked about facing was growing a business. Casey has networked and established a web site, business cards, advertizes and has had some sales. Casey was able to articulate personal strengths, values, interests and preferences as they relate to career goals. Teaching and sales are the occupational groups that meet Casey's personality and indeed these are the training and work activities Casey was involved in. Casey has a clear sense of self in relation to the world of work and reported being an extrovert, social and creative. Casey reported liking the reward of meeting people's needs by delivering products they want. Casey also reported being positive and always looking to the future good that can come out of a situation.

Interview 5: Pat

Since the last interview, Pat has moved into a house and still relies on alternative techniques. The town Pat lives in is described as being small so Pat hires drivers to get around as well as relying on friends and family. Pat reported not having many friends and doesn't participate in any support groups. Pat described a typical day as being on the computer and researching whatever is needed. Since the last interview, Pat had completed the web site for the sales venture and has had a few calls here and there and a couple of sales. Pat didn't refer to it as self employment since it is still connected with the family business. If people find the web site, Pat tells them what is available and Pat described the arrangement as being the middle -man between the family business and potential customers. If they are interested in a product, Pat contacts the family

company to make arrangements. The collaboration began when Pat's roommate moved out and Pat needed to earn additional funds to pay rent.

Pat earned a percentage of the sales generated. When asked how this job matches Pat's interests and preferences, Pat reported not very much; however, being on the computer is interesting for Pat. Pat reported not having much to do with the family business, so Pat is not that involved with what they do. Pat was self-taught on web development and created the web site for the sales venture. Pat was self described as being persistent. Pat reported enjoying the process of figuring things out like a puzzle. Pat likes working toward a goal. Pat's dream was to have more customers since this business arrangement allows Pat to stay at home and browse the internet and meet the rent. Pat enjoys working at home and working on the computer which motivated Pat to come up with new ways to expand the business.

Pat reported maintaining the same self-concept and independence as previously stated in the last interview. Pat reported being more of a loner than when attending the PSP and is not a social type person.

Interview 6: Lee

Since the last interview, Lee reported completing the adjustment to blindness during attendance at the PSP. Lee reported focusing on getting street-smart, meaning focusing on obtaining rides and groceries, being assertive and taking care of business. Lee still lives at home but helps out with cleaning and some cooking. Lee just completed a degree in political science and is looking for work in the area of music. Lee is still involved with church ministries and networks with other musicians. Now and then Lee had music students and

occasional gigs. The business web site Lee wanted to get up and running at the time of the last interview fell through. Lee reported using a grass roots approach to getting a music business going by playing at music stores and demonstrating ability. Lee planned to take the summer off but hoped to have a job at the end of the year working at a radio station or working as a receptionist. Lee reported taking minimal action toward finding a job because the main focus is landing work as a musician, which had always been Lee's real passion. Lee's job seeking skills included looking on the web, calling stations and developing a resume. If the opportunity arises, Lee hopes to be a political analyst at a radio station which will put the degree in political science to use.

Lee didn't think blindness had much of an effect on life except when it comes to humor and fashion, both of which are areas Lee missed out on. Lee felt good about being flexible, especially by changing to a degree that was obtainable. Lee thought the music department put up a barrier by insisting Lee reads music. According to Lee, for one reason or another, the department did not want Lee there. Lee believed independence has increased since attending the PSP. According to Lee, the PSP did what they were supposed to do and they expected the students to run with it. Lee found it is best to be flexible when approaching something, keeping in mind an alternative path may be required. For Lee, the PSP taught this approach to daily life. During time at the PSP, Lee didn't think the environment was encouraging. Now looking back, Lee realized it was an issue of immaturity and not being ready to receive the lessons the PSP had to offer. Lee wished the training situation was a bit different back then, with Lee being smarter and more mature. Lee reported being able to handle

challenges better now and the PSP did a lot to challenge the students. Lee reported relying on past lessons learned during training to influence future outlook and actions.

Interview 7: Terry

Since the last interview, Terry's life has changed significantly. When Terry's brother moved out of their apartment, Terry decided to move home. This decision to move home, which was further away from work, caused Terry to quit a successful full-time position with a large national company. The company thought highly of Terry and wanted to assist in the relocation in order to keep Terry on the job. Additionally, Terry stated that a previous VR counselor would have also assisted in relocation in order for Terry to keep the job. Prior to moving in with parents, Terry did move into another brother's home but that lasted only a week. The brother was taking Terry back and forth to work but it was costing him too much time away from his own job since it took about an hour round trip to bring Terry to work. Terry did not consider living near the job independently. Terry reported not relying on non-visual techniques since vision is usable. Terry also reported always being with the mother since moving back home and relies on the mother for transportation. Seven months after moving home, Terry's wedding plans were canceled and a month later Terry had surgery. Terry traveled a lot with family and visited friends to cope with the disappointment of the break-up and other stressors. When asked about future goals, Terry stated interest in returning to work and living independently, however, it is a scary thought to do so. Terry stated not having a career or ever having one in mind. Terry described independence as decreasing since attendance at the PSP.

SUMMARY

This chapter provided a summary of the key themes and sub-themes from the follow-up interviews. Updated biographical descriptions were included to provide readers with more insight into the participants and the changes since the first interviews. This data is consistent with the objectives of the PSP, meaning the benefits of the program as described by the participants match what the program set out to do. There are, however, differences in individual outcomes which will be described in detail in the next chapter. In addition the next chapter will address how participants' lives changed over time and what factors may have influenced them. The next chapter will also provide interpretations according to hope theory. The research questions will be addressed as well as the limitations of the current study and its implications for future research.

Chapter Seven: Discussion

This chapter answers the underlying research questions and draws relationships, interpretations and conclusions from the previous chapters. The following discussion incorporates the conceptual framework of hope theory, researcher positionality and the findings of the current study. The chapter begins with a discussion of participant outcomes and the various interpretations. First, outcomes are discussed from the perspective of program outcomes, followed by a summary of outcomes according to the themes and finally the outcomes are interpreted according to hope theory. This is followed by a discussion of research questions. The chapter ends with a concluding section where recommendations are made followed by limitations and implications for future research. This chapter presents one interpretation of the generated data – not from a position of authority but from a position of curiosity. As mentioned in previous chapters, it is my world view, experience, theoretical frameworks and overall philosophy of life that influences my relationship to the data and it is based in having both an insider and outsider perspective. Furthermore, it is important to keep in mind these are interpretations of the narratives as they were obtained through interviews.

Qualitative researchers are interpreters who draw on their own experiences, knowledge, theoretical dispositions, and collected data to present their understanding of the other's world. As interpreters, they think of themselves not as authority figures who get the "facts" on a topic, but as meaning makers who make sense out of the interaction of their own lives with those of research participants (Glesne, 2006, p. 175).

INTERPRETATIONS OF PARTICIPANT OUTCOMES

The findings provide insight into the nature and quality of outcomes for each participant. Considering the information from both sets of interviews it appears that some participants exhibited expanded outcomes over time while others exhibited diminished outcomes over time. The established patterns increased, meaning those participants that exhibited independence continued to increase in independence, while those who were not independent continued to become less independent. Time had no influence on participants moving from dependency into independence and maturation did not play a role in outcomes.

Keeping in mind the readership of the current study, I decided to use commonly held expectations within the vocational rehabilitation field for initial illustration of outcomes. Reviewing the formal staff interviews, a question was asked regarding what consumers were expected to do after leaving the program. Three staff were interviewed, 2 from the rehabilitation agency and the coordinator from the PSP. All three staff answered in a similar fashion. The commonly held expectation for students after leaving the PSP is employment or post-secondary education (i.e., college, technical school, etc.). Additionally, they are expected to live independently: "they are either going to college or other post-secondary training or entering a vocational goal by getting a job, living independently using the skills they learned to pursue their goals" (coordinator interview, May 6, 2010).

Based on these expected post-secondary activities, the participants were first grouped according to employment or educational activity – those participants who are employed, in training, establishing employment and those who are not employed, in training or establishing employment. The activity of

participants after leaving the PSP which was obtained during the first interview is displayed in Figure 7.1. One participant was employed, 3 were in training, 2 were establishing employment and 1 was not active in any of these options.

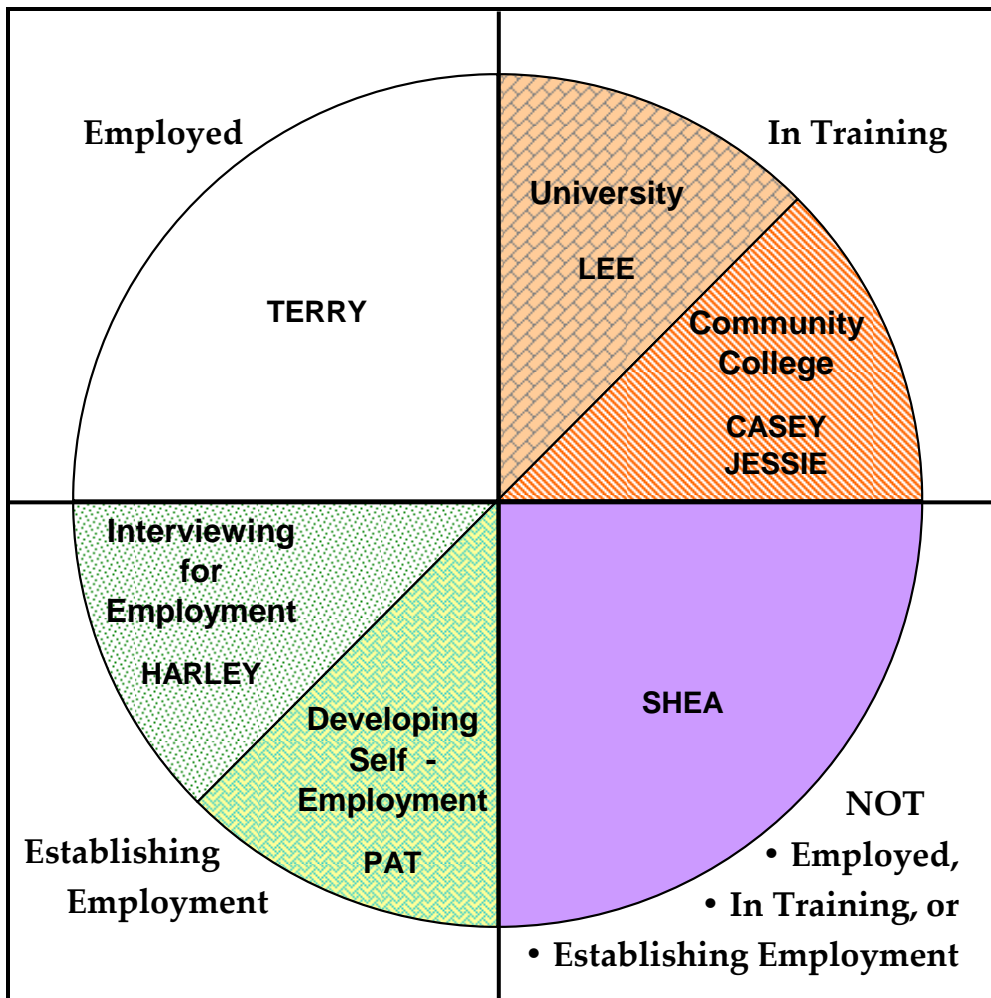


Figure 7.1 Post-PSP Activities at Initial Interview

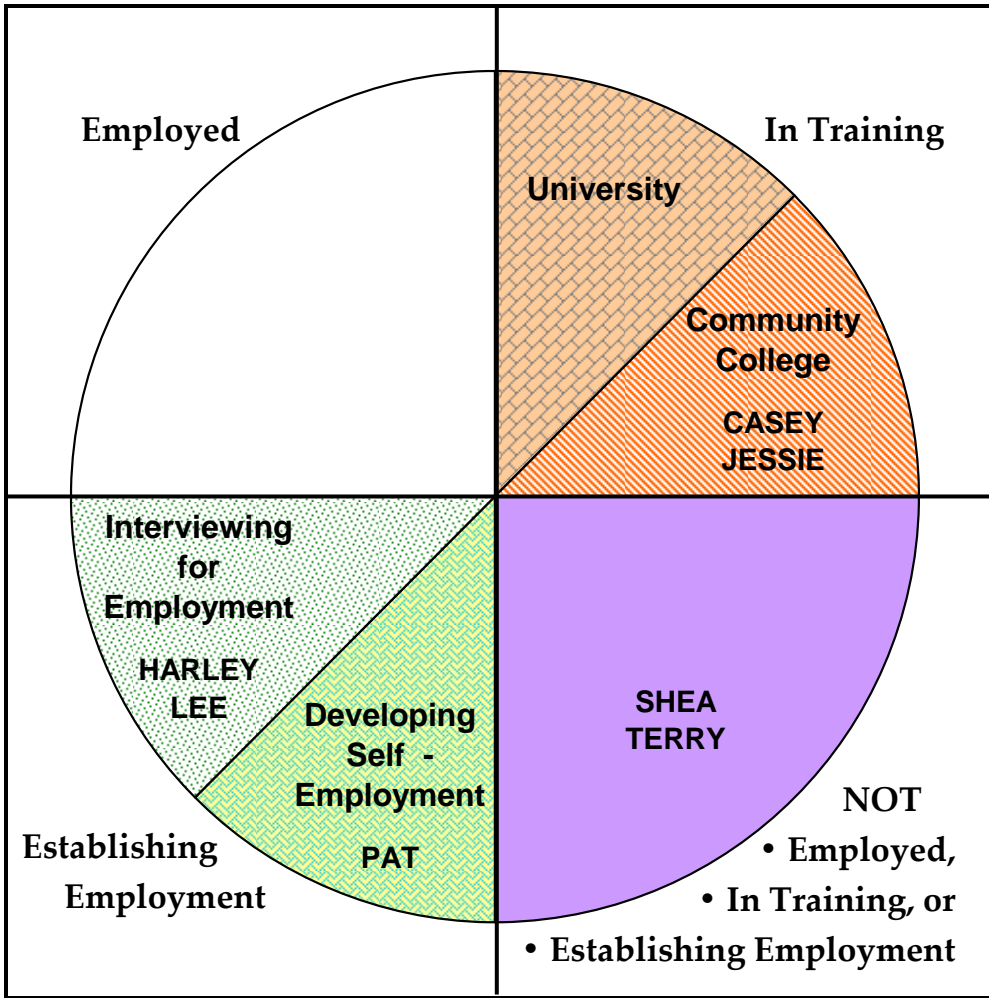


Figure 7.2 Post-PSP Activities at Follow-up Interview

Figure 7.2 shows the post-PSP activity almost 2 years later and this information was obtained during the follow-up interview. The participant that was employed at the time of the first interview was not employed at the time of the follow-up interview. At the time of the follow-up interview this participant was not looking for work, in training or employed, resulting in a total of two participants in this category. One participant graduated from the university and was trying to establish employment. The 2 participants that were in training at

the time of the first interview were still in training during the time of the follow-up interview. These participants were attending community college and hoping to transfer at some point in the future. The 2 participants who were trying to establish employment during the first interview were still trying to establish employment at the time of the follow-up interview. One of these participants did find work during the time between interviews but lost the job due to too many absences because of health issues. The other participant was trying to establish a sales venture under a family business and, at the time of the first interview, did not have a business plan. These participant groupings are based on the information they provided during the interviews. Additionally, they represent the primary function being done by the participants at the time of the interview. For example, if a participant is in college full-time but occasionally gets paid for singing, they are still represented in the "in training" group.

These post-PSP activity groupings according to employment or training activity only provide a part of the understanding of participant's lives after the PSP. Considering other factors such as those within the themes, i.e., cultivating confidence, incorporating skills, setting goals and navigating barriers, provided another perspective on the participant's life negotiation after attending the PSP. Based on trends found in the narratives, descriptive adjectives or behaviors were assigned to each sub-theme representing high and low life negotiation. For example, "direct" and "avoidant" were adjectives assigned to the dealing with barriers sub-theme because they represented trends across the narrative data. Each participant, according to the sub-themes, was rated low, moderate or high depending on the narrative content. This resulted in life negotiation grids for

each participant which are displayed in Appendix B. The individual grids are based on the multi-case displays and their conceptual context.

Based on a qualitative judgment, the cases were compared according to the content of their narratives and arranged by the extent of individual outcomes as represented in the narratives (Miles & Huberman, 1994). Consequently, the participants were grouped by their rankings on the life negotiation grid. They are divided into a low, moderate or high life negotiation group depending on the trends identified throughout their narratives. The life negotiation model (see figure 7.3) shows the overall grouping of participants and the qualifying features of each group. This summary model provides a cross case depiction of life negotiation trends over time since leaving the PSP. A summarative illustration of the participant groupings according to themes provides readers with a comparative analysis of outcomes. It is a condensation of the multi-case data displays which further reduced the data and highlighted trends (Miles & Huberman, 1994). This model shows the descriptive phrases based on the narrative data that indicates the style or patterns found within the narratives. Some participants were clearly high negotiators, others were clearly low and the rest had a combination of both within the narratives. The high negotiator group represents the intended program outcomes as well as the confidence builders philosophy. They also seem to meet the intentions of the rehabilitation act which emphasizes the importance of consistency between personal strengths, interests, abilities and social integration through training, competitive employment and inclusion into society.

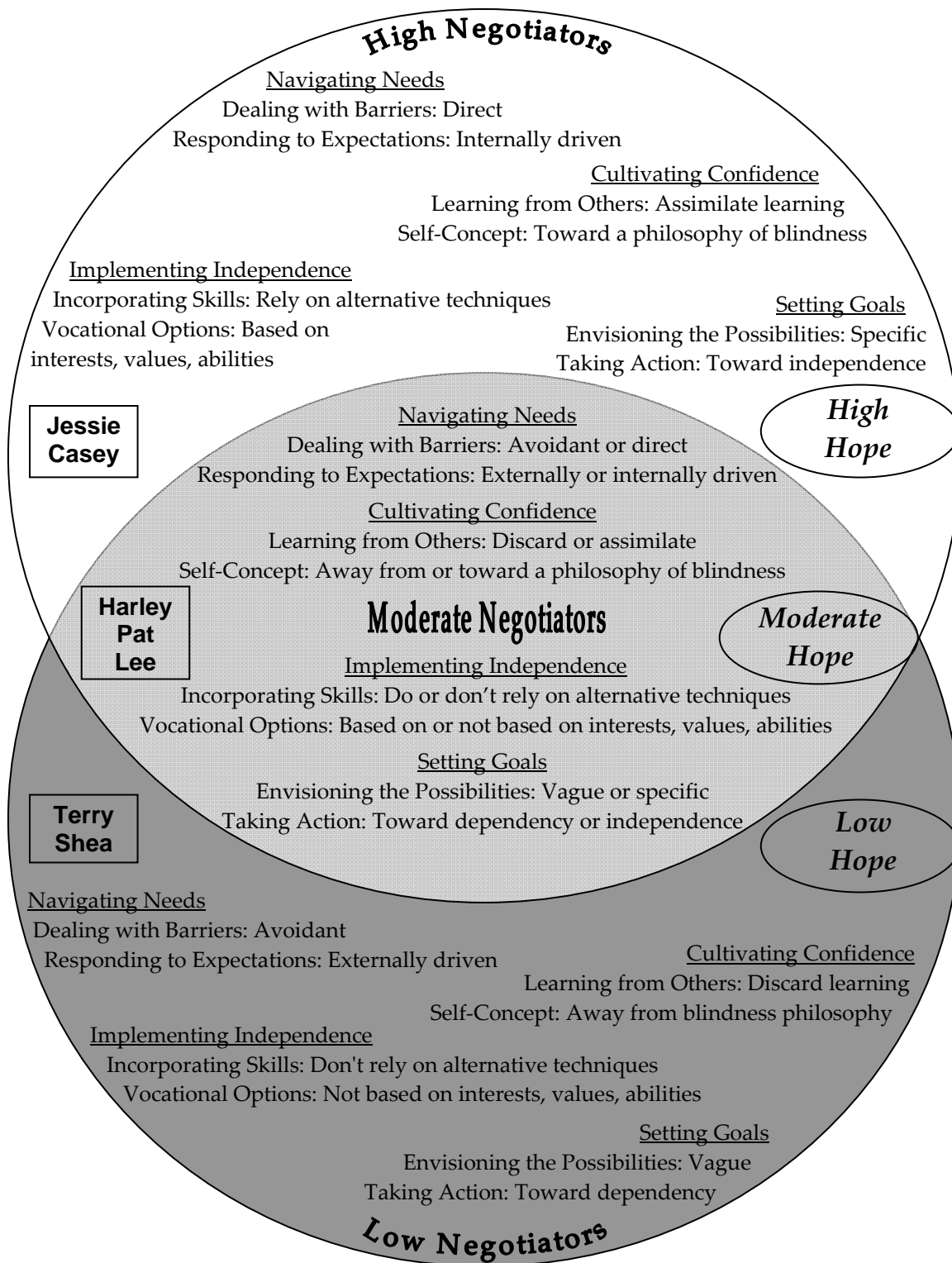


Figure 7.3 Life Negotiation Model

Additionally, the narratives were analyzed for hope language. Each participant narrative was reviewed for language that represented pathway or agency thinking as defined in Snyder's hope theory. I was looking for evidence of pathway thinking – the ability to find routes towards goal pursuits – and agency thinking – the motivation to use those routes. I assigned a low or high value for each type of thinking found in the narratives. This was done to assist in understanding the level of hope found within each narrative. These hope trends were not assessing the participants but describing the amount of hope found in the narratives. The amount of hope found in the narratives provides insight into the outcomes for each participant.

In order to analyze the narratives, the instances of agency and pathway thinking were identified for each participant according to sub-theme. Based on the presence of pathways and agency, the narrative was assigned an indicator of high or low presence of pathway or agency thinking for each sub-theme. These indicators for each participant according to each sub-theme are shown in summary Table 7.1 on page 156 and serve as a next step table as discussed by Miles and Huberman (1994). The count of high incidence of high hope indicators for pathway and agency thinking were totaled into a numerical value for each participant. In this way, the number of high hope and low hope descriptors from Snyder (2006) were used to group participants into the low, moderate or high hope groups. "The narrative—the telling or the writing—is always an interpretation of other peoples' lives, an interpretation that qualitative researchers struggle with representing" (Glesne, 2006, p. 196).

Hope theory describes people in terms of low or high hope. According to Snyder (2006), high hope people:

- Work through challenges
- Have positive and active emotions about goals
- Have a sense of zest about goal pursuits
- Set goals based on a personal standard
- Choose goals that require effort and are attainable
- Strengthen themselves to meet challenges through positive self-talk and increasing agency
- Are better prepared to deal with challenges
- Are task focused and move forward in pursuits
- Use alternate pathways or vigorous agency to deal with barriers
- Use prior lessons and perceptions to help with goal pursuits
- Have more desired goals that are realistic, are less distracted from goals, are more equipped to deal with onset of diseases and chronic conditions
- Take a positive stance on improving their conditions
- Do not deny that a problem or a disease exists
- Have less psychosocial difficulties, participate in collective action to achieve a goal that would be impossible for one to achieve alone
- See oneself as a causal agent in outcomes.

Likewise, people with low hope:

- Have long term negative effects from barriers
- Deflate agency in the face of challenges
- Rely on ineffective and interfering strategies

- Remain frustrated and blocked in goal pursuit stuck
- Allow stressors to derail goal pursuits
- Allow feedback from failures to reduce the intensity of the next goal pursuit
- Find it attractive to abandon difficult goal pursuits
- Ruminates on failures and creates self-doubt, lowering agency
- Over time has less interest in goal pursuit activities
- Has fewer goals and more difficulties.

Unlike Snyder's theory, which emphasizes the difference in high and low hope people, the narrative analysis on pathway and agency thinking resulted in three participant hope groups. The participants were divided into low, moderate and high hope groupings. Though the presence of both agency and pathway thinking are necessary to be assigned to the high hope group, there were significant differences among the remaining participants which warranted creating a moderate hope group for those participants who exhibited high and low pathway and agency thinking in the narratives.

The participant narratives according to sub-theme showed many combinations. Some narratives showed both pathway and agency thinking, others had both high agency and low pathway or vice versa, and other narratives had low pathway and low agency thinking. The narratives that had both high agency and low pathway or vice versa were in the moderate hope group. Again, this is a reflection of the hope within the narrative and the understanding of its relationship to the individual outcomes.

Theme	Subtheme	Hope Language	Low Hope		Moderate Hope			High Hope	
			Shea	Terry	Low	High		Casey	Jessie
					Lee	Pat	Harley		
Navigating Needs	Dealing with Barriers	Pathway Thinking							
		Agency Thinking							
	Responding to Expectations	Pathway Thinking							
		Agency Thinking							
Cultivating Confidence	Learning from Others	Pathway Thinking							
		Agency Thinking							
	Developing Self-Concept	Pathway Thinking							
		Agency Thinking							
Implementing Independence	Incorporating Skills	Pathway Thinking							
		Agency Thinking							
	Pursuing Vocational Options	Pathway Thinking							
		Agency Thinking							
Setting Goals	Envisioning the Possibilities	Pathway Thinking							
		Agency Thinking							
	Taking Action	Pathway Thinking							
		Agency Thinking							
Total Count - High incidence of hope language			0	0	6	10	11	16	16

□ = Low incidence of hope language ■ = High incidence of hope language in the narrative

Table 7.1 Hope Interpretive Display

RESEARCH QUESTIONS

Question 1: What participant characteristics and qualities influence their individual outcomes?

The participants were divided into life negotiation groups based on the information in their narratives. This question is addressed according to the similarities of participants within the life negotiation groupings.

High Negotiators

The participants in the high life negotiation group had distinctive and similar qualities. Participants in this group had high ratings on all 8 categories of the life negotiation grid. When looking at the overall themes and sub-themes it appears the high negotiators tended to relate to the world in a positive and energetic fashion. When navigating needs, these participants responded to expectations based on internal cues rather than external ones. For example, these participants detached from parental expectations even though it was difficult. They also indicated having positive feedback from their moms as they were growing up. One participant referred to a positive upbringing and attributes success to being taught optimism. The other participant spoke of how the mom still continued to have expectations for continuing household chores after vision loss. These narratives reflected both dynamics, low parental expectations for living independently however high expectations to achieve in early development. When dealing with barriers, they had a more direct approach even though it may have caused some stress and frustration. These participant narratives were full of examples of how they navigated needs over time since attending the PSP and mostly there was no settling for anything less. They had a

firm stance and a sense of what needed to be done in order to move forward and find their place in the world.

When looking at how these participants cultivated confidence, there were clear patterns within the narratives. These participants were the ones who embraced the blind mentors to which they were exposed. It was not an issue of just receiving help from the mentors, it was more than that. These participants saw a vision for themselves of what they could be; clear and personal identification with the blind mentors was evident in the narratives. One participant was congenitally blind and the other adventitiously blind and for both, the exposure and immersion in blindness was an articulated relief. For the first time, these participants found confidence in themselves through relying on alternative techniques and developing a philosophy of blindness. Like the other participants, they discussed the difficulties and even the resistance to meeting program expectations, however, at some point it was transformed into expectations for self. The resistance turned into assimilation and ultimately confidence. Cultivating confidence was not something limited to attending the PSP; for these participants, the confidence continued over time and their examples in the narratives provided evidence of the confidence they claimed to have. Belief in themselves seemed to occur in conjunction with the accomplishments they were achieving and which were consistent with their articulated strengths.

When looking at how these participants incorporate skills, they articulate their reliance on alternative techniques. One participant talked about continuing to inspect the kitchen and rating it just like the inspections done in the PSP. This

participant wanted to keep the skills up and found that rating the cleanliness was a good way to keep aware of how the techniques are working. In fact this participant had roommates double check cleanliness and assign a rating periodically. The other participant taught these alternative techniques to other blind friends who did not attend a program like the PSP. For these participants, alternative techniques were not just things you have to do but a key to their freedom and functioning. These participants also continued to learn additional techniques beyond those learned at the PSP. Again, it was not always embraced. One participant talked about the resistance at the beginning and wanting to hold on to old ways of doing things but resolved these difficulties by incorporating new ways of functioning. Additionally, both of these participants had a clear sense of self in relation to the world of work. They had a sense of strengths, interests and abilities which are consistent with their vocational pursuits. One participant had started a business with clear steps implemented to make it a success. The other participant uncovered a love for numbers and has served as vice president of the student council on campus. Both participated in other organizations and community events.

When setting goals, these participants met the first program goal of living independently. Over time, they still lived independently and this was an identified individual goal upon leaving the program. There seemed to be an underlying fear of losing everything they gained from the program if they returned home. They both lived with roommates and found their apartment through an apartment locator. They moved away from their home town and, though their parents didn't understand or agree, these participants were willing

to handle the discomfort for a greater goal. Both participants spoke of how they facilitated change in the parent/child dynamic. Although parental misconceptions existed, these participants took responsibility for changing the nature of this relationship. When envisioning the possibilities, these participants were articulate about goals. They had specific timelines, clear steps, and a back-up plan. Additionally, both were realistic about the amount of time it would take to reach their goals and articulated a clear flexibility around timelines. For example, in addition to getting the degree they are in training for, they had other ideas about the type of related work they can do to fall back on. Their future dreams were again, self directed, clear and related to their own interests. One other factor worth mentioning – they both discussed researching their goals and making decisions on what they are researching.

Moderate Negotiators

The three participants in this group had a mixture of characteristics and qualities. They ranked high on some trends and lower on others but over time, they did not have a clear trend toward high life negotiation. Participants in this group had 4 to 6 moderate ratings out of 8 categories of the life negotiation grid.

When looking at how these participants responded to expectations they had more examples of being externally driven. Unlike the previous group, these participants had a different way of navigating needs. The emphasis on being perceived a certain way influenced their ability to meet needs. The outside world needed to change or be educated in order for them to have a chance at what they wanted. When dealing with barriers, the style was less direct and more cautious than the previous group. Blaming others for something not being achieved was a

common pattern for two of the participants in this group. For example, one participant changed majors and attributed it to attitudes of the department rather than taking steps toward other ways to meet vocational interests and passion. The other participant blamed the PSP program for why they didn't get things done. When asked about barriers, the third participant reported not being aware of any barriers in life at all. This same participant also reported a typical day was sitting on the computer searching the internet and checking email. Another common pattern was the way participants personalized barriers and turned inward. For example, one participant considered it a personal failure if others were not first educated about blindness upon a first meeting. Another participant struggled with not finding work by a particular deadline and spoke of getting depressed and wondering why it wasn't happening "for me". The strategy for coping with the disappointment of not finding work after one month was to take a vacation from it all. This participant seemed to have unrealistic timeframes for finding employment and when asked about job seeking strategies, the dialogue was vague and did not indicate clear collaboration with job placement services.

When looking at cultivating confidence, the participants varied in responses. When learning from others, they had moderate to low scores on the negotiation grid. These participants ranked somewhere between discard and assimilate when it came to learning from others. One participant reported keeping a distance during the time at the PSP and not wanting to ask questions. Learning from other students was troublesome and the emphasis on immersion training was referred to as the "blind ghetto". The only role models or mentors referred to were parents and a sighted staff member during the training that

provided help after hours. Another participant talked about how the blind mentors taught a different technique but there was no other articulated relationship occurring for that participant beyond getting help. The mentors did have an influence but not in terms of personal identification; they were not internalized as with the high negotiator group. Learning from other blind people was valuable but there were clear distinctions between the narratives and how much learning occurred. One good reason could be that these participants did not have the same teachers or PSP coordinator which contributed some variability in the learning environment. The identification with the blind mentors in the high negotiator group did not seem to occur for the moderate group though all 3 participants had no usable vision. When looking at responses on developing self-concept the scores were moderate to high on the negotiation grid. These participants ranked somewhere between moving toward a philosophy of blindness and moving away from a philosophy of blindness. Two participants talked about the difficulties of being blind and still dealing with these issues. For one, blindness separated them from humor and fashion. Another participant talked about still focusing on how others think of blind people and their unwillingness to befriend a blind person. This participant used the self descriptor "burden" in describing a friendship with a sighted person and their role in the friendship. These participants did not appear to have adjusted to their blindness in such a way it was no longer an issue like the high negotiator group. Adjustment to blindness was not the only adjustment needed. They also reported having struggles with emotional, physical and mental challenges as well. Both spoke of difficulties with change. The third participant showed a little

more confidence since the narrative seemed to capture the newfound ability to do things in a different way, but references to overall philosophy of blindness were limited to doing something in a different way, not an overall psychic change like the high negotiators. According to DBS confidence builders (TDARS, 2008) and Omvig (2002), it takes more than alternative skills to create confidence and overall positive personal attitudes about blindness.

When looking at implementing independence, the three participants were moderate to high at incorporating skills. Two of the participants were congenitally blind and the other was adventitiously blind. All participants had the ability to use alternative techniques. There was indication they chose not to use all of them. One participant reported relying on family for rides because it was more convenient. The other two participants use a variety of skills. All participants in this group relied on family more than the high life negotiators. Two participants in this group had a lot of dialogue around parents and they indicated a significant involvement still with parents after leaving the PSP. When considering the vocational pursuits of this group, two participants ranked moderately while the other had a high ranking. The two participants that had moderate rankings were similar because they both were aware of vocational interests; however, they were pursuing vocational options that did not match these interests nor did they take clear related steps toward their interests. One participant had passion and ability in music but ended up pursuing a degree in political science and upon graduating, was looking for work in music. The other participant reported not being a people person but having an affinity for computers. This participant was trying to do sales for a family business.

Both of these participants report wanting to start their own business but they did not have a business plan or could not articulate clear steps to making the business happen. The best way to describe the pattern of these two participants is "not serious" as they stated. One described the sales venture as "nothing major". The other described looking for work with "minimal effort" after graduating from college but instead trying to land gigs. In general, these two participants had random work activities not based on a particular interest or vision for oneself; they did not have plans or steps toward a vocational goal. When asked about types of job supports being used for finding employment, they reported not using any. The third participant ranked in the high end of this category because like the high negotiators, there was a clear sense of personal strengths and interests tied to training areas; there was evidence of vocational relatedness and consistency. All participants in this moderate group over time were not moving toward their vocational interests for one reason or another since leaving the PSP.

When looking at the theme of setting goals, two participants scored moderately in taking action. Both participants left the PSP and relied on family for living arrangements. One participant moved home and the other had parents find an apartment. The third participant found a place to live using an apartment locator and met the first goal of moving out. For this participant, losing a roommate was the impetus for needing to find employment. The actions taken seem to be in response to an event and not self-generated out of personal expectations.

When looking at the sub-theme of envisioning the possibilities, two participants ranked moderately in this category. They both had vague goals with unclear steps of how they would attain them. One participant described it as "kicking ideas around but nothing too serious" when talking about the future. The third participant had a clear sense of goals as they related to personal interests. When looking at the participants in the moderate negotiation group, they ranked high in some areas and moderate in others. They had strengths in some areas such as skills but not in others such as confidence. Based on the overall tone of the narratives, the best way to describe the moderate group is being in process and still figuring it all out. The challenge for this group of participants seemed to be finding ways to move forward with clear goals and steps that meet internal needs. It is conceivable that if they start navigating their needs and find ways to use their strengths, they will find more confidence as blind people. In these cases, it wasn't enough to know alternative techniques; more needed to happen in terms of finding motivation through a sense of self, identifying clear goals and steps as well as finding ways to adjust to the sighted world and its misconceptions. Overall, confidence needs to increase and this happens through doing, according to the high negotiator group, the PSP, DBS confidence builders (TDARS, 2008) and Omvig (2002). All 3 participants were still very connected to family, yet they have some independent functioning.

Low Negotiators

The two participants in this group had similarities that ranked them in the low negotiation group. Though they report they got everything they needed out of the program, both participants talked about the PSP as something outside of

themselves. For them, it was a task that had to be done; they spoke of it as if it was imposed on them. They were externally driven when it came to expectations and lacked a clear expectation of self. One participant referred to it as having to do the independent thing. The other participant talked about wanting to hang out with friends instead of participating in a PSP activity. For this participant, independence meant asserting oneself against the program staff. These participants didn't seem to indicate they embraced the goals of the program and in some ways indicated unresolved resistance. They spoke about their parents and depicted situations that reflected low parental expectations for them. When it came to dealing with barriers, these participants had a passive way of dealing with them. They lacked self-reliance and the ability to find ways to resolve difficulties even when the participants were aware of alternatives to the withdrawal. One participant quit a job as a solution and the other dropped out of college as a solution.

Like the previous group, these participants did not seem to identify with role models or mentors as much as the high negotiator group. Other blind people showed them a task but in terms of learning from others, this was the extent of the interaction as it related to learning a task. The identifying that happened for the high negotiators did not happen for this group. In addition to reasons previously mentioned, one could speculate it was due to conflicting concepts surrounding blindness. One participant did not use the word blind and over time, both relied less on the alternative techniques learned during the PSP. Over time since leaving the PSP, the trend was away from a philosophy of blindness.

Overall, these participants did not have a sense of confidence in themselves and there were additional factors that contributed to the lack of confidence.

One participant reported always being with the mother while the other was only expected to keep the bedroom clean at home. It appeared both had returned to a dependent role within the family system. The two participants were similar in the way they pursued vocational options. Neither one has a clear sense of personal strengths that are related to occupational categories or related training. One states they never had a career goal and had no idea what they wanted to do in the future. The other participant had no sense of personal strengths in relation to the world of work. These participants lacked career maturity and their challenges are complex due to their limited life experience which is common for people with congenital conditions (Szymanski, Enright, Hershenson & Ettinger, 2010).

Regarding taking action, these participants were increasingly moving toward dependency. Both were living with family and had less responsibility over time since leaving the PSP. When looking at envisioning the possibilities, both were vague about future goals and the necessary steps to achieve them. They were looking to others to help them move toward independence instead of creating a vision based on self direction. One participant was waiting for the family to sell the house so they could all move to Austin. This participant reported the parents were moving to Austin so they could help out. The other participant was waiting for a reconciliation with an ex. Both participants indicated they had reservations about moving forward. One stated being scared to live independently while the other reported not having the confidence to

approach companies; neither articulated clear steps to start moving in a forward direction toward self interests and goals. In this group, the family dynamics appeared to be heavily enmeshed; a sense of self was lacking especially in terms of identity away from the family. They both had usable vision yet they were the 2 participants with the least sense of self and direction which implies that success is not vision specific. The best way to describe this group is underdeveloped and resistant to moving into adult roles and behaviors. During the residential training, these participants performed the non-visual techniques; they just did not incorporate them as a new lifestyle once having left the program. Based on their narratives, alternative techniques were not internalized as tools towards personal freedom and enhanced functioning.

Question 2: What trends illustrate either high or low hope among the participants?

High Hope Trends

According to Snyder, hope requires both pathway and agency thinking. Keeping with his definition, the hope analysis indicates the high negotiators group had the most evidence of pathway and agency thinking in their narratives. All of the characteristics found in the high negotiator group are consistent with Snyder's characteristics of high hope people. These participants exhibited zest in the interviews, increased goal pursuits, did not deny difficulties but found ways to work through the barriers, had clear and internalized goal pursuits that required some effort and did not see themselves as victims but saw their chronic conditions as a small part of their identity. One participant had recent vision loss and the other a recent diagnosis of a learning disability; both have dual chronic

conditions in addition to being blind. These participants also refer to having early feedback that influenced overall positive thinking as being a causal agent in making things happen. Most importantly, these participants indicated a tolerance for stress and discomfort in order to reach something better.

One interesting observation on the hope interpretive display is that only the high hope participants have both agency and pathway thinking in the "responding to expectations" sub-theme. This suggests that in order to have high hope it is necessary to develop the ability through pathway and agency thinking to find ways of dealing with the expectations of others which includes parents, programs, others and oneself. This is consistent with Omgvig's (2002) insistence of the importance of coping with the sighted world. Responding to expectations is a sub-theme of navigating needs. The high negotiators have found ways to be internally driven while being direct in dealing with barriers. Responding to expectations is the one category the other participant narratives didn't have. One last trend was the association with other groups. Besides being involved in the community these 2 participants were involved with blind consumer organizations.

Low Hope Trends

As previously mentioned, the low hope group did not have pathway or agency thinking for the sub-theme "responding to expectations". The two participants in this group resembled the low hope characteristics mentioned earlier in this chapter. They are dependent on family for most needs, did not seem to identify with any blind role models or any mention of any type of role models. They did not appear to assimilate the learning in such a way that it

created a psychic change. These participants had no particular goal and appear to have blocked future vision for themselves. According to Szymanski et al. (2010), people with congenital conditions like blindness have flat career interests; this is also referred to as a "diffused personality" from a career development perspective. When faced with barriers or challenges, the participants in this group withdrew. Based on the theory of hope, it appears the feedback from failures decreased any agency for future goal setting or attainment. They were not involved in any groups and reported not having much to do, yet these two participants seemed to have good health, reported no emotional or mental challenges and had functional vision. It appears that hopefulness is not vision specific. These participants indicate having families with low expectations and one draws the association between these low expectations and feeling like doing anything is impossible. Denial seemed to be a part of the language in the narratives as avoiding difficulties and having low tolerance for discomfort were present.

Besides navigating needs, setting goals was also absent for the low negotiation group without pathway or agency indicators in this category. The theme of cultivating confidence had few agency and pathway indicators and implementing independence had one indicator. This reflected the gaps within the overall vocational, personal and social aspects of the low negotiator group.

The moderate negotiators group according to Snyder's theory would still be considered as having low hope because both agency and pathways need to be present. These participants had almost equal numbers of high and low pathway and agency indicators. Like the low hope group, these participant narratives

lacked agency and pathway thinking in the sub-theme of responding to expectations. The themes of cultivating confidence and setting goals had 1 to 3 low pathway or agency indicators. The moderate hope group like the moderate negotiator group had pockets of high attitudes and abilities. This group had high rankings on some sub-themes but not on others.

To summarize the relationship of hope to all 3 groups, pathways and agency begin in early childhood. They begin when the child understands their role as a causal agent in the environment. This begins with the parental influence and continues throughout development. Of all the factors discussed in the participant narratives, it would appear that the parental influence had tremendous influence on the participant outcomes. The main trend was found in whether participants moved home or not and to what extent parents were still involved with the daily life management of the participants. Even though the PSP was a strong force for independence, for some, it appeared to not be enough time to break the lifelong patterns of dependency. As one author states "a lifetime of unlearned details inundates even the persons most determined to be responsible for themselves" (Morrison, 1974). Another aspect of hope theory that relates to understanding the narratives is that for those participants in the high hope group, tolerating the discomfort of moving toward independence was developed because of wanting something more, that is, a personal goal with internal value. Hope theory highlights the importance of goals being directed from within and having personal value.

Question 3: What were the most significant program components and how did they impact the participants during and after residential training?

Across the cases, the participants spoke about the cooking, cleaning and travel. This was by far the most significant aspect of the training for participants as they did not have the ability or confidence to perform these tasks for a variety of reasons. For some, it was needing to learn non-visual techniques; for others it was being expected to use these skills. The participants varied in their long term assimilation and reliance on these non-visual techniques. Those in the high negotiator and high hope group used all of these techniques and more, they have expanded this learning. Those in the low and moderate groups vary but did not use all of the techniques learned at the PSP. One participant spoke about the importance of the inspections and how important it was to have them frequently. This made a difference for the participant in that frequent inspections provided the impetus to put the skills into use and master them.

The student-directed programming made a difference for most participants. Being able to set goals and being self-directed was significant to the high negotiator group. Having blind mentors and blind staff made a difference for all of the participants though some it was to the extent of learning a task and for others it made a difference in overall self-concept. One participant referred to the academic training and was using these skills currently for business purposes.

Across the cases, all participants stated they would not be where they were at the time of the interviews if it were not for the program. They all felt they were more independent than prior to attending the program though some had set-backs in independence at the time of the follow-up interview. Learning to do things differently and developing a mind set of structured discovery was most

significant for the high negotiator group. This group attributed their current abilities to approach problems to the collaborative learning that is a part of the program. For other participants, this kind of learning was a challenge as it required exploring, asking questions and being self-directed which points to the student readiness for this program rather than the specific components of the program.

Question 4: How does the post-secondary program training foster hope?

As previously mentioned, the program is a student-centered process where living life independently is the goal. Similar to Snyder's hope theory, the program tries to help students establish themselves as causal agents in their world, meaning learning to set goals, meet them and be self-directed. The emphasis is not on deficits but on strengths. The response to failures is to learn from them and try again. For example, if a student is lost on route to a destination, it is seen as an opportunity to gain more skills in travel and problem-solve the experience. In many ways, the PSP is helping participants to developmentally make-up what was missing previously. According to Snyder, children learn at an early age to make causal linkages in their environment in which they understand themselves to be key players in creating outcomes. The program aims to help students be successful by helping them to establish this connection between themselves and their outcomes. In doing so, it can be concluded that the PSP tries to teach students to have high hope. Some are more ready for this than others, some require a different way of instruction than others but hope according to Snyder can be learned.

One of Snyder's tools for teaching hope is what he refers to as hope coaches. The PSP surrounds the participants with blind mentors and the participants spoke about the importance of having blind staff role models. According to Snyder, these hope coaches facilitate learning, trouble shoot disability specific issues and model appropriate and effective behavior.

The pathway thinking that is so necessary for hope is the inherent purpose of alternative and non-visual techniques. The program teaches students how to think out of the visual box and be creative when it comes to meeting challenges and functioning competently and confidently as a blind person. The classes at the rehabilitation center (CCRC) had a lot of influence in this area. In addition to having blind instructors, they taught the participants about alternative pathways through using non-visual techniques. These classes had influence on the participants and some still kept in touch with the staff and friends made during their attendance at the PSP. Snyder's emphasis on identifying alternative routes to desired goals is one of the main philosophies taught at both the rehabilitation center and the PSP.

Similarly, the program helps to increase student's agency thinking, i.e., it aims to increase the motivational thoughts in order for participants to use these identified routes. In other words, they believe in the students until they can believe in themselves. This is also inherent within the confidence builders initiative of DBS (TDARS, 2008) of which CCRC is a part. This partner agency has influence on the PSP because the participants attend many of their classes at the center. According to Snyder (2006), hope can be taught through aiding participants in setting clear and sustainable goals, increasing pathway thinking

and agency thinking. The program appears to be focused on teaching hope and it is doing so through believing in the abilities of blind people, providing opportunities for learning and living independently and through setting goals with participants that can be reached.

CONCLUSION

The current study extends the work of Jackson et al. (1998) by showing a relationship between hope and life negotiation beyond residential training for blind adults. The model in figure 7.3 shows the themes and associated descriptive phrases within high hope participant narratives and those associated with low hope participant narratives. This study was created to gain understanding about blind adults and their lives after attending a residential rehabilitation program and the role hope plays in their life negotiation. The information was gathered over a period of time and coded and re-coded for identification of main themes. Additionally, the information was analyzed according to Snyder's hope theory by identifying pathway and agency thinking within the participant narratives. It was learned that the participant perspectives about their residential training were consistent with the program objectives, meaning the participants felt they got the results they wanted from the program and they described getting training consistent with program goals. The differences seemed to emerge after each participant left the residential program. Insights were gained from the participant narratives such as those factors that appeared to make a difference in overall individual outcomes. The level of parental influences, reliance on alternative techniques, identification with mentors/role models seemed to have impact on individual outcomes. Other

factors such as level of pathway thinking and agency thinking and overall role of hope in navigating needs seemed to be particularly influential. Being consistent with Snyder (2006), those participants that had a clear sense of self and personal goals were the ones with the most positive outcomes. One narrative illustrated the need to match competitive employment with personal interests, skills and values. In contrast to early rehabilitation literature discussed in chapter two that emphasized the importance of being unrealistic in goal pursuits (Wright, 1968), the participants who had realistic timeframes associated with clear articulated goals were the ones with evidence of positive individual outcomes. The results of the current study have significance in the area of education, development and vocation.

Education

One of the most striking aspects of the participant data was the strong emphasis on the cooking, cleaning and travel skills. When considering all of the aspects the program offers, it was surprising to find such an emphasis on these components. Across the cases it had the most impact for the participants. This was a curious phenomenon since many of the participants spoke of attending prior training programs. It appears there is a need for more enhanced applied learning for blind children so they don't have to wait until early adulthood to learn how to perform these tasks of independent living. It is conceivable that if participants had these skills developed prior to entering a residential program, more emphasis could be given to vocational development and world of work activities. Surprisingly, this study reveals more about the education of blind children than it does about the rehabilitation of blind adults.

Early exposure to blind mentors and even paraeducators could augment the education of blind children. One model worth considering is the successful approaches of socio-cultural scaffolding used for the education of minority populations which can be transferred to the education of blind children (Rueda, Monzo, & Higareda, 2004). The use of paraeducators can be incorporated to scaffold the learning for blind children. It has been said the education system has substituted inclusion for the mastery of blindness skills and more cross systems collaboration with the schools for the blind need to increase (Hatlen, 2002). Blind children are not graduating with the skills they need to move into adulthood and often need to take time out for attending a residential training program (Omvig, 2002). These gaps in functioning as depicted in the narratives are nothing new, as one author stated in an article written almost 40 years ago "the situation of the congenitally blind young people I work with needs to be articulated, faced, and remedied" (Morrison, 1974). It is evident in the current study that change comes slowly and more investigation into solutions is past due. Looking further into the role of paraeducators could be a more effective solution because of their insider perspective which creates responsivity in learning (Rueda et al., 2004). Paraeducators provide social mediation in learning because they often come from the same background as the students. The blind mentors created this type of responsivity within the PSP (for some participants more than others) as well because they had insider perspectives and were able to scaffold learning for the participants.

If curricula are based on middle class Anglo-centric assumptions about what is knowledge and appropriate learning for children, it can also be

concluded that these assumptions about knowledge are vision preferential (Rueda et al., 2004). The blind child will always be at a disadvantage in the traditional pedagogy. Alternatives for education of blind children must be considered. The blind child has a very different life context and if inclusion is the goal, and if traditional education is the forum – and research seems to deem it so – then paraeducators with the same experience, background and frame of reference can have more impact on students than ones who are members of the dominant perspective. Incongruities of background and culture between a teacher and student have been shown to negatively impact minority students resulting in withdrawal and misunderstandings about student ability and potential (Rueda et al., 2004). It is conceivable that these similar effects impact a blind student surrounded by sighted instructors. If culturally responsive teaching is beneficial for minority students it is possible that the same is true for blind children. The paraeducators are one means of creating more blind responsive teaching.

Many of the independent living skills the participants reported learning at the PSP could have been taught at home. As Omvig (2002) states,

They must do what they can to teach the parents of each blind child truly to understand blindness, to create an understanding of accurate expectations and to participate in the training and motivating of their own children. The schools simply cannot do it all. Parents need to become a part of the solution, not part of the problem (p. 81).

Development

Parental influences play a large role in the understanding of the individual outcomes. The participant narratives reveal several barriers to

independence which include the family dynamic. Early intervention through parent training could help to change the limited outcomes depicted in some of the participant narratives. Increasing opportunities for parents to meet functional blind adults could create a hopeful future vision. Helping parents to connect with organizations that address the needs of parents of blind children is crucial. Increasing the funding and resources for programs like the blind children's program at DBS could have more impact on parents and help blind children to gain the skills earlier in life. Increasing the parent weekend opportunities associated with the PSP could be an effective strategy since a weekend at the PSP is just touching the tip of the iceberg for most parents. An effective strategy is the reliance on blind mentors and role models to augment the educational and rehabilitational influences.

In the current study, most of the participants had blindness skills instruction growing up, but report not having the opportunity or confidence to apply the instruction, for example, one participant stated never going anywhere alone and always having somebody follow them even though they had cane instruction. It appears that learning from members of the same community makes a difference for the participants while attending the program – even those who chose to live more dependently after leaving the PSP. Additionally, association with support groups or consumer groups seemed to have positive impact on overall motivation and sense of self for those participants in the high negotiation and high hope group.

According to A. Bandura (1997), the goal of any treatment is to help people make change through belief in themselves and take control of their lives.

He suggests that effective role-models, external persuasion to believe in oneself, and learning to manage obstacles are the keys. Furthermore, Bandura suggests that participation in a collective group that has perceived power positively affects the individuals that belong to the group. The blind mentors provided a similar approach to socio-cultural scaffolding; they provided blindness responsive teaching which resulted in scaffold learning (Rueda et al., 2004). However, the underlying message is to help the blind children develop a sense of self in the world by seeing what is possible through others that can model ability, dignity and aspirations.

Other recommendations include incorporating more concrete hope curricula into programs like the PSP. For example, teaching students the language of hope theory in order to identify pathway thinking might be helpful. It is necessary to have a working framework or theoretical perspective to drive the practices and to provide consistent purposes for application. The focus on outcomes within hope theory makes it applicable to a residential post-secondary program. Developing a focused program with clear hope intervention strategies could help students who are at varying levels of development since hope theory can be applied to various situations.

Vocation

If more programs existed like this one, and if existing programs had increased capacity to work with parents, it is conceivable that residential programs like the PSP could have more time to designate to vocational development and work experience opportunities. In the long run, there can be greater gains for blind students and more effective ways of providing residential

training services by focusing more on job skills training. In addition, providing more job readiness training and creating work experience opportunities that build on natural interests and preferences as described in the rehabilitation act would most likely spark more motivation. Being assigned to a work experience activity that is counter intuitive or not a clear match in one's personality makes it just a job or a task that has to be completed. However, matching students to work experience situations that they find some connection to could result in moving the participant forward. It is the difference between doing a task or making a contribution to the world that is meaningful. Finally, ensuring rehabilitation training is based on individual needs would prevent time wasted in general programs that enforce a one size fits all approach to training. Comprehensive assessments would reveal the training needed to assist an individual toward positive outcomes. Interests based training could help move participants toward wanting more than moving home with family. As one author states, rehabilitation has not happened until a person has reached their potential in independence, employment and integration (Tigges, 2004). In a study in which a focus group was conducted with successful blind adults, it was determined that learning skills was not enough; a program needs to help participants develop a sense of identity, work ethic and ability to endure challenges (Goodwyn et al., 2009).

In addition to blind people not conforming to the traditional educational assumptions, research shows that people with disabilities do not conform to the assumptions inherent within career theories (Enright & Szymanski, 2010). In the current study some participants had unrealistic views of the world of work and

when considering the limited experiences of these participants, it is not unusual. It is reported that early life experiences, including play, have influence on career development and limited life stages can have long term effects (Enright & Szymanski, 2010). Consequently, it is not blindness that is the problem, it is the misconceptions about blindness within the family, education system and even within the person themselves (Enright & Szymanski, 2010; Omvig, 2002; Smart, 2001). Moving toward an ecological model of career counseling could be more beneficial and could create linkages that are not already in place (Szymanski et al., 2010). The current study had a variety of career attitudes displayed by participants and the participants that had an awareness of self partnered with reliance on self had more positive vocational outcomes. It is conceivable that a more inclusive model like the one just mentioned could help participants gain more strides in the vocational leap with more insight and effective planning that gives consideration to the various gaps in development and opportunities. The current study reveals the complexity of issues needing to be addressed within the scope of a residential program like the PSP. Is it realistic to expect one program to make up for years of lost experience and opportunity? Certainly it is feasible to bridge some of these gaps but it would be beneficial for all if blind children could receive the education that all children are granted and in an equal timeframe. Increasing the expectations for blind children is not only a necessity but it is a civil right. We must move away from separate expectations on the basis of blindness through the elimination of segregation and relegation to lesser excellence (Hatlen, 2002; Omvig, 2002; Smart, 2001).

LIMITATIONS

The inherent limitations to the current study are those often attributed to in qualitative research when looking from a traditional perspective (Miles & Huberman, 1994). The challenge in conducting qualitative research especially in the field of vocational rehabilitation is how to meet the prevalent quantitative expectation for valid and reliable conclusions. Taking this concern into consideration, it is important to understand that qualitative researchers often trade the concept of validity and reliability for more appropriate concepts such as credibility, transferability, confirmability and authenticity (Glesne, 2006; Hanley-Maxwell et al., 2007; Merriam, 1998, 2009). Additionally, the small sample size and methods of analysis limit the generalizability of the current study. Again, qualitative approaches often do not strive for generalizability as often as quantitative researchers do. Striving for transferability is a more appropriate outcome of the study (Glesne, 2006; Hanley-Maxwell et al., 2007; Merriam, 1998, 2009). Blindness is a low incidence disability; consequently, the small sample size and selection pool makes confidentiality a major focus and limits specific references to participant information. However, it is the increased understanding from the perspective of young blind adults that make this study valuable beyond any of the limitations mentioned here.

IMPLICATIONS FOR FUTURE RESEARCH

This study is just the beginning of looking into the lives of blind adults after attending residential programs. There is a need to conduct further studies into the factors that aid in negotiation of life after a program geared for the orientation and adjustment of blind adults. This study revealed issues

surrounding parental expectations and it would be helpful to learn more from the perspective of parents. Another follow-up is planned for the current participants and it would be beneficial to introduce the hope scale and conduct more research on hope and its role in negotiating life. Additionally, looking at hope and its impact on parental attitudes about their blind child could be beneficial. Conducting research with the goal of developing a model for parental support would be beneficial. Exploring the factors that influence successful blind adults would also help to isolate components that could be taught at an earlier age. Additionally, research on the impact of blind mentors and blind role models would be helpful and identifying those factors that are influential could help create more strategic implementation of mentor supports within the rehabilitation field. Minimizing the gap between research and practice is not only good sense but a necessity in order to keep up with current issues and interventions. The student population is ever growing in diversity, even among blind children, and some effort into bridging this gap in perspective is time well spent.

More research into the relationship of alternative techniques, pathway and agency thinking and scaffold learning would be helpful and may move the field toward an epistemology of blindness. For example, do blind children develop more pathway and agency thinking if they are taught in a blindness responsive environment? This is a question that requires more investigation and exploration but it is worth consideration since blind children are a minority group also. Research into how theories or models of blindness like the one presented by Omgvig (2002) can be linked to teaching and learning for blind children is needed.

Since the participants had a variety of visual experiences, paraeducators should also reflect the variety of experiences so the students can find ways to identify with others that reflect who they are and more importantly, who they can be.

Appendix A: Interview Guides

Figure A1: Initial Interview Question Guide

I. Current Status

What have you been doing since leaving PSP?

a. Living

Where are you living?

Who do you live with? (e.g., family, friends)

What type of home do you live in? (e.g., house, apartment, group home, agency-supported housing)

b. Employment

What are your short (5 years) and long term (10 years) employment goals?

Are you currently employed?

If yes, what type of work is you doing?

How many hours a week do you work?

If you are not currently employed, have you worked anytime during the last calendar year?

If yes, where and for how long?

What did you do?

c. Education

What are your educational goals?

Are you currently enrolled in school?

If yes, where?

What is your major or course of study?

What do you want to do with your education once you have completed it?

If no, have you attended school at anytime during the last calendar year?

Do you plan on attending school in the future?

If not, why not?

d. Community Involvement

Are you currently volunteering in the community?

Where and in what position?

Describe the work that you do:

Do you participate in any other community activities, such as church groups, civic clubs, consumer organizations, or support groups?

If yes, describe them. If you are not currently employed, in school, or volunteering in the community, how do you spend your days?

II. Post-Secondary Program

How did your time at PSP prepare you for the life you are living now?

What specific skills or knowledge did you gain that you use on a regular basis?

How did the PSP program help you to learn how to set and reach goals for your future?

Is there anything that you feel was not addressed during your time in the program that should have been?

Do you feel participation in the PSP program contributed to your current success? Explain.

Do you feel like the program helped you to adjust to your blindness? Explain.

Do you continue to use non-visual techniques in your daily chores?

Do you travel using a cane?

Do you use Braille on a daily basis?

As a blind person, do you experience barriers in reaching your goals?

What did the PSP program teach you about how to respond to barriers?

How do you respond to these barriers?

Did you have peer support during the program such as blind mentors?

If yes, was this a helpful support? Explain.

Do you have current blind peer supports? Explain.

Do you think you would have learned the same things if you did not participate in the program?

What were the hardest things to learn in the program?

If you could change anything about the program, what would it be?

Would you recommend this program to other students just graduating from high school?

III. Independence

How do you define independence?

Do you consider yourself to be independent and in control of all your life decisions?

Before entering the program, were you independent?

Did the program help you to become independent?

Is there anything you want to do now that you feel you can't do?

How do you maintain your independence since you have left the PSP?

How often do you cook meals for yourself?

How often do you clean your living area?

How often do you travel independently in the community? What types of transportation do you use when you go out independently?

How do you access community resources?

Do you currently access vocational rehabilitation services or services from other agencies?

IV. Self-Determination

Have you ever heard of self-determination?

If yes, how would you define self-determination?

Do you feel like you are self-determined?

If yes, what do you do in your daily life that makes you feel self-determined?

Where did you learn to be self-determined?

What helps you feel self-determined?

What barriers do you encounter to being self-determined?

Do you feel like the PSP helped you become more self-determined?

If yes, how?

If no, how?

Is there anything else we left out that you would like to tell us?

Figure A2: Follow-up Interview Question Guide

Follow-up questions

Interview 2:

How does your career or employment choice reflect who you are?

How does your blindness affect your self concept?

You report having gained skills and confidence during the PSP program, how do you achieve that now that you are out of the program?

Do you feel you have increased or decreased your independence?

Self Rating Scale

How do you rate your:

- Independence
- Travel
- Communication
- Adjustment to disability
- Independent living skills
- Career goals and steps to meet them
- Accessing support systems
- Technology
- Confidence

Figure A3: Staff Question Guide

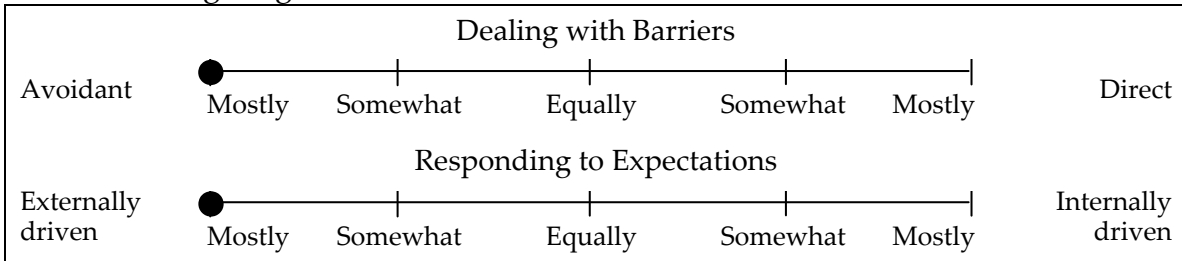
Staff Interview Questions

1. Why is there a need for a post-secondary program?
2. What is the goal of the program?
3. What makes this program different from other programs?
4. How does the program prepare students for transitioning into adulthood?
5. Do the students take time to review progress?
6. How does the program integrate student vocational goals with the program's requirements?
7. What is the student expected to do when they leave the program?
8. How do students integrate into the community?
9. How does the program help students adjust to their disability?
10. How does the program help families adjust to the new attitude of their child as a result of attending the center?

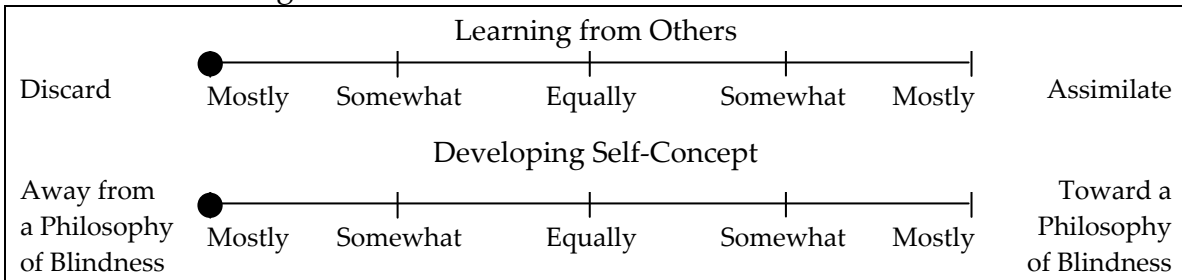
Appendix B: Life Negotiation Grids

Figure B1: Life Negotiation Grid for Interview 1 (Terry)

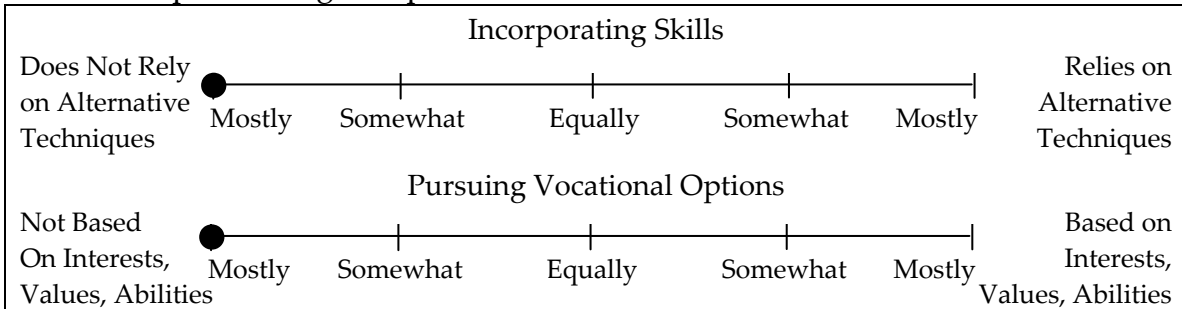
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Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

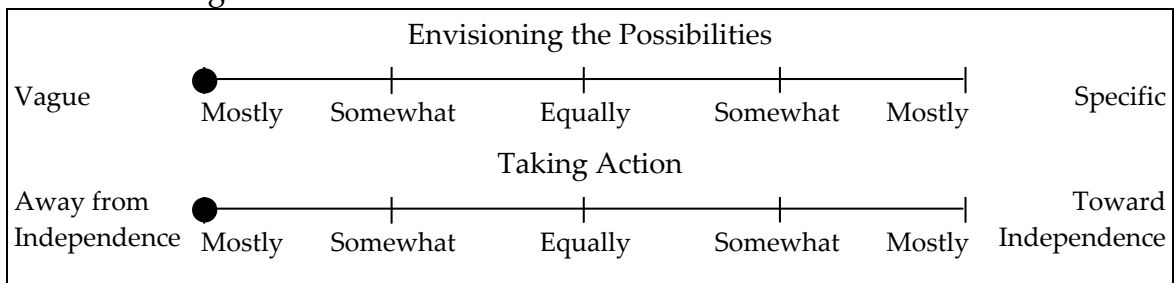
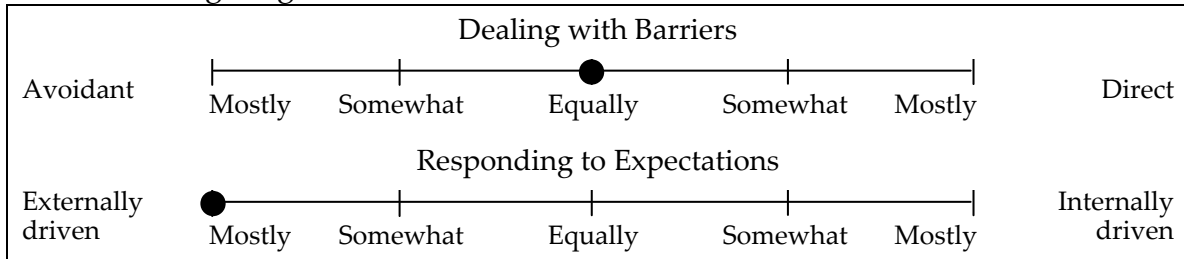
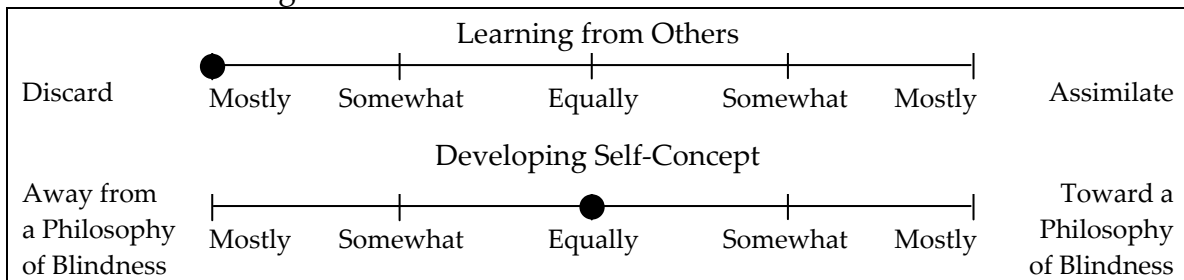


Figure B2: Life Negotiation Grid for Interview 2 (Lee)

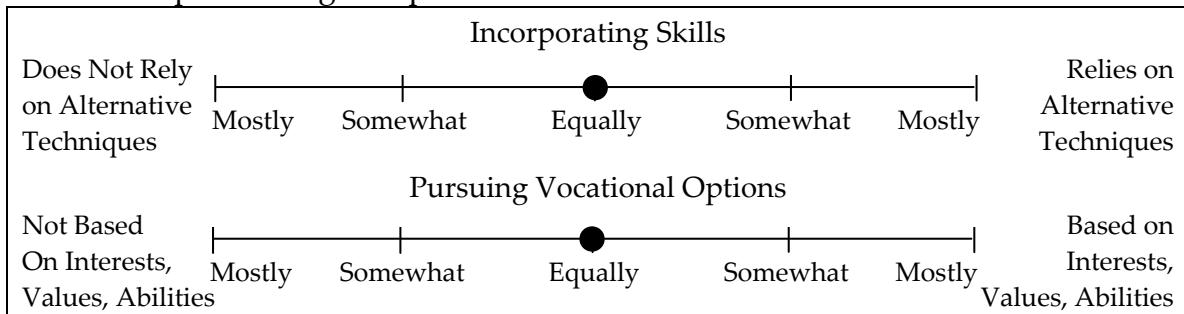
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Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

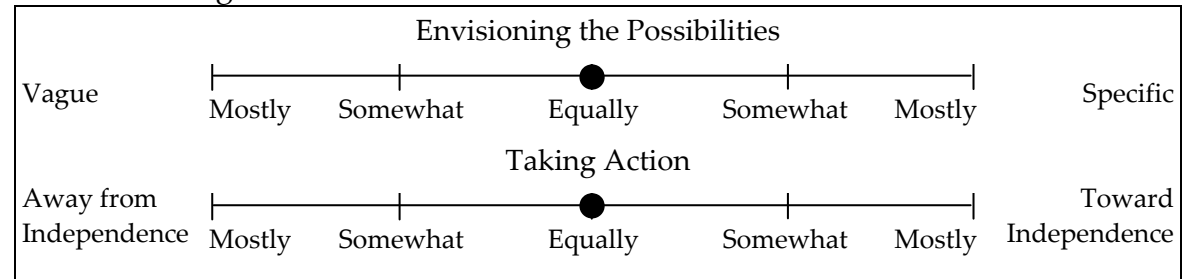
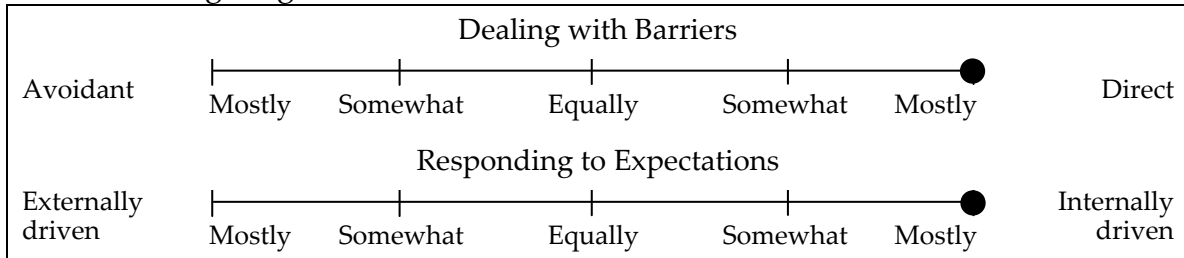
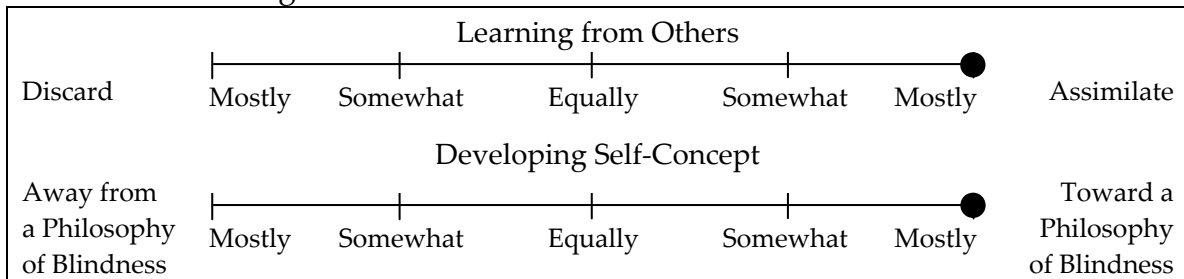


Figure B3: Life Negotiation Grid for Interview 3 (Casey)

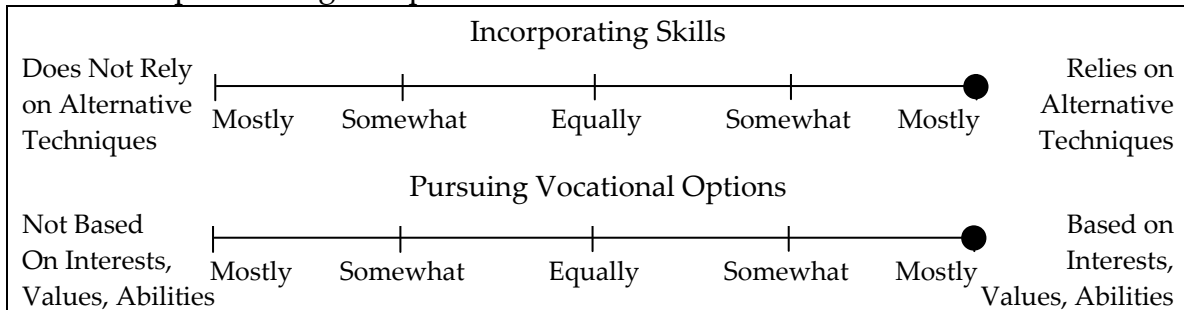
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Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

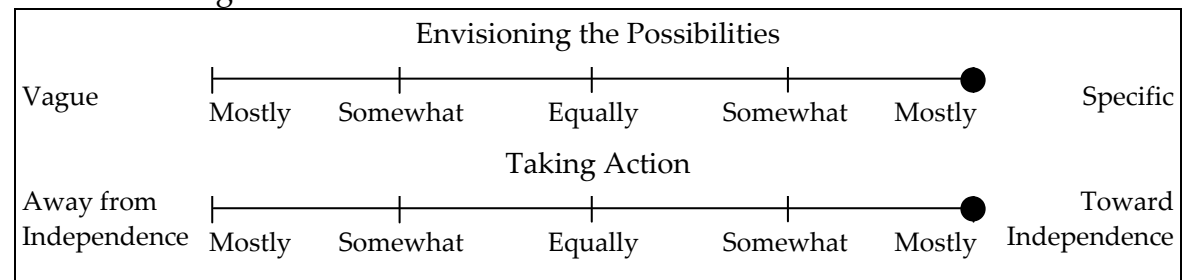
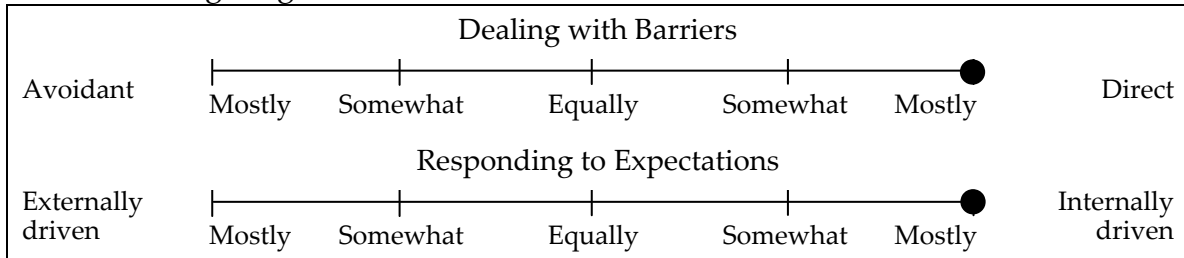
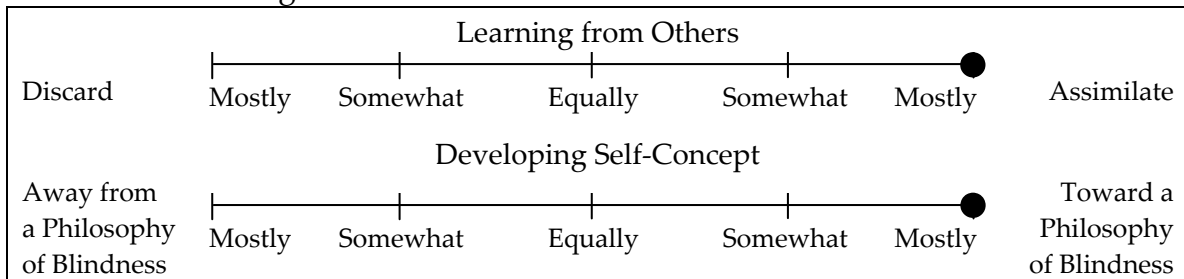


Figure B4: Life Negotiation Grid for Interview 4 (Jessie)

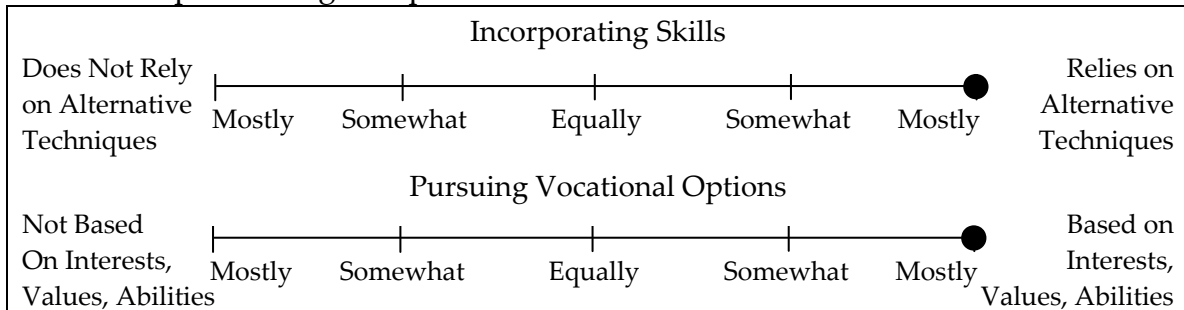
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Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

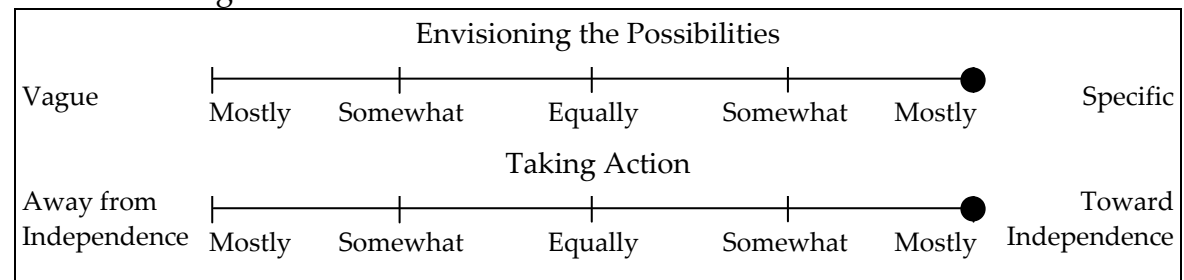
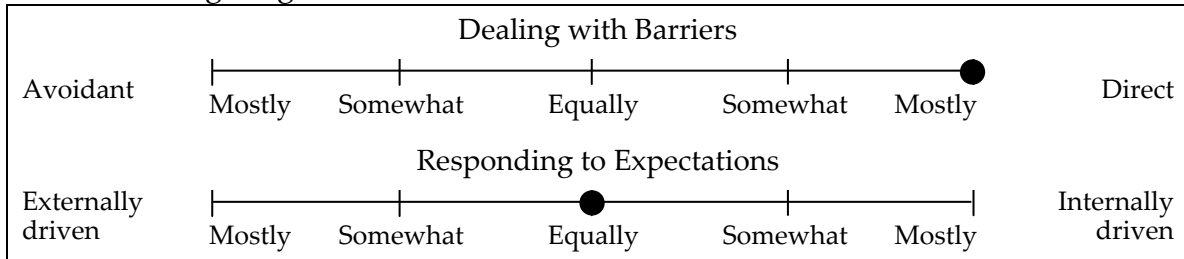
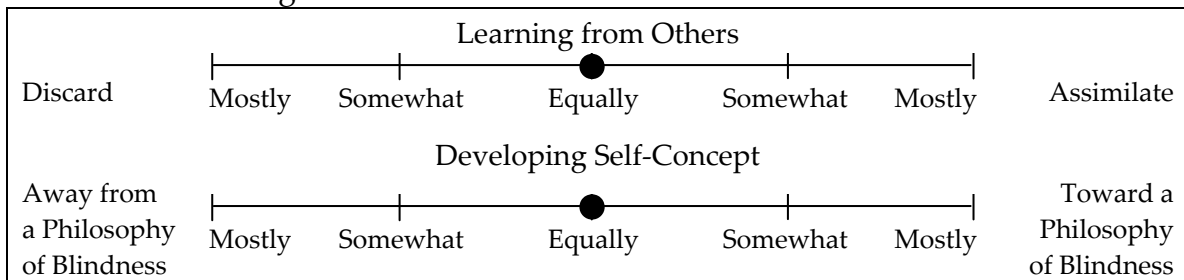


Figure B5: Life Negotiation Grid for Interview 5 (Harley)

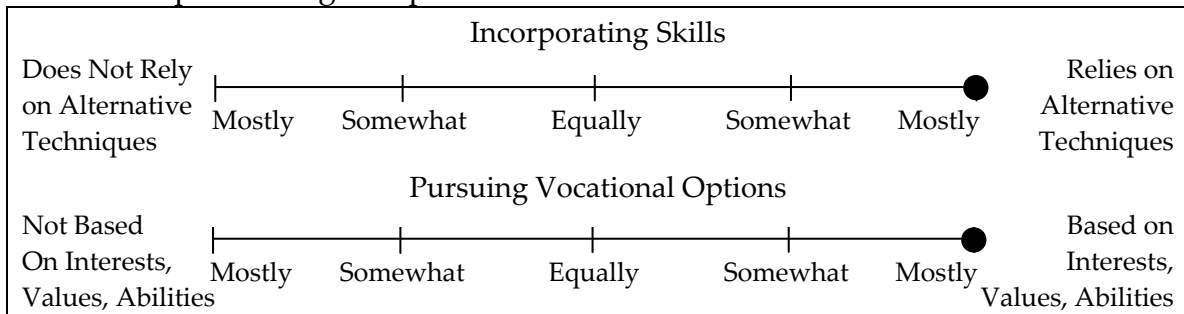
Theme: Navigating Needs



Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

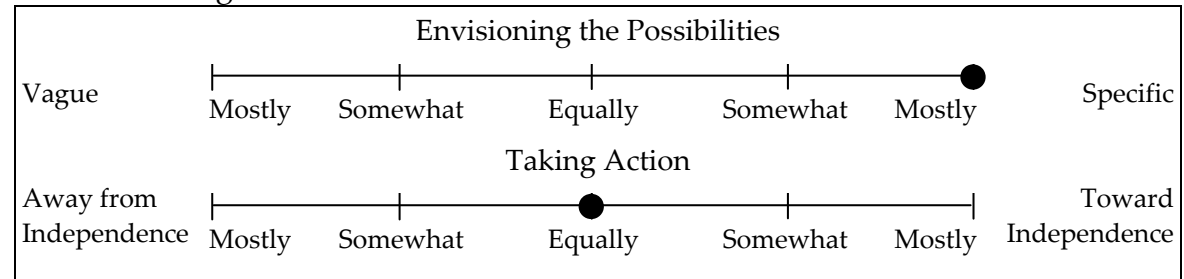
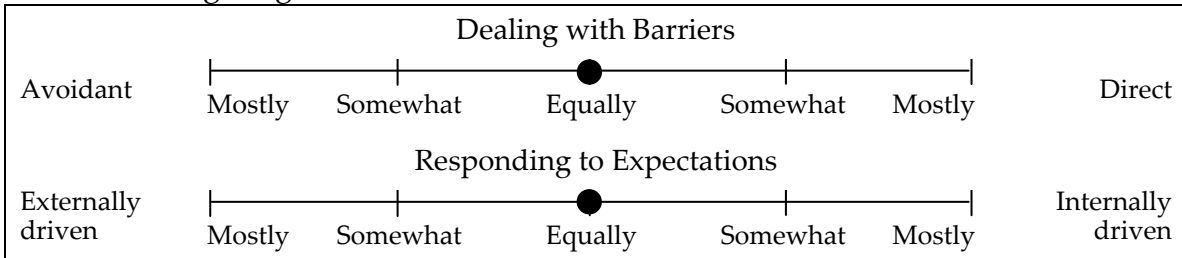
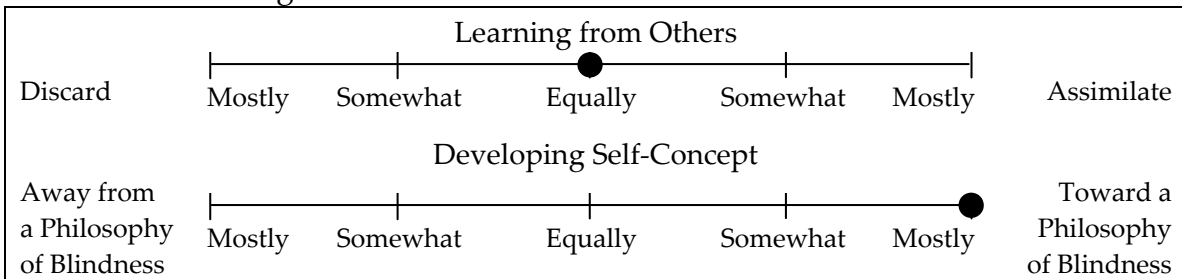


Figure B6: Life Negotiation Grid for Interview 6 (Pat)

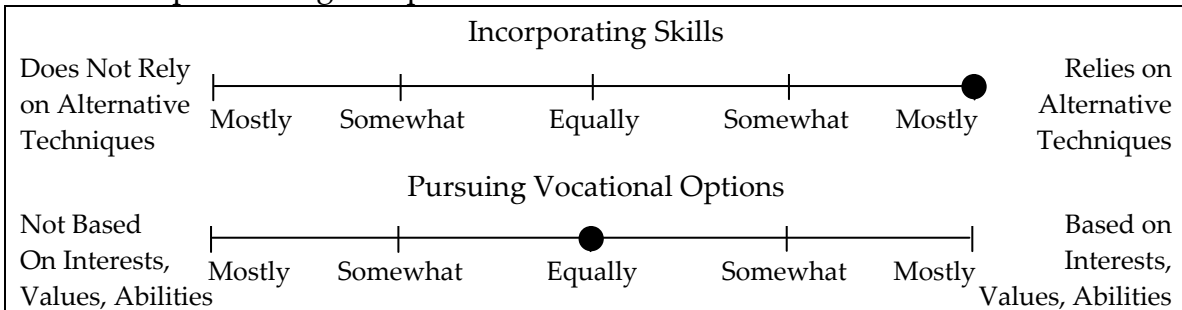
Theme: Navigating Needs



Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals

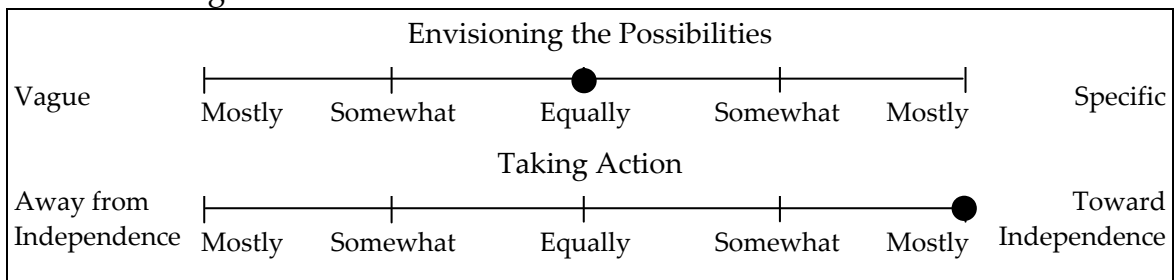
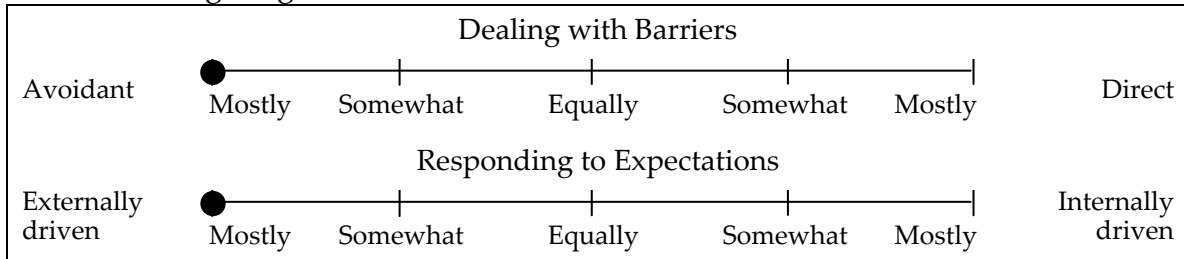
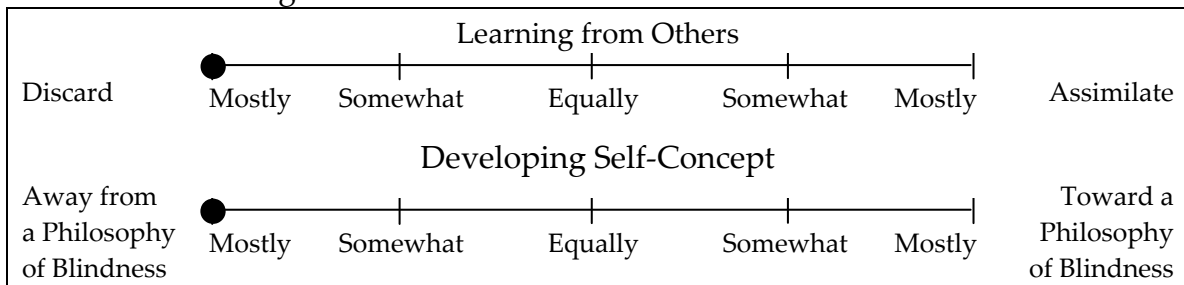


Figure B7: Life Negotiation Grid for Interview 7 (Shea)

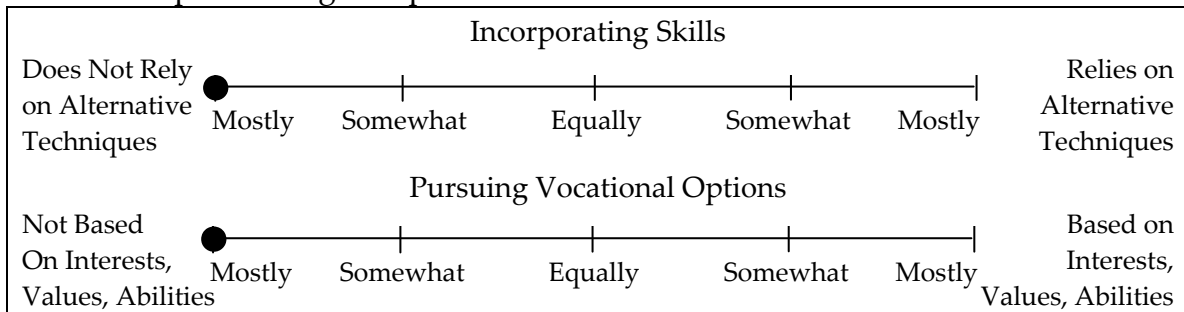
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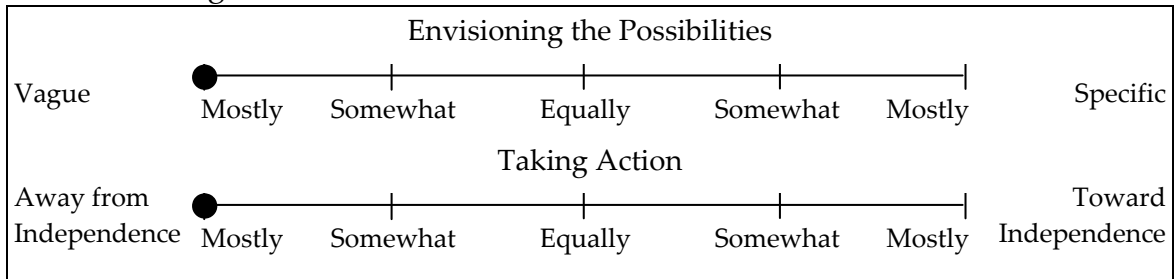
Theme: Cultivating Confidence



Theme: Implementing Independence



Theme: Setting Goals



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