THE DEVELOPMENT OF WORK SELF-EFFICACY IN PEOPLE WITH DISABILITIES

by

Alan B. Larson

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As members of the Dissertation Committee, we certify that we have read the dissertation prepared by Alan B. Larson entitled The Development of Work Self-efficacy in People with Disabilities and recommend that it be accepted as fulfilling the dissertation requirement for the Degree of Doctor of Philosophy.

Amos Sales  
Date: 4/4/08

S. Mae Smith  
Date: 4/4/08

Charlene Kampfe  
Date: 4/4/08

Mari Wilhelm  
Date: 4/4/08

Final approval and acceptance of this dissertation is contingent upon the candidate’s submission of the final copies of the dissertation to the Graduate College.

I hereby certify that I have read this dissertation prepared under my direction and recommend that it be accepted as fulfilling the dissertation requirement.

Dissertation Director: Amos Sales
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SIGNED: Alan B. Larson
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Dedication

“I am large, I contain multitudes.”

Walt Whitman

This project is dedicated to all the people with disabilities I have known throughout my life. I have been friends with you, worked with you, and played with you, but mostly I have learned from you. This research represents a channel by which I can only begin to convey all that I have learned from you. My hope is to try and convey that which we know to others so that they may understand. The process is ongoing, as is your influence on me.

I would also like to dedicate this project to my parents, who did a fine job in developing me. I am where I am because they never believed in limits. If only my brethren had such gifts, there might be no need for my being on this path. As I am, I am thankful.
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ABSTRACT

The development of work self-efficacy in people with life-long physical disabilities was investigated using qualitative methods. A series of three semi-structured interviews were conducted with a purposive sample of three participants between the ages of 23 and 44. Research participants included two males with cerebral palsy and a female with rheumatoid arthritis. Developmental comparisons were made between the two participants that grew up expecting to go to work as adults and the one participant who did not. All of the participants were working at the time of the interviews. Each of the semi-structured interviews focused on a separate topic: (1) the childhood developmental events that contributed to their becoming adult workers, (2) how these events contributed to their work self-efficacy, and (3) how they described their work self-efficacy. Qualitative analysis of the interview data was guided by Bandura’s (1997) social cognitive theory and Lent and Brown’s (1996) social cognitive career theory. Results indicate that the mastery experiences of performing household chores, vicarious learning acquired by having working parents as role models, and verbal persuasion in the form of parental encouragement and teacher support all contributed positively to the participants’ sense of work self-efficacy. The most common inhibitors of work self-efficacy were parental overprotection, negative school experiences related to being placed in special education, and having people with disabilities as poor role models for working. How the participants cognitively processed developmental experiences also played a role in work self-efficacy development, as they each described actively resisting inhibiting events and readily accepting positive events. A model of work self-efficacy development is proposed
that shows that children with disabilities need support for their future work goals in order for the formation of outcome expectations of working as adults. Finally, 12 characteristics of work self-efficacy were identified in the areas of work cognitions (intrinsic rewards, self-confidence, service-orientation, and job-specific knowledge), work behaviors (maintaining a schedule, possessing the physical ability to do essential tasks, possessing required job skills, and ability to meet job performance requirements), and socio-environmental supports (social support from family and loved ones, customer or client positive feedback, coworker support, and supervisor support).
CHAPTER 1
INTRODUCTION

Chapter 1 contains the basic information relevant to this study. After providing some background information on the problem, this chapter will present a statement of the problem, the purpose of the study, the significance of the study, and the specific research questions. Delimitations of the study will also be discussed. The chapter will conclude with the definitions of all terms used in this study.

Background Information

According to a recent Harris Interactive poll conducted on behalf of the National Organization on Disability (2004), 65% of Americans with disabilities are unemployed. Many reasons for high unemployment among people with disabilities (PWD) have been proposed. A review of the research on disability and employment reveals that the reasons for unemployment can be grouped into two broad categories: Personal variables and environmental variables. Each of these categories will now be examined in brief detail.

Personal variables refer to conditions that reside within the individual. Examples of personal variables that relate to unemployment for PWD include demographic variables such as ethnicity (Yasuda, Wehman, Targett, Cifu, & West, 2002), education and/or training, and psychological variables such as locus of control (Murphy, Young, Brown, & King, 2003) or adjustment to disability (Krause, 1996). Age at onset of disability can also be a factor (Conroy & McKenna, 1999), as well as level of pain (Dionne et al., 2005) and level of independence (Tomassen, Post, & van Asbeck, 2000). An environmental variable refers to any condition that resides outside of the individual,
such as institutional structures and practices that serve to oppress PWD (Lock, Jordan, Bryan, & Maxim, 2005) or provide financial disincentives for PWD to work due to the potential loss of disability benefits (Baron & Salzer, 2002; Conyers, Koch, & Szymanski, 1998), and programs that do not serve PWD very well (Baron & Salzer, 2002). Societal attitudes toward disability can also play a large role (Conyers et al., 1998).

Statement of the Problem

Disability scholars such as Longmore (2003) state that disability resides not within the individual, but rather within the individual’s interactions with his or her environment. The present research attempts to focus on the career development of PWD and how this is an aspect of the societal-individual interaction that may affect later employment. PWD face pervasive discrimination and prejudice in society at large, which has led to their long-time marginalization (Davis, 1997). The business world, in particular, reinforces these negative attitudes toward PWD, thus severely limiting employment prospects for PWD (Schur, Kruse, & Blanck, 2005). Families of PWD can also inhibit career growth by being discouraging and overprotective (Dowrick, Anderson, Heyer, & Acosta, 2005). The result of this pervasive, long-standing, and still existent stigmatizing process is the potential for low self-esteem (Dagnan & Waring, 2004), which is a construct known to be positively correlated to low self-efficacy (Blake & Rust, 2002).

Social cognitive career developmental theorists Brown and Lent propose that low self-efficacy beliefs may be the result of socialization experiences, with the consequence being impaired career development (1996). In the case of PWD, impaired career
development may be the result of limited opportunity for making vocational decisions or chances to assess how their functional limitations impact career decisions (Lustig & Strauser, 2003). Furthermore, even if a person has well developed self-efficacy beliefs in a particular career area (i.e. math or science), he or she may still not pursue that career path if barriers to success are perceived (Brown & Lent, 1996). PWD report perceiving negative societal attitudes toward their disabilities (Wolfe, 1996) and barriers to career achievement (Corbiere, Mercier, & Lesage, 2004).

The state of the current research on employment-related self-efficacy follows a developmental trajectory: Career-search self-efficacy has been investigated (Corbiere et al., 2004), as well as career decision-making self-efficacy (Quimby & O'Brien, 2004), and job-search self-efficacy (Barlow, Wright, & Cullen, 2002; Sterrett, 1998). However, to date no research has been located on how self-efficacy applies to the next logical step in this process, which would be beliefs about actually working in a job, or work self-efficacy (WSE). In addition, no research has been located specifically as to how WSE develops in PWD.

Purpose of the Study

The purpose of this study was twofold. This study first explored the development of WSE, as well as defined this construct, from the first-person perspective of PWD. Secondly, this study attempted to explain how WSE impacted eventual employment behavior and beliefs. To be more specific, this study attempted to describe the lived experience of how WSE developed in PWD, the current lived experience of WSE in
PWD, and how the development of WSE in PWD impacted current beliefs and behavior regarding employment.

Significance of the Problem

A better understanding of the development of WSE in PWD and how this development contributes to later employment related beliefs and behavior has a variety of practical applications. If participants report that societal messages about disability and work while growing up impacted their later self-efficacy beliefs and employment behavior, this will provide evidence regarding the importance of messages PWD are exposed to in proximal environments such as home and school. Such information could then lead to the development and implementation of programs specifically to help PWD to improve their WSE so as to have better employment outcomes in adulthood. Also, a deep qualitative understanding of the construct of WSE may lead to the creation of valid and reliable quantitative assessments for use in vocational services to identify persons most in need of improved WSE.

The Rehabilitation Services Administration (RSA) is reportedly in the process of investigating the construct of resilience in PWD as it applies to work, and self-efficacy is a part of this research (Center for Continuing Education in Rehabilitation, 2005). Research in the fields of business and organizational psychology has shown general self-efficacy (GSE) training to be an effective intervention for reemployment (Eden & Aviram, 1993) or volunteer work (Eden & Kinnar, 1991). In addition, Regenold, Shermen, and Fenzel (1999) found that career-search self-efficacy did serve as a predictor of employment for people with psychiatric disabilities. The researchers
recommended that employment-related efficacy was worthy of further investigation. The present study aimed to refine previous research on types of self-efficacy generally related to employment into the more focused construct of WSE, thus potentially furthering both theory and practice.

Research Questions

There were three research questions. The first two research questions sought to describe the development of WSE by asking: (1) what are the WSE developmental experiences for PWD?; and (2) how do WSE developmental experiences for PWD contribute to later WSE beliefs? The third research question asked how do PWD describe their current work self-efficacy beliefs?

Delimitations of the Research

The present study examined only the development of WSE as it related to later employment beliefs, and thus was not looking at the numerous other issues listed above that may also affect a person’s employment. Additional delimitations of this study were the size of the participant sample, the participants’ age, the participants’ disability, and the participants’ location. A small sample of only four young adults aged 18-25 was originally targeted for recruitment, but circumstances later necessitated one less participant and that the upper age limit be adjusted to 45. The participants had only physical disabilities, and the participants were local to the southwestern United States. While the information provided by this delimited sample is informative and worthwhile, the information reported cannot possibly reflect all of the experiences in the general population of PWD.
Definition of Terms

General self-efficacy: “people’s judgments of their capabilities to exercise control over events that affect their lives” (Bandura, 1989, p. 60).

Work self-efficacy: a person’s judgment of their capability to do the basic tasks necessary in order to work in and maintain a job for an extended period of time.

Disability: significant physical, mental, or sensory impairment that limits or requires modifications in activities of daily living and/or employment.
CHAPTER 2
LITERATURE REVIEW

Chapter 2 contains a review of the professional literature applicable to the present study. The first section of the chapter describes the social learning and self-efficacy theoretical foundations upon which the study is based, along with how self-efficacy theory and social-cognitive career theory apply to the career development of people with disabilities (PWD). The second section of the chapter will cover literature regarding the developmental trajectory of self-efficacy research as it relates to employment, with an emphasis on applications to PWD. Each section will conclude with a summary and explanation as to how the contents relate to this study.

Theoretical Foundations

The present study is based in Albert Bandura’s social cognitive theory (SCT) (Bandura, 1986; 1989), which attempts to explain human cognition, motivation, and action. Contained within SCT is the concept and theory of self-efficacy, which is primarily concerned with cognition regarding personal mastery in specific behavioral domains (Maddux, 1995). Derived from SCT is social cognitive career theory, which postulates that career development is a product of self-efficacy as it relates to various employment-related domains. Each theory will now be reviewed.

Social Cognitive Theory

SCT views people as active contributors to their development via certain unique and basic capabilities. The first of these is the capacity to make and use verbal and imaginal symbols that give meaning, form, and continuity to experience. Thus, people
can transform experiences into internal models that guide future actions. According to Bandura (1989), symbols are the vehicle of thought, and thought can be a source of failure as well as of accomplishment. A second tenet of the theory is that people have an advanced capacity for learning via observing and modeling (Bandura, 1989). Most social learning is acquired by deliberately or inadvertently observing others and their consequences. Modeling can be very powerful, and its effects can be diverse. Modeled behavior can foster new skills, promote or restrain behaviors by affecting a person’s motivation, as well as elicit attitudes, values, and emotions.

Because they are able to symbolize and make internal models based on observational learning, people can use the observational learning for forethought and the ability to anticipate future events (Bandura, 1986). Having the capacity of forethought leads people to setting goals, which in turn leads to purposive, goal-directed behavior. However, if planned courses of action are based on faulty judgment or inadequate role models, then their plans may actually be detrimental rather than beneficial.

The human capacity for self-regulation is the mechanism that translates forethought into action (Bandura, 1986). People have the capability to exercise future control over their thoughts, feelings, and actions based upon consequences they have produced for themselves in the past. This self-reflective capacity, the ability to reflect on and analyze past experiences based upon consequences, is what generates people’s knowledge about themselves and the world around them.

All of the above processes take place in the context of what Bandura termed triadic reciprocal determinism (1986, 1989). According to Bandura, human functioning is
based on the reciprocal interaction of three factors: (a) behavior, (b) perceptions (affected by cognitions, affect, and biological events), and (c) environmental conditions. These causal factors have bidirectional influence over each other, but the factors are not always equally strong, nor do they always operate simultaneously (Bandura, 1989). The salience of each factor varies by individual, activity, and circumstance (Bandura, 1986). Also, for causal factors to exert their influences can take time (Bandura, 1989). Thus, understanding human behavior in any situation requires a discernment of how all three sources of influence—behavior, perception, and environment—are interacting (Maddux, 1995).

To briefly review, SCT postulates that cognitions form the basis of human experience. A major source of these cognitions is observational learning and modeled behavior. Based on what they have observed, people develop the ability to anticipate future events, and from this forethought they can regulate their own behavior and observe the consequences. The sum results of this interaction between observational learning (environment), forethought (perceptions), and action (behavior), is what generates people’s knowledge about themselves and their world. The result of this process is self-efficacy (Bandura, 1986).

Self-efficacy Theory

Bandura (1989) defined self-efficacy as “people’s judgments of their capabilities to exercise control over events that affect their lives” (p. 60). The theory of self-efficacy attempts to explain much of human behavior as being based on a person’s self-efficacy judgments. The roots of these efficacy judgments lie in social experiences and
developmental sources. Next to be discussed will be how these social experiences and developmental sources work together to determine a person’s level of self-efficacy.

Mechanisms of Self-efficacy Development

Bandura (1997) hypothesizes four mechanisms by which self-efficacy develops: performance experiences, vicarious learning, verbal persuasion, and physiological and affective states. However, simply having one of these types of experience does not directly lead to self-efficacy; rather self-efficacy develops based on how a person attends to and cognitively processes the experience. The cognitive processing for each of the four sources of self-efficacy will now be discussed.

Performance experiences. According to Bandura (1997), the most influential source of efficacy information is mastery experience. Performing a task provides the most authentic information about a person’s ability to succeed at it. Generally speaking, success at a task raises efficacy beliefs whereas failure lowers them. However, efficacy is not dependant simply upon task completion. A person’s performance appraisal of task completion is essential. Some of what factors into a person’s appraisal include: the person’s perceived ability, the difficulty of the task, the effort expended on the task, assistance received, situational circumstances, temporal pattern of successes and failures, and how a person remembers the performance. In other words, task success builds efficacy, but the level of efficacy is somewhat dependent upon how the individual perceives that success. If a person succeeds with a great deal of assistance from others, he or she may not feel very efficacious; but if that same person expends great personal effort
and succeeds, then he or she is much more likely to develop a strong sense of efficacy related to that task.

Examples of performance experiences are having students participate in career planning activities and also school and community based work experiences. Unfortunately, the evidence is that students with disabilities often participate in such activities at a rate lower than their non-disabled peers, thus resulting in a career developmental lag (Checketts, 2002; Ochs & Roessler, 2001). Furthermore, despite transition planning being required for them, students in special education often report not getting such services (Hitchings, Luzzo, Ristow, & Horvath, 2001; Morningstar, Turnbull, & Turnbull, 1996). And when students do participate in vocational programs, all too often a lack of connection exists between that program and students’ career choices (Morningstar, 1997).

Vicarious learning. According to Maddux (1995), vicarious experience refers primarily to observational learning, or modeling. Such experiences are effective methods of developing a personal sense of efficacy. The basic process involves three steps: (1) people see what others do; (2) they observe the consequences of such behaviors; and (3) they use these observations to form expectancies about their own behavior, along with the anticipated consequences of that behavior. The effectiveness of vicarious learning experiences depends on several factors: the perceived similarity between the observer and model, the number and variety of models, the perceived power of the models, and the perceived similarity of the observer’s problem with those of the model.
As with mastery experiences, learning the task is less important than the appraisal process. Vicarious appraisal of experiences is relative; people appraise their capabilities in relation to the performance of others. When a person judges his or her personal performance to be better than someone else’s, that perception leads to a stronger sense of self-efficacy. Finally, while generally less powerful than personal mastery experiences, modeling can, under certain circumstances, convince people of their efficacy. Modeling therefore has the potential to weaken the result of previous direct experiences (Bandura, 1997). In the case of minority adolescents subject to potential discrimination, community role models can play a vital role in teaching coping skills and strategies for overcoming barriers (Jackson & Nutini, 2002).

Verbal persuasion. The third experiential component of self-efficacy relevant to this study is verbal persuasion, the effort to verbally convince a person he or she can be effective at a task. Verbal persuasion is most likely to be effective when used in conjunction with mastery and modeling experiences than when used alone (Bandura, 1997). Yet four factors exist that are specific to the effectiveness of only verbal persuasion. These four factors are: (1) the person’s internal belief system, (2) the social environment, (3) how the source of persuasion is perceived, and (4) the disparity between appraisal and actual performance. Each of these factors will now be explained in detail.

The first factor contributing to the effectiveness of verbal persuasion is the person’s internal belief system. Convincing a person of the potential for success is easier if he or she already has a basis for that belief than when he or she is filled with self-doubts. Chang (1999) conducted in-depth interviews with 12 adolescents with visual
impairments or blindness and found that family support enhanced self-esteem, self-acceptance, and self-worth.

The second factor that influences the effectiveness of verbal persuasion is related to the persuasive interaction. This includes both the social environment where the interaction takes place and also the type of persuasion. Feeling efficacious is easier when the social environment includes significant others that are supportive of a person’s capabilities than when those people are expressing doubts. Chang (1999) also found that perceptions of social support from family members promoted the development of self-efficacy beliefs. One particularly effective type of verbal persuasion is to reassure someone of his or her worth. In a study of 115 homeless and non-homeless volunteers in the southwest US, Wenzel (1993), using path analysis, found that reassurance of worth from staff members was a stronger predictor of job procurement self-efficacy than being attached to or integrated within a group or getting guidance from trustworthy others in their peer group.

The third factor that influences the effectiveness of verbal persuasion is how the source of the persuasion is perceived. In particular, this is influenced by the perceived expertness of the source, the trustworthiness of the source, and the attractiveness of the source (Maddux, 1995). For example, when parents without disabilities are over protective of their children with disabilities, the children’s disabled peers have been found to be a more powerful resource for information on services, advocacy, and support (Dowrick et al., 2005).
The fourth factor contributing to the effectiveness of verbal persuasion is the disparity between the person’s appraisal of the persuasion and his or her actual performance. Verbal persuasion is more likely to be effective when the positive appraisal is only moderately beyond actual performance than when the disparity between appraisal and performance is large (Bandura, 1997).

*Physiological and affective states.* The final source of efficacy beliefs is somatic information generated by a person’s behavior, situation, or affect (Bandura, 1997). For example, if an activity requires physical exertion but the person quickly feels fatigue, aches, and pains, then he or she will likely feel ineffectual about that activity. Another example would be when a person is in a stressful situation such as public speaking, he or she may become tense and feel heart palpitations, thus making feeling effective as a speaker difficult. Finally, a person’s affect, or mood, can also impact self-efficacy by biasing a person’s attention to an event, how the person interprets the event, and how the person organizes and then retrieves the event from memory. Negative moods tend to be associated with past failures, and positive moods are associated with past successes.

How the state of arousal or mood is attended to or given meaning impacts self-efficacy (Bandura, 1997). The meaning given to the aches and pains associated with physical activity are very different for a sedentary person and an athlete, and self-efficacy changes for each person accordingly. If the nervous public speaker focuses outward on the audience and not his or her internal state of arousal, the speaker will be more likely to perform effectively. And finally, positive moods are associated with higher efficacious beliefs than negative moods, regardless of the tasks attempted.
Sterret (1998) has found through the use of case study that the use of a job club enhances self-efficacy through all four of the experiential determinants described above. Performance attainments occur when job club members practice skills such as interviewing. Vicarious learning occurs when members watch and listen to each other, thus benefiting from others’ experiences. Verbal persuasion takes place via the coaching and encouragement the members give each other as they all work together to improve their performance of job search tasks. And finally, emotional arousal is lessened in a job club setting due to it being a place where members support and learn from each other as they practice acquiring skills.

Sources of Self-efficacy Development

According to Bandura (1997), a person’s life develops in social environments that present increasingly unique opportunities, constraints, and threats. The primary social structures that serve to support the development of self-efficacy are family, peers, and school. In addition, the life stages of adolescence and early adulthood each have a significant impact on vocational behavior. The progression from adolescence into young adulthood serves as an important transitional period for self-efficacy development. Each of these social structures and developmental stages will now be discussed.

Family. The development of self-efficacy begins in infancy. A baby’s original outside source of efficacy experiences is the family, usually the baby’s parents. A baby’s first experiences of efficacy involve getting adults to make changes in the environment that the baby cannot make his- or herself (Bandura, 1989). As a child’s sensorimotor skills improve, additional efficacy experiences occur during exploratory and play
activities. As receptive language skills develop, a child’s sense of efficacy is affected by others’ judgments of his or her capabilities, which then influences whether and how new tasks are attempted. Overprotective parents dwell on dangers and thus constrain development, whereas secure parents encourage a child’s growing capabilities (Bandura, 1997), and thus the child’s sense of self-efficacy.

Teenagers with disabilities typically choose their career goals based more on informal family role models than on what takes place during their schools’ vocational programs (Morningstar, 1997; Morningstar et al., 1996). Families can support self-efficacy beliefs and career advancement by placing high expectations on their children with disabilities (Crudden & McBroom, 1999), but students often report that families are over protective, discourage them regarding their future (Dowrick et al., 2005), and do not give them enough responsibility (Morningstar et al., 1996).

Peers. As a child develops, his or her social world expands to include peer relationships. Sources of efficacy experiences therefore also expand from family and parents to include a child’s peers. In peer relationships self-efficacy begins to develop in specific domains. Children become sensitive to their relative standing among their peers in various activities, i.e. athletics and academics (Bandura, 1997). That perception of relative standing leads to comparative efficacy appraisal and verification (Bandura, 1989). Because peer relationships are so essential to the development of self-efficacy, disrupted or impoverished relationships with peers can adversely affect a child’s sense of personal agency (Bandura, 1997).
One study that showed the rich potential for using peers as a resource was conducted by Blake and Rust (2002), who assessed self-esteem and self-efficacy among a group of 48 college students with disabilities in the southern US that were members of a disability organization resembling a combined fraternity and sorority. In comparing the self-esteem and self-efficacy scores of students with disabilities with those of a non-disabled group at the same school, the researchers found that the students with disabilities scored significantly higher than the non-disabled group. The researchers proposed that the reason for this unexpected result was the existence of group cohesiveness generated by the disability organization. Dowrick et al. (2005) conducted focus groups in 10 states with people having various disabilities and ethnic backgrounds and found that peers with disabilities were often mentioned as natural supports. Peers have also been found to be significant supports for people with mental illness, sometimes even more than the systems designed to help them find employment (Killeen & O'Day, 2004).

*School.* At some point in the child’s development, the expanding social world of the child typically extends into the school environment. The school years are a crucial time in a child’s life. The school functions as the primary area for the cultivation of social and cognitive competencies. Sources of efficacy in the school include formal instruction, instructor’s interpretation of successes and failures, peer modeling, and personal comparisons with peers. Unfortunately, the experience of being in school is often a source of inefficacy due to the common competitive structure and lock-step sequences emphasized in that environment. In contrast, cooperatively structured learning and guided mastery promote efficacy development (Bandura, 1997).
The evidence shows that schools, unfortunately, provide a generally weak context for students with disabilities to develop vocationally-related self-efficacy. Hitchings, et al. (2001) interviewed 97 undergraduates attending three different universities in the Midwest regarding their high school transition planning. The researchers found only 20% reported being involved in formal transition planning. Although 60% had engaged in at least one career development activity, the choice of career activity was often passive and the frequency of any activity chosen was quite low. The most frequently cited career activity was completing a career inventory (26.4%), and the next highest activity was reviewing career material (18.3%). Career activities that involved active performance or observation (the strongest mechanisms for developing self-efficacy) were cited by even fewer students. Only 17% had participated in job shadowing or doing volunteer work, whereas only 7% had an internship, and only 4.5% had completed a vocational assessment. Furthermore, most students had only very broad career goals and had difficulty describing their disabilities along with how their disabilities might affect future job performance. Similar results have been found where researchers conducting focus groups reported that students with disabilities had wide-ranging and unfocused career choices with unrealistic expectations that both over and under estimated their potential (Morningstar et al., 1996).

Adolescence into adulthood. Adolescence is a time of major social role transition. How a young person’s sense of personal efficacy develops and is exercised during adolescence can play a significant part in how well the young person manages these transitions. The success of a young person managing the social risks and challenges of
adolescence depends on his or her prior efficacy experiences. A young person with a successful early history of mastery experiences and social support is likely to have an already developed sense of self-efficacy, thus making him or her more likely to be able to successfully navigate all the social role changes taking place during adolescence than the young person without the benefit of mastery experiences and social support (Bandura, 1997).

As the young person completes adolescence and moves into adulthood, one of the increased social demands the young person will typically face is the expectation of employment. Efficacy beliefs are important contributors to this vocational transition from unemployed young person to working adult (Bandura, 1997). A strong sense of self-efficacy contributes to the attainment of vocational success (Bandura, 1989) and awareness of expanded vocational opportunities, whereas low self-efficacy constrains vocational options and lessens chances of success (Bandura, 1997).

Based on the above discussion of how schools do a generally weak job of promoting vocational self-efficacy, and how the role of families is largely informal and can hinder as well as support career development in the home environment, and how the potential social resource of peer support and positive role models is under utilized, it is not surprising that students with disabilities show a career developmental lag during the transition from adolescence to adulthood. When comparing 95 students in special education (16-19 years old) to 99 similar general education students, Ochs and Roessler (2001) found that the special education students scored lower than their non-disabled peers in the areas of vocational identity, career exploratory plans, career outcome
expectations, and career decision-making self-efficacy. In a later study, Ochs and Roessler (2004) investigated career exploration in 77 students with learning disabilities and 99 general education students. The researchers found that no differences existed between groups for intent to explore careers, but the group of students with learning disabilities had significantly lower beliefs in their ability to do so (self-efficacy) and expected that their efforts would be less successful (outcome expectations) than the general education students.

To summarize the information presented thus far, the interaction between the person’s environment, behavior, and cognitions can promote or inhibit self-efficacy. Environmental sources of self-efficacy are family, school, and peers. These environmental sources influence self-efficacy through the mechanisms of vicarious learning and verbal persuasion. The primary behavioral factor affecting the development of self-efficacy is task performance. Cognitive factors influencing self-efficacy development are appraisal of task performance and physiological states, along with affective states. A particularly crucial time for self-efficacy development is when the person transitions from being an adolescent into an adult. To explore how self-efficacy beliefs generated during this transitional period are crucial to career development, the application of social cognitive theory to career development will now be discussed.

Social Cognitive Career Theory

Social cognitive career theory (SCCT), as developed by Lent, Brown and Hackett (1994), is rooted in Bandura’s triadic model of reciprocal determinism (1989). SCCT views career development as a confluence of personal attributes, the sociocultural
environment, and goal-directed behavior (Lent & Brown, 1996). Each component of this SCCT triad will now be presented, with a discussion of the SCCT process to follow.

**Personal Attributes**

SCCT focuses primarily on a person’s attributes, specifically his or her self-efficacy beliefs, personal goals, and outcome expectations (Lent & Brown, 1996). Personal goals are defined as the intention to engage in a behavior in order to produce a particular outcome (Bandura, 1986). Outcome expectations are defined as the expected consequence of such a behavior (Bandura, 1997). Sources of outcome expectations are similar to sources of self-efficacy, i.e. direct learning (mastery experiences), perceptions and appraisal of relevant past behaviors, vicarious learning, and second-hand information acquired about various vocational fields (Lent & Brown, 1996). Empirical evidence in support of the separate SCCT constructs of self-efficacy beliefs, outcome expectations, and personal goals has been found by Gore (1996) whose use of confirmatory factor analysis demonstrated that each construct accounted for unique portions of variance.

SCCT postulates that self-efficacy, personal goals, and outcome expectations are all intricately linked aspects of career development (Lent & Brown, 1996). However, self-efficacy and outcome expectations must be congruent in order for personal goal setting to occur. For example, a person is likely to have a goal of becoming a professional artist when he or she believes in his or her artistic ability and can also envision this ability translating into successful work as an artist. But if that person’s perceptions of his or her artistic self-efficacy are not in agreement with expectations of success, then he or she is unlikely to pursue art as a goal.
**Sociocultural Environment**

According to SCCT, career development takes place in a sociocultural context that may restrict or promote career development behaviors. A social environment that supports a person’s career interests and presents few barriers to vocational success is more likely to promote positive outcome expectations of a career than if the social environment is unsupportive or presents considerable barriers (Lent & Brown, 1996). To continue with the above example, if a person had great artistic talent but did not believe so due to lack of social reinforcement, or if that person only heard about unsuccessful artists without being socially exposed to the great number of people working in art-related careers, then he or she might develop inaccurate perceptions of artistic self-efficacy and expectations for successfully working as an artist. The result of these socially proscribed inaccurate perceptions might lead to him or her foreclosing on the possibility of a potentially rewarding career in art.

**Goal-directed Behavior**

When a person has congruent perceptions of self-efficacy and outcome expectations, and these perceptions are socially supported, the likely result is that he or she will then engage in goal-directed behavior (Lent & Brown, 1996). Such goal-directed behavior can include both successes and failures. The occurrence of failures leads to potential decreases in perceived self-efficacy that can impact changes in career interests and goals, and thus may restart the career development process. However, behavioral successes are likely to lead to increases in self-efficacy and resulting potential career achievement.
For purposes of parsimony, let us first consider the SCCT model with only the interacting constructs of personal cognitions and behavior. According to Lent and Brown (1996), the career development process begins when a child performs an activity with increasing proficiency. He or she will then develop a sense of self-efficacy and, later, an outcome expectation about his or her performance of this activity. The combination of self-efficacy and outcome expectations can result in a burgeoning interest, which can then become a goal of continuing to perform this activity. This cycle is most salient beginning in childhood and lasts until late adolescence or early adulthood. During this developmental period, the general interest in an activity can develop into a career-related interest, and this career-related interest may then become a career goal.

Let us now add to the model the sociocultural context in which personal variables and behavior operate. Before a child can perform an activity, the sociocultural environment must allow the child to be exposed to that activity. As has already been discussed, PWD often feel overprotected by their parents (Dowrick et al., 2005; Morningstar et al., 1996) and thus may not be exposed to activities otherwise normally available. Assuming the child with a disability has been exposed to an activity and performed well enough at it to develop feeling efficacious about it, thus also having an interest in continuing that activity, Lent and Brown (1996) propose that this interest is more likely to develop into a chosen career goal when the individual perceives ample sociocultural support (and few barriers) to this career goal. However, the presence of a disability evokes particular responses from the sociocultural environment, which then affects the behavior of a PWD.
Figure 1

Simplified SCCT Model Showing the Interaction of Environment, Behavior, and Cognition in the Development of Career Goals

Notes: Triangles represent an environmental condition, ovals represent behavior, and squares represent cognitions.
(Fabian, 2000), and thus his or her career development may be affected in a different way than that of a person without a disability due to socialization differences. See figure 1 for the researcher’s version of a visual model of this overall developmental process integrating the social environment, behavior, and cognitions.

**Self-efficacy Development Summary and Applications to this Study**

Vocational interests are moderated by contextual influences (Lent, Brown, & Hackett, 2000). Therefore, according to SCCT, if a PWD is not exposed to vocational and prevocational activities appropriate to his or her abilities, that the PWD will not have the opportunity for positive performance appraisal and eventual feelings of self-efficacy is theoretically possible. The result of this restricted process might therefore be a lack of self-efficacy.

If the PWD are exposed to activities to the point he or she is able to have positive performance of the activities, the next step in the model is the development self-efficacy judgments. Sources of self-efficacy are also contextual and include family, peers, teachers, and their verbal persuasion (Bandura, 1997). Thus, regardless of positive performance, if a PWD is not exposed to vocational role models via his or her family and peers, or at school, or the PWD receives negative messages regarding his or her efficacy in vocational activities, or no verbal persuasion at all (positive or negative), then, according to SCCT, it is theoretically possible that the person may develop low self-efficacy regarding work and careers.

The context in the theoretical situations discussed above is socialization. Different socialization patterns have been shown to happen with women and men in the fields of
math and science. The result of these socialization patterns has been low self-efficacy in the math and science domains for women, thus resulting in restricted career choices (Hackett & Betz, 1981). The goal of this research study was to qualitatively investigate the developmental experiences of PWD for different socialization patterns that potentially affect their work self-efficacy.

Self-efficacy and Related Outcomes

Now that we have an understanding of the development of self-efficacy as it relates to careers, our discussion will turn to the results of this development as it relates specifically to employment and other positive social outcomes. There are four different types of self-efficacy to be discussed. These are: Career decision-making, job search, work, and general. Each of these types of self-efficacy will now be defined, and related research will be explored.

Career Decision-making Self-efficacy

The end result of SCCT is that a person will decide on a career. A person’s belief in his or her ability to manage the tasks associated with successfully choosing a career is called career decision-making self-efficacy (CDMSE) (Betz, Klein, & Taylor, 1996). Since career decisions are made in a sociocultural context, a person must balance perceived social support with career barriers. In an investigation into how these two factors predict levels of CDMSE in a sample of college women over the age of 25 (considered nontraditional), Quimby and O’Brien (2004) found that perceived social support and career barriers combined to explain 32% of the variance in CDMSE. For women without children, career barriers accounted for more of this variance (17%) than
support (15%). However, for women with children the balance between these two factors was reversed; support accounted for more of the variance (19%) than barriers (13%). The most significant single predictor of CDMSE for the combined groups was reassurance of worth.

Besides having CDMSE, a person also has to believe in a positive outcome expectancy regarding his or her decision, and then he or she needs to translate these cognitions into career exploratory behavior. While CDMSE and related outcome expectations are only moderately correlated \((r = .60, p < .001)\) for students with learning disabilities, the combination of these two factors account for 50% of the variance in their career exploratory behavior (Ochs & Roessler, 2004). In a similar study conducted with students having physical disabilities, Elhessen (2001) found that the higher the score on CDMSE the more a person performs career exploratory behaviors. This study also found that severity of disability was a significant predictor of CDMSE, and that a positive correlation existed between CDMSE and adjustment to disability. Thus, individual, personal and disability characteristics may influence the development of CDMSE and, by extension, career exploratory behaviors.

**Job-search Self-efficacy**

Once a person has decided upon a career, the next step is to search for a job consistent with his or her decision. Job-search self-efficacy (JSE) is defined as perceptions regarding a person’s ability to perform the skills necessary to seeking employment (Barlow et al., 2002). The most significant predictor of JSE is general self-efficacy (Barlow et al., 2002; Wiener, Oei, & Creed, 1999). General self-efficacy (GSE)
is defined as an individual’s fundamental beliefs about his or her ability to manage the basic difficulties of life (Sherer et al., 1982). Because of the generality of GSE, Bandura cautioned against its specific utility (1997); however GSE is frequently used as a comparison measure with more specific types of self-efficacy, as will become evident in the following discussion.

Besides GSE, additional predictors of JSE include length of work history and whether or not a person attended a career-oriented educational institution (Decker, 1996). JSE is found to be related to the number of job-search activities a person engages in (Decker, 1996) and job offers extended to a person (Moynihan, Roehling, LePine, & Boswell, 2003). In a sample of people with physical disabilities, JSE has been found to be positively correlated with self-esteem ($r = .59$), whereas it is negatively correlated with anxiety ($r = .42$) and depression ($r = .45$) (Barlow et al., 2002).

In a case study of welfare recipients by Sterrett (1998), all eight individuals participating in a job club increased their JSE from pre- to post-test, with all of them also obtaining employment and keeping it for at least 90 days. Cognitive group therapy has also been shown to be effective in increasing perceptions of employability in women with chemical dependency (Washington, 1999). Unfortunately, the author of this study did not report whether or not the increased perception of employability was paired with actually finding a job. Among a sample of 60 people with psychiatric disabilities, Regenold, Sherman, and Fenzel (1999) used regression analysis to find that the only predictor of attaining employment was career-search self-efficacy, a construct that includes JSE, interviewing efficacy, networking efficacy, and personal exploration efficacy.
Unfortunately, the results of this study did not include how many participants found work or how the subscales of the career-search self-efficacy scale were individually factored to see how each contributed to employment outcomes.

**Work Self-efficacy**

After deciding on a career and then engaging in job search activities, the next logical step in the process is actually working in a chosen job. Because self-efficacy is domain specific, there are potentially as many types of work self-efficacy (WSE) as there are types of work. Most research in the area of WSE is done in the fields of business and organizational psychology and relates to specific jobs or categories of jobs, i.e. managerial self-efficacy and salesperson self-efficacy, and so on. In a meta-analysis of 114 studies of this type by Stajkovic and Luthans (1998), job-specific self-efficacy for wide range of positions was found to be moderately correlated to its corresponding job performance ($r = .38, p < .01$). Unfortunately, disability does not appear to have been a factor in any of this research, and we cannot necessarily infer from this line of research that job-specific self-efficacy, even though there are many types, generalizes to a general sense of work self-efficacy as defined in this research proposal.

The research proposed here conceptualized work in a more generalized manner (i.e. any job, not a specific job) and applied this concept to PWD. Therefore, the criteria utilized for inclusion of research articles in this section were: (1) that the study conceptualized WSE in a similar manner to this study, and (2) that the study involved PWD. Regrettably, an extensive search through the psychological, sociological, and
general academic electronic databases revealed only a small number of research articles that met these criteria, each of which will now be reviewed.

Niemeyer (2000) surveyed 156 injured workers to investigate which of a wide variety of personal- and injury-related variables might best predict return to work. Using logistic regression, four areas were identified that predicted 50% of the variance in return to work outcomes, one of which was return to work self-efficacy. When combined with a measure of work injury attribution, return to work self-efficacy were the best overall predictors of return to work. Niemeyer concluded that perceived expectancy of return to work was a key component of the rehabilitation promise and needed assessment when working with this population.

In a study involving 102 young adults with emotional disturbance, Willis (2003) found that WSE, work outcome expectations, and work commitment all increased the odds of employment. Unfortunately, high work outcome expectations also reduced the odds of school enrollment. These results suggest that high WSE and work outcome expectations may lead to working in the proximal future while possibly inadvertently foreclosing on educational opportunities that might lead to better work outcomes in the more distant future, thus complicating the relationship of school and work for this unique population.

Employed college graduates (N = 60) with learning disabilities were surveyed by Madaus, Ruban, Foley, and McGuire (2003) to determine their employment self-efficacy and job satisfaction. The authors defined employment self-efficacy as the belief that a person can succeed at a particular behavior at his or her job. Job satisfaction was defined
as general gratification derived from the person’s job. Employment self-efficacy and job satisfaction were the most highly and significantly correlated (r = .71, p < .01). The only other variables significantly associated with job satisfaction were self-regulation and accommodations (r = .37, p < .01) and current annual salary (r = .23, p < .05). Using hierarchical regression analysis, the researchers found that employment self-efficacy accounted for 42% more of the variance in job satisfaction than all other demographic and disability-related variables combined. It would thus appear that not only does WSE contribute to holding a job, but that it also contributes to being satisfied with the job held by PWD.

A review of eight studies of people in psychiatric vocational rehabilitation programs in the Netherlands was conducted by Michon, van Weeghel, Kroon, and Schene (2005). Each study in this review utilized multivariate analysis of longitudinal data measuring employment outcomes after at least six months of program participation. The overall best predictor of a positive employment outcome was work performance measured at the time the person started his or her vocational rehabilitation program, but the next best predictor was work self-efficacy, defined by the authors as positive outcome expectancy and career-search self-efficacy. In other words, even for people with psychiatric disabilities in another country, other than current work performance, the best predictors of employment were positive belief in the finding or keeping of work and confidence in the ability to find work.
Self-efficacy Outcomes Summary and Applications to this Study

Results of the above research provide evidence that the positive relationship of self-efficacy to employment is strong yet sparse as it applies to PWD. Persons with high CDMSE tend to do more job-search behaviors than those with less. Persons with high JSE tend to be more successful at finding work than those with less. Persons with high GSE and WSE tend to be working more than those with less. CDMSE, GSE, and JSE are clearly defined constructs in the literature, but WSE remains a construct in development. Most research to date has focused on job-specific self-efficacy and not the more general conception of WSE as defined in this study. The definition used in this study is a person’s judgment of their capability to do the basic tasks necessary in order to work in and maintain a job for an extended period of time.

Career development research and employment-related self-efficacy research for PWD exists, but no research has been found that examines the specific process of WSE development or the culmination of this process. The present study therefore aimed at describing how WSE developed in PWD and how that development resulted in behavior and beliefs regarding employment.
CHAPTER 3
METHODOLOGY

Chapter 3 contains the qualitative research design and methods for this study. This chapter is organized into the following sections: qualitative design rationale, participants, the researcher’s role, data collection and management, data analysis, and trustworthiness.

Qualitative Design Rationale

The purposes of this research were to describe, from a first-person perspective, the development and current manifestation of work self-efficacy (WSE) and then to attempt to explain how WSE development contributes to the later employment beliefs and behaviors of people with disabilities (PWD). Such descriptive and explanatory research purposes are typically the domain of qualitative research. This is because explaining complex human behavior and beliefs can be very difficult without an understanding of the individual contexts in which life events occur. Face-to-face interaction with research participants serves to provide this deeper perspective. The resulting rich descriptions of complex social phenomenon are very useful for exploring topics not previously or sufficiently addressed in the literature (Marshall & Rossman, 1999). No qualitative research specifically regarding the development of WSE has been located in the literature, and the minor amount of quantitative research done in this area has used deductive procedures and a variety of definitions in attempting to link WSE to employment outcomes. WSE is therefore a topic about which almost nothing is truly
understood; WSE is a construct in development. As such, qualitative research is an appropriate method for this type of study (Patten, 2002).

The research design of the present study consisted of a multiple case study approach using the qualitative data collection techniques of in-depth interviews with a supplementary open-ended questionnaire in order to answer the research questions. The proposed research design will now be explained in detail.

Research Participants

Recruitment of Participants

Research participants were recruited from two states and included both urban and rural areas. Contacts were made with potential participants via university disability services offices, state-federal rehabilitation offices, independent living centers, university faculty members, and other community contacts. Recruitment procedures consisted of the email distribution of a flyer (see appendix A) that described the research in general terms and asked the potential participants to contact the researcher via phone or email. An incentive of four free movie tickets (or their cash value of $36) was offered to all participants that were selected and subsequently completed the three interviews.

Selection of Participants

When potential participants contacted the researcher, the study was explained as one that explored the career development process of PWD. WSE was not specifically mentioned in order to avoid potential bias in participants’ later responses. During the first contact with a potential participant, a brief screening interview took place. This screening interview consisted of three questions:
1. What is your age?

2. What is your disability?

3. Do you currently have a work goal?

Each of these questions had a specific rationale. The age span was originally
limited to the young adult years of 18-25 so that the participants’ developmental
experiences were recent enough to be reasonably and accurately recalled for the
interviews. Participants were also expected to be at the beginning of their chosen careers.
The rationale for including only those with physical disabilities was to limit the study so
as to allow for more focused data analysis that did not cross types of disability. Physical
disability is also a very visible form of disability that affects interaction with both social
and physical environments, thus providing a unique opportunity that less visible
disabilities such as a learning disability or mental illness do not provide. It was important
that the participants had a current work goal (or were already working) because the basic
focus of the study was employment and its precursors. Those not interested in
employment were, therefore, by definition outside the realm of the study.

Once an individual had been screened as appropriate for the study, two additional
criteria were assessed: childhood expectations of work and gender. Using these criteria,
four participants, each with a unique perspective, were then sought to fit into the
following categorical grid.
The theory-based stratified purposive sampling used in this study permits the selection of a small number of research participants that exemplify theoretical constructs, thereby allowing for examination and elaboration of these constructs while facilitating comparison between subgroups. This method is an accepted qualitative research practice (Marshall & Rossman, 1999). The specific selection criteria and the rationale for using each criterion will now be explained.

The first selection criterion was childhood work outcome expectation. Two participants were to have had grown up with the expectancy that they would someday work, and two participants were to have had grown up with little or no expectation that they would someday work, whether or not it was a current goal or expectation. The rationale for the work outcome expectancy distinction between groups was twofold: (1) outcome expectancy is an indicator positively related to self-efficacy (Bandura, 1986), and (2) it potentially maximizes the developmental differences being explored.

The second selection criterion was gender. Two male participants and two female participants were sought. The rationale for having an equal number of male and female participants was to attempt a balanced reporting of possible gender differences in WSE development.
The specific questions asked of potential participants were as follows:

1. As a child, did you expect to go to work when you grew up?
2. What is your work history?
3. What is your gender?

As potential participants were identified via the criteria and questions described above, I met with them individually to complete the informed consent process. Once a person had agreed to be in the study, he or she was given an alias so as to protect his or her identity throughout data collection and later reporting. This recruiting and informed consent process was to continue until four appropriate participants had signed on.

Recruitment Procedures

The active recruitment of participants began immediately after approval from the University’s Internal Review Board (IRB). The first attempt at recruiting participants was to meet with the Assistant Director of a major urban university’s Disability Resource Center (DRC). She then broadcast an email to all students registered with the DRC. This occurred in May 2006 and yielded the first participant for the study, who was given an alias, Alice. When no other qualified participants were found, another broadcast email was sent in June 2006. The email was unsuccessful in finding any participants, so additional steps were taken to broaden the search in order to locate potential participants.

The first step in broadening the search options was to contact five local school-to-work transition counselors within the community who then reviewed their files and memories for clients that met the criteria for inclusion in the study. Only one such a person was identified. The counselor of this person then contacted the identified client,
explained the nature of the study, and asked if he might be interested in participating. The person agreed, and he was given the alias Bill. Both Alice and Bill had grown up with the expectation of working, but still remaining to be included in the study were an additional male and female that did not grow up with the expectation of working.

In June, the investigator was hired into a new position that was scheduled to begin in a different state in August. It was decided to stop searching for participants during the process of relocation. Upon beginning work at the new university, the investigator was required to obtain the approval of that university’s IRB before recruitment of study participants could resume. IRB approval to continue the research in the new location was granted in October.

The first step in locating the final two research participants was to meet with the Director of Disability Services at the second university. The Director was unable to identify any student that met the remaining criteria of not expecting to go to work while growing up. In November, six other professors in the Counseling Department were consulted, but each also was unable to identify any local potential participants who met the study criteria. In December, cooperation was obtained from the state Vocational Rehabilitation Counselor for the area, but he was also unable to identify any qualified participants. At this point, searching with all available and approved means to recruit the last two participants in a major urban area in the southwestern US as well as a rural area in another southwestern state had been underway for four months with no success. Faced with this consistent and prolonged lack of success, a complete reevaluation of the recruitment process and participant criteria was conducted.
The consensus of the people from whom the investigator was seeking assistance in recruiting was that locating two people under the age of 25 with a life-long disability that did not expect to go to work would be extremely difficult because PWD that age grew up with the Americans with Disabilities Act (ADA) and the Individuals with Disabilities Education Act (IDEA). By growing up in the era of ADA and IDEA, PWD were thus widely exposed to ideas about working. The consultants unanimously suggested that the age criteria be increased to include older adults that grew up before these landmark legislative acts. An additional suggestion was to expand the geographical search area into urban areas within a few hours driving distance of the rurally located university.

Using the consultants’ above recommendations, the search for study participants resumed in January 2007. At that time, a second meeting was held with the local VRC regarding older clients that might qualify for the study. The local VRC located both a male and a female and contacted them. These two potential participants told him that they would call me to volunteer for the study, but these two people never did so. While waiting for these potential participants to call, additional contacts were made to the school-to-work transition counselor for the neighboring county, the Independent Living Coordinator for the local Independent Living Center, and the director of the local independent living apartment complex, none of whom were able to identify any potential participants. In February, contacts were made with two VRCs and a VRC supervisor in urban areas approximately 70 miles away, as well as two additional Independent Living Centers in the area, all with no success. In March, contact was made with a local nurse.
that had connections with a large number of local doctors and the local disability community, and she was also unable to identify any potential participants. A repeat consultation was then held with the Counseling Department faculty about potential participants in the wider geographical area. Participant number three was finally located in March in an urban community as a result of the university counseling faculty contacts. Participant number three was also given an alias, Carl.

To summarize, recruitment took place over a 12 month period in two states. Recruitment in the first state covered a major urban area, and recruitment in the second state covered an approximately 100x50 mile corridor that included both rural and urban areas. Recruiting contacts were made with the following:

- Directors of Disability Services from two universities
- One University’s Counseling Department faculty
- Four state-federal rehabilitation services offices
- Three Centers for Independent Living
- One independent living facility
- Six school-to-work transition counselors
- One community nurse

Based upon all the time and effort invested in the above process, along with its limited success, the decision was finally made to halt the recruiting process and proceed with only the three participants as shown in the following grid.
<table>
<thead>
<tr>
<th></th>
<th>Childhood Expectation of Working</th>
<th>No Childhood Expectation of Working</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Female</td>
<td>1</td>
<td>0</td>
</tr>
</tbody>
</table>

Detailed descriptions of the three participants that participated in the study will be presented in chapter 4. The difficulty of finding any PWD that grew up with a disability not expecting to go to work, especially a female, is considered an unexpected yet important finding in this study. The implications of this finding will be discussed in depth in chapter 5.

Data Collection and Management

There were two methods of data collection. Data collection methods included three semi-structured interviews and a written open-ended WSE questionnaire. Each of these methods will now be explained in detail.

Interviews

In order to understand WSE from a first person perspective, interviewing is a necessary avenue of inquiry (Seidman, 1998) and was therefore the primary method of choice for this study. A series of three semi-structured interviews were conducted with the participants described above. The series of interviews followed a protocol recommended by Seidman (1998). The first interview was a focused life history and established the context of career and WSE development, thus addressing the first research question. Data in the form of stories, thoughts, and feelings were gathered during this
interview. The first interview set up the context for the second interview, which addressed the third research question by focusing on the details of the participants’ present experiences involving work and WSE. The third interview focused on the meaning participants’ careers and WSE development experiences had for them. Participants were asked to reflect on how the information gathered during the first two interviews had interacted to bring them to their present situation, thus addressing the second research question. Whereas each interview focuses on a different research question, data from all three interviews were used to address all three research questions.

The qualitative interview protocols for each interview were developed by the researcher specifically for this study (see appendix B). The protocols were based upon a procedure that was piloted as part of a qualitative research class taken at the University of Arizona. The pilot participant was an 18-year old woman with cerebral palsy. Questions for the study were selected from the overall pilot interview process based on how directly they addressed the research questions while also eliciting the most meaningful responses from the participant. Interviews were conducted in a place of the participants’ choosing, so as to allow for their comfort. All interviews were audio taped and later transcribed verbatim for analysis.

Interview number 1. The protocol for the first interview consisted of 10 basic multi-part questions from which the interviewer could then follow up for further clarification. These 10 multi-part questions were divided into five sections. The first section of the protocol set the context of the interview and asked about childhood goals
(Bandura, 1986) and expectations (Bandura, 1997). The specific multi-part questions were:

- “What did you want to be when you were growing up? Where did you get this idea?” “What happened to this goal?”
- “What expectations regarding your future as a working person did you have while growing up?” “Where did these expectations come from?”

The next seven questions in this protocol were based on Bandura’s theory of self-efficacy (1997) and were aimed at eliciting experiences in each of the areas whereby self-efficacy is socially learned (i.e. mastery experiences, modeling, and verbal persuasion). The mastery experiences section contained three multi-part questions dealing with vocational and prevocational activities. These three questions were:

- “What chores, if any, did you have while growing up?” “How well did you perform your chores?”
- “What school experiences did you have regarding your future as a worker?” (i.e. field trips to work sites, workers visiting your class to explain what they did, etc.)
- “What is your work/volunteer history?”

The modeling experiences section asked three multi-part questions dealing with work and disability role models. These questions were:

- “Please describe any visits you may have had to where a family member or friend worked. What did you see and do during these visits?”
• “What exposure to people with disabilities did you have while growing up?” “What were your experiences with them?”

• “What is your first memory of a person with a disability?” “Where did you see them?” “Who were they?” “What were they doing?”

The verbal persuasion section asked one question with three variations to it. This question was:

• “What encouragement did you get from your family/friends/teachers (or other adults at school) about your abilities while growing up?” “If they discouraged you, please describe this also.”

The final section of the first interview protocol consisted of one multi-part question on the topic of how the participant’s disability may have played a role in the issues previously talked about in the interview. This specific question was:

• “How do you think all of these experiences we have talked about today have influenced how you feel about your potential for being an effective worker right now?”

*Interview number 2.* The protocol for interview number two followed a similar format and contained 11 multi-part questions. The interview began with three general multi-part questions to follow up from the previous interview and set the tone for the current interview. These specific questions were:

• “Is there anything you would like to add from our previous interview that you may have thought about since we last met?”
• “How do you feel about work in general?” “What does work mean to you right now?”

• “In your own words, please describe how effective you would be as a worker right now.” “Why do you feel this way?”

As in the first interview protocol, the next seven questions were divided into sections on mastery experiences, modeling, and verbal persuasion. The specific mastery experiences questions were:

• “What activities do you do throughout the day?” “How effectively do you feel you perform these activities?”

• “What makes you feel productive?” “Why?”

• “What do you feel are your strengths or skills?”

The modeling section asked about current behavior models the participant may have had. The specific questions were:

• “How much contact do you have with other people with disabilities that are working?” (Repeat question asking about nonworking).

• “How do you feel about other people with disabilities that are working?” (Repeat question asking about nonworking).

The verbal persuasion section asked about the messages a participant received from others in his or her environment. The specific questions were:

• “Who encourages you in your present lifestyle?” “How do they encourage you?”

“How do you feel about that?”
• “Who, if anyone, discourages you about your present lifestyle?” “How do they express their discouragement?” “What do they say or do?” “How do you feel about that?”

The final question in the second interview protocol was once again on the topic of how the participant’s disability may have played a role in the issues discussed during the interview. The specific question was:

• “What role do you feel your disability played in the issues we have discussed today?”

_Interview number 3._ The protocol for interview number three was the least specific. The content questions for this interview depended on what was discussed in each of the previous two interviews. As such, specific questions varied with each participant. The interview began with two general multi-part questions to follow up from the previous interviews and set the tone for that current interview. These specific questions were:

• “Is there anything you would like to add from our previous interviews that you may have thought about since we last met?”

• “How do you think all of these experiences we have talked about over our past two meetings have influenced how you feel about your potential for being an effective worker right now?”

As in the previous two interviews, the next three sections covered the areas of mastery experiences, modeling, and verbal persuasion. The general guiding (but not specific verbatim) questions for each of these sections were:
• How do you think the mastery experiences we have talked about over our last two meetings have influenced how you feel about being an effective worker right now?

• How do you think the modeling experiences we have talked about over our last two meetings have influenced how you feel about being an effective worker right now?

• How do you think the verbal persuasion experiences we have talked about over our previous two meetings have influenced how you feel about being an effective worker right now?

As in the previous two interviews, the final question was on the topic of how the participant’s disability may have played a role in the issues discussed during the interview. The specific question was:

• What role do you feel your disability played in the issues we have discussed today?

Open-ended WSE Questionnaire

The WSE questionnaire was created by the researcher specifically for this study. The content of the questionnaire reflects basic employability skills that potentially relate to WSE. Basic employability skills are defined as functional behaviors that are essential and transferable to all levels of employment (Overtoom, 2000). These behaviors can be categorized into skill domains such as interpersonal skills, problem solving, and dependability (Hill & Petty, 1995). The second step in creating the WSE questionnaire was to design open-ended questions reflecting the above skill domains. The specific skill
areas covered in the questionnaire included: problem solving, consistency and punctuality, getting along with coworkers, and getting along with supervisors. The rationale for including questions reflecting these areas was that if a person believes in his or her ability to be successful in these essential work areas, then that person may also be more likely to feel like an effective worker. These areas were also not specifically part of the interview protocols and their inclusion here thus allowed for the collection of unique, yet related, data.

Also included in the questionnaire were questions addressing three additional domains that asked participants to assess their work skills, disability, and WSE. These three domains were also included in the interview protocols. The inclusion of these domains in the questionnaire allowed for the collection of similar data from two sources that could thus be compared for reliability purposes.

The WSE questionnaire consisted of seven questions covering two pages (see appendix C). The task for question 1 was to have the participant describe his or her disability and how it affected his or her ability to be an effective worker. The task for question 2 was to have the participant describe a recent problem and what he or she did to overcome it. The task for question 3 was to have the participant describe his or her ability to maintain a regular work schedule. The task for question 4 was to have the participant describe how well he or she got along with coworkers or peers. The task for question 5 was to have the participant describe how well he or she got along with supervisors or authority figures. The task for question 6 was to have the participant assess his or her most important work skills and how these skills were acquired. The task for question 7
was to have the participant describe why or why not he or she was an effective worker right now.

Data Analysis and Validation Procedures

Upon completing the series of three interviews, the transcripts and questionnaires were reviewed with the goal of creating case summaries. The case summaries were meant to serve two purposes: (1) to condense all of the transcript and questionnaire data into a manageable and readable format, while also preserving and honoring the individual voices of the participants as much as possible; and (2) to address each of the three research questions clearly and succinctly.

In order to condense the participants’ interview and questionnaire data into case summaries, a coding system was needed. Because there were three research questions, it was originally thought that three separate coding systems would be needed, one for each research question. However, since research questions one and two (RQs 1 & 2) were so closely related (What are WSE developmental experiences? and How do these experiences contribute to WSE?), it was decided to collapse the coding for RQs 1&2 into one system, and a second system would then be used to address research question number three (RQ3: What are the participants’ WSE beliefs?). Each of these two coding systems will now be explained.

Three different attempts were made at creating a comprehensive data coding system for research questions one and two. Whereas each successive attempt yielded a richer understanding of the data, none of them were able to completely address both research questions. The first attempt at coding RQs 1 & 2 was to use the interview
questions as a basis for developing codes. This attempt proved unsuccessful, however, because the codes were cumbersome and imposed a structure on the interview data that stifled the voices of the participants and their stories. The second coding attempt involved a modification of the system used in the pilot study for this research. The second attempt at coding yielded increased participant detail; but it, too, was ultimately judged to be too cumbersome and stifling in structure. The third attempt at coding emphasized finding the intersection of participant themes with the theoretical areas of interest. The third attempt at coding finally resulted in a system that allowed the participants’ voices and stories to be heard while also being consistent with SCCT theory. This coding system was also quite parsimonious and easy to use; however, it did not quite capture the complexity of the participants’ responses regarding events that could potentially promote or inhibit their WSE. Therefore, the coding system was amended to include sub-categories for promoting or inhibiting potential (i.e., parental support vs. overprotection). This amended coding system was the one used in this study to answer RQs 1 & 2.

The coding system for RQs 1 & 2 is summarized in Table 1, along with each code’s operational definition. Primary codes are assigned for WSE experiences associated with work, family, school, peers, and a category for other. Once all the WSE experiences were identified, a secondary code was assigned according to each experience’s potential to promote or inhibit WSE.

The first attempt at creating a coding system for RQ3 was to use Bandura’s (1997) triadic reciprocal determinism (cognitions, behavior and environment) as it applied to SCCT. Participant responses regarding cognitions about work were subdivided
into two categories: Global beliefs and job-specific WSE beliefs. This coding system proved quite easy to use while also preserving the participants’ voices and stories. The coding system for RQ3 is summarized in Table 2, along with each code’s operational definition. The specific codes used in the current study were global beliefs about work, job-specific WSE beliefs, behaviors influencing WSE, and social influences on WSE.

Once the two coding systems were satisfactorily completed, each of the participant’s data sources was reviewed and the codes were applied. This process repeated itself many times, with adjustments being made, until everything was judged to be as accurate and complete as possible. This collection of coded information was then used to create the case summaries.

After each case summary was completely written, the member check process was initiated in order to insure that each profile was an accurate representation of the participant’s lived experience. The member check validation process involved sending each case summary to its respective participant for his or her feedback and approval. Two of the participants approved their profile with no changes, and the other participant had only one correction to make, which was done.

Trustworthiness

Traditional quantitative research is typically designed to rigorously address issues such as internal and external validity, reliability, and objectivity in order to meet high quality standards. High quality research in the qualitative genre, however, approaches these issues of trustworthiness in a different manner (Lincoln & Guba, 1985). The equivalent of internal validity in qualitative research is termed credibility, meaning the
Table 1

Codes Used in Analyzing Interview and Questionnaire Data for RQs 1 & 2

<table>
<thead>
<tr>
<th>Primary Code</th>
<th>Secondary Code</th>
<th>Operational Definition for RQ1</th>
<th>Operational Definition for RQ2</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developmental</td>
<td>Promote</td>
<td>The participant’s opportunities for mastery</td>
<td>How each work experience contributed to current WSE beliefs</td>
</tr>
<tr>
<td>work experiences</td>
<td>inhibit</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Family</td>
<td>Promote</td>
<td>Family experiences</td>
<td>How each family experience has influenced current WSE beliefs</td>
</tr>
<tr>
<td>experiences</td>
<td>inhibit</td>
<td>associated with WSE development</td>
<td></td>
</tr>
<tr>
<td>School</td>
<td>Promote</td>
<td>School experiences</td>
<td>How each school experience has influenced current WSE beliefs</td>
</tr>
<tr>
<td>experiences</td>
<td>inhibit</td>
<td>associated with WSE development</td>
<td></td>
</tr>
<tr>
<td>Peer</td>
<td>Promote</td>
<td>Peer experiences</td>
<td>How each peer experience has influenced current WSE beliefs</td>
</tr>
<tr>
<td>experiences</td>
<td>inhibit</td>
<td>associated with WSE development</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Promote</td>
<td>Other experiences</td>
<td>How other experiences have influenced the participant’s current WSE beliefs</td>
</tr>
<tr>
<td>experiences</td>
<td>inhibit</td>
<td>associated with WSE development</td>
<td></td>
</tr>
</tbody>
</table>
Table 2

Codes Used in Analyzing Interview and Questionnaire Data for RQ3

<table>
<thead>
<tr>
<th>Primary Code</th>
<th>Operational Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Global beliefs about work</td>
<td>The participant’s attitude toward work in general; what work means to the participant</td>
</tr>
<tr>
<td>Job specific WSE beliefs</td>
<td>The participant’s attitude toward his or her specific job; work events contributing to feelings of WSE</td>
</tr>
<tr>
<td>Behaviors influencing WSE</td>
<td>Behaviors the participant does that contribute to his or her current WSE beliefs</td>
</tr>
<tr>
<td>Social influences on WSE</td>
<td>The influence of other people on WSE both in and out of the work environment</td>
</tr>
<tr>
<td>Other influences on WSE</td>
<td>Any other experiences that influence the participant’s current WSE beliefs</td>
</tr>
</tbody>
</table>

area of inquiry is accurately described. This is done by grounding the area of inquiry in theory and explicitly addressing the potential for researcher bias. The equivalent of external validity in qualitative research is transferability, meaning the results may transfer from the population studied to the greater population. Once again, this is done by grounding the research in theory so that other researchers can later make their own judgments regarding how the results may apply to populations of interest. The equivalent of reliability in qualitative research is dependability, meaning an attempt to account for the changing conditions in the phenomenon being studied. Finally, objectivity in
qualitative research is confirmability, meaning whether or not the research findings could be confirmed by another. This is done by grounding the findings strictly within the data. In other words, another researcher should be able to look at the findings and see that the data help to confirm the findings and lead directly to the implications. How the current researcher specifically addressed each of these issues will now be discussed.

*Credibility*

One of the main validity issues in qualitative research is the potential for researcher bias. The challenge therefore becomes for the researcher to demonstrate that his or her personal interest will not bias the study. This was done via setting the study in the context of theory, rather than personal interest (Marshall & Rossman, 1999). The current researcher has now and has always had a mobility disability (wheelchair-user), and it was his personal and professional experience as a person with a disability that led him to this research topic. However, this study was firmly placed in the context of Bandura’s theory of self-efficacy, and it was Bandura’s theory that primarily guided the data analysis. Every effort was made not to allow the current researcher’s experience as a person with a disability to be superimposed upon the research process or interpretation of the findings.

Related to bias is the question of whether or not the researcher accurately heard what the participant said. This was verified via the member-checking method described in the data analysis section. The participants own words were used to as great an extent as possible when reporting the findings. The use of member-checking and verbatim use of participants’ own words thus minimized chances for researcher bias (Maxwell, 1996).
The final technique to try and ensure credibility to the findings was the comparative analysis of findings from the series of interviews. All the data from each participant’s interviews were compared and contrasted in order to search for consistencies and discrepancies. Where discrepancies were found, the member check process was utilized. This strategy reduced the possibility of making chance associations within the data (Maxwell, 1996; Seidman, 1998).

Transferability

The selection of participants that represented as wide as possible a variation in experience helps the potential transferability of the findings. By choosing participants of both genders and with different work outcome expectancies, all areas of self-efficacy theory and social-cognitive career theory were covered to as reasonable an extent as possible (Marshall & Rossman, 1999). With an understanding of how WSE developed in both men and women with different work and personal histories, a better understanding of the general population of PWD is possible.

Dependability

Qualitative research does not claim to be replicable because the aim of such research is to understand the complexity of events and conditions as they occur in the natural environment, not to control events and condition within the environment (Marshall & Rossman, 1999). However, this does not mean the results to be found here are not be dependable. By careful selection of multiple participants representative of a wide variety of experiences, along with using multiple methods of data collection, no
reason is known to assume that the processes described here are dissimilar to other PWD in other settings (Maxwell, 1996)

Confirmability

Consultations were sought throughout this research with various rehabilitation and developmental psychologists and rehabilitation education professors from two universities in order to get outside perspectives on the findings (Maxwell, 1996). This researcher also kept thorough notes and all data in a well-organized and easily retrievable form that is available to other researchers for inspection, challenge, or reanalysis (Marshall & Rossman, 1999).
CHAPTER 4

RESULTS

Chapter 4 contains the results of the study. Each of the participants will be introduced to the reader via the presentation of their respective case summaries. Each case summary will be presented in its entirety, wherein it will address each of the three research questions. Following the case summaries will be a detailed analysis of how all of the combined data addresses each of the research questions.

Case Summaries

Each case summary below will be presented in its entirety and consist of three sections. The introductory section of each case summary will include a description of the participant and his or her interview process with the researcher, descriptions of how the participant viewed his or her disability, and how his or her work goals developed. Once the participant has been fully introduced, the second section of the case summary will address RQs 1 & 2. The third section the case summary will address RQ3.

Instructions to the reader are necessary regarding notation used in the case summaries. Participant quotes are used in the summaries whenever possible, but the following notation is used to alert the reader regarding any editing within quotes. Ellipses are used when any unrelated or unnecessary language has been omitted, and brackets are used for any language inserted or changed for clarity and consistency. Some editing of words such as “like” or phrases such as “you know” was done when they were judged to be excessive, but not all such words and phrases were eliminated so as to maintain as much as possible the participant’s speech patterns. Editing of all quotes was done with
every effort made to maintain the spirit and context of the participants’ stories (Seidman, 1998).

Alice’s Case Summary

Alice was a 21-year old Caucasian female with rheumatoid arthritis, first diagnosed at approximately one year old. Her three interviews took place between 5/26/06 and 6/6/06. She chose to attend all interviews in the researcher’s university office for convenience purposes. The three interviews totaled 135 minutes and resulted in 76 pages of 1.5 spaced verbatim transcripts. At the time of her interviews, Alice was a senior at a major university in the southwestern United States. She was preparing for a study abroad trip to Segovia, Spain for six weeks, followed by traveling to Italy for a week before returning home to complete her baccalaureate studies with a double major in Spanish literature and philosophy. Alice approved this case summary with no changes.

Alice’s Disability Views

Alice describes her arthritis as affecting her “pretty much everywhere,” but her “hands are real involved,” and her “neck is naturally fused.” She tries to do as much as she can, but this occasionally results in “flare ups” that end up making her “sick.” Stress, “like around finals and midterms and stuff” also exacerbates her condition and contributes to flare ups. Having rheumatoid arthritis has “been tough” for Alice, but she thinks “it’s kind of made me who I am” and that she is “a better person” for having to deal with it. She admits to getting “depressed sometimes,” but is usually “pretty positive” about life.
Treatment for Alice’s arthritis involves taking prednisone (a corticosteroid) and injections of methotrexate (an antimetabolite) when her arthritis is most active. She calls prednisone “nasty stuff” and describes methotrexate as a form of chemotherapy, as it makes her nauseous afterwards. Treatments have also included surgeries. In the past nine years, Alice has had six surgeries related to her arthritis. Her first surgery was when she was 12 years old and the most recent was a total hip replacement in the summer of 2005, when she was 20. Another hip replacement was expected within the coming year.

Alice does not tell people she has arthritis and prefers to keep it “brush[ed] under the rug.” This attitude of nondisclosure has been her “philosophy” since she was six years old. Her feeling is that because “there’s nothing anyone can do about it,” why talk about it? And as for the prospect of her getting assistance from others, Alice states, “I have never been one to ask for or easily accept help. There is no laziness in my condition.”

Alice’s attitude toward her disability has both philosophical and emotional components. Philosophically, Alice feels “Nature figuratively chose me to carry a genetic flaw” and that in previous times she would “perish before child bearing years.” However, “The advances of medicine and technology have brought benefits,” which include her “current prospering.” At times she admits to asking “why me?” but considers fairness to be “just a human concept like truth or justice.” Beneath this stoic philosophy, however, lie deeper emotions, which Alice admits to not being as of aware as she could be: “everything’s under the surface.” She feels she needs “to own this disease a little more” but instead tends to push all this [negative] stuff… so deep” and not “deal with it” to the point that it results in “chaos.” What happens is that “all these emotions come out, and I
can’t control my emotions at all…. I’ll be having a normal day, except I’m in pain, but anyhow, I’ll just randomly break down [and cry].” Alice hopes that becoming more aware of her emotions related to her arthritis will make it easier for her to deal with flare ups in the future.

Alice’s Development of Work Goals

“I always thought I would work,” said Alice. She could not recall ever seeing her future as absent of college and subsequently work. When she was five and six years old, she wanted to be in the rodeo, but at seven years old she realized being in the rodeo was “ridiculous” due to her arthritis. When she was 12, Alice’s goal was to be “a photographer or a researcher for National Geographic.” This goal was possibly related to her family having a subscription to the National Geographic Society magazine. Her family supported the new photographer/researcher goal by then joining the National Wildlife Federation, which sent them monthly video tapes of animals in the wild that she would watch and “really get into.”

Upon entering college, Alice was a biology major with the goal of working with animals, but she found all the mathematics required in that major to be too difficult. After taking some general education classes in philosophy, and finding that she liked the subject, she changed her major. Additionally, she has a love for language and wishes she could “learn them all.” She currently knows English, Spanish and some Portuguese. The combination of interests in language and philosophy led her to a double major. Alice’s job goal at the time of the interviews was to become a college professor, either in Spanish
literature or philosophy. A final decision regarding this vocational goal was somewhat dependent upon the results of her trip to Spain.

*RQs 1 & 2: What were Alice’s WSE Developmental Experiences?, and How Did These Experiences Contribute to Later Work Self-efficacy Beliefs?*

The following section contains all of Alice’s reported WSE developmental experiences relating to work, family, school, and peers. Each set of experiences is divided into positive and negative aspects. One other negative experience with a doctor is described that did not fit any of the above categories. All of Alice’s WSE developmental experiences and contributions are summarized in Table 3 at the end of the section.

*Positive work-related experiences.* Positive developmental work experiences for Alice included doing chores as a child and a steadily progressing work history with each job being better and more complex than the previous one. Each of these experiences and its influence on Alice will now be explored in detail.

Alice started doing chores at home when she was seven or eight years old. Saturdays were cleaning days in her house, and this involved the whole family. For Alice “it was just little things… like sweeping the garage… sweeping off the porch… dusting, and doing the windows, stuff like that.” She “wasn’t excited about them,” but just did them anyway and feels she did them “pretty well.” She also earned an allowance, but this was not tied to performing her chores; however, her father would “come up with little odd jobs, like wash[ing] the car in exchange for $5.” Alice felt that she had fewer chores than her older, non-disabled sister, whom Alice felt had more than her fair share of
chores, possibly because of Alice’s arthritis-related limitations. Alice said her sister really “hated” doing chores to the point of “battles” and “huge fights” with their mother.

Alice believed that doing chores as a child set her up with the simple expectation that “you work, you get paid.” Beyond this simple maxim, however, doing chores also established a habit she has carried into adulthood, as she reported doing all the cleaning in the apartment she shares with her sister because “there is just no getting her to do things.” Alice felt that getting paid for chores as a child also prepared her for paid work as a young adult.

Alice started working for pay while in high school. “I needed to; I felt like I needed to make money.” She has had four jobs. Her first paying job was babysitting, and from there she moved on to a temporary job stocking shelves at the local community college bookstore. Her next job was working for a national retailer at the local mall, but she had to quit this job due to her arthritis (a negative experience that will be discussed later). Her next job was the one she held at the time of the interviews and involved working at the fragrance counter for a national department store chain. This employer has been “really great” and accommodates her disability with shorter work shifts, although she works the same number of weekly hours (approximately 20-25) as at the previous store. Overall, Alice has been working steadily for the past three years, excluding her recovery time from recent hip replacement surgery.

Working for pay gave Alice a “boost of confidence.” On a scale of one to ten, Alice rated her confidence in her ability to work as a three when she first started working, but at the time of the interview she rated her confidence as a seven. The reason stated for
it not being even higher was her arthritis and the difficulties it occasionally presented. As her confidence increased, so did Alice’s knowledge of work and how it matched with her restrictions and capabilities. Alice explains:

The more I get into [the] workplace the more I kind of see what jobs are right for me, and then try [other] stuff…. [E]ven when I was just working in a book store shelving books… that wouldn’t have been something I could have done all the time. [So] instead of staying with a job like that and realizing I would have to call [in sick] because there would be days that I wouldn’t be able to shelve books and carry things around, [I tried] to find something that is more suitable.

Negative work-related experiences. The only negative developmental work experience was not being able to return to a job due to disability-related issues. Alice’s first job with a national retailer became a negative experience when she had to take extensive time off to have her hip replaced. Once healed to the point she could return to work with the aide of a wheelchair, she contacted her employer. Alice picks up the story at this point.

They were really negative about me coming back and having to sit down at all. And it was made clear that if I couldn’t stand for seven hours that I would be demoted. And so I went and got a lawyer, and I went through all the ropes [for suing them under ADA], but it was just really hard because I didn’t have any[thing on] paper, you know, and it was over the telephone that this happened. It was a mess, so I just didn’t even want to go back there.”
Alice did not identify how this experience contributed to her current sense of WSE. It is worth noting, however, that Alice apparently felt enough WSE to be able to do this job while using a wheelchair, as she clearly disagreed with the employer’s decision not to bring her back. Furthermore, she possessed enough assertiveness to contact a lawyer and investigate the possibility of legal action, even though the process was never fully carried out.

*Positive family experiences.* Positive family experiences for Alice were that both of her parents worked and that they were very supportive of her working in the future. Each of these experiences and its influence on Alice will now be explored in detail.

Alice’s mother is a teacher, a job she has held throughout Alice’s life. Her father works in a railroad yard. As a child, her father worked on a horse ranch, and since the family lived onsite she was witness to work and labor from an early age. She reports her parents are “both very hard workers” and that she has “kind of grown up with that.” Her parents thus served as positive role models regarding work. She saw her father working while at home and witnessed her mother working (as discussed earlier) while in school.

Her parents were always very encouraging of her vocational goals, even from a young age. “They just kind of let me do or believe I could do whatever I wanted to.” This even included when she wanted to be in the rodeo. “They never put that down or said I couldn’t do it. They were really, they were good about that.” Getting her the wildlife tapes was also viewed as encouragement, although possibly with accommodation. Her father “wanted me to be excited about something. And he, they always told me I would
find a way. If I really wanted to be a photographer, maybe I wouldn’t go out, you know, on safaris and stuff, but I would find a way to do it.”

The result of these experiences is that Alice felt supported by her parents regarding her career development activities. She found their modeling of work behavior to be “influential” and described a household where there was “more import” placed on self-motivation, independence, and hard work. One thing she specifically ascribes to her parents’ influence is not to complain about work, but to enjoy it instead. Alice explains:

I learned… that’s what your job is, so just do it. Don’t find fault, because there’s a lot of people that go to work and they are constantly complaining about it, or whatever. And try to enjoy. I learned that from, well, my mom, she’s a teacher and she loves it. But my dad has had a lot of different manual labor jobs, but he likes working outside so he always does stuff outside. And it’s just try and enjoy whatever you have to do, you know. Find the positive aspects and go with it.

Negative family experiences. The only negative family experiences mentioned by Alice were parental overprotection, and grandparents that complained about their individual disabling conditions. Each of these experiences will now be discussed.

Alice’s parents consistently encouraged her general dreams and ambitions regarding work, but conflicting with this were also day-to-day behaviors where Alice perceived they treated her as if she could not do things without assistance and as of she were younger than her chronological age. Alice tells a story:

I remember being in the pantry, and we have this really tall pantry, and I had to get the stepstool out and climb up and everything, and they would come in and be
like why didn’t you just ask for someone to reach it for you? Well, I can get it myself. We would go through this every day.

This overprotective behavior by her parents extended to her first job as a babysitter, when they made a “big deal” about her being able to do the job safely. Even during the time of the interviews, Alice reported her parents were very proud of all her accomplishments, yet they also still wanted to take care of her because “they don’t want me to overdo it and get sick.”

The other potentially negative influences were Alice’s grandfather on her father’s side and her grandmother on her mother’s side. Alice’s grandfather had emphysema from working in the mines as well as diabetes, and he complained of his condition often. “He was sick, [and] he wouldn’t let you forget it for a second.” The result of his complaining was constant care-giving by his wife. “He didn’t do anything except get taken care of,” Alice said. Alice’s grandmother, who had arthritis in her hands, also complained about her condition frequently to anyone who would listen.

Alice’s reaction to both grandparents’ behavior was disapproval, even at the young age of six. “I guess I just kind of saw the way my grandpa was, and somehow it clicked that that was not what I wanted to be.” Alice’s reaction to her grandmother was even stronger disapproval. She was upset that her grandmother “had the audacity” to complain about her hand arthritis in front of Alice while incapacitated during her recovery from hip replacement surgery. “I’ve never complained, ever,” said Alice.

When asked to speculate how her life might be different if she had been raised by her grandparents instead of her parents, Alice acknowledges that she “would be a lot
more negative and have more of a needy negative outlook” about her arthritis. She also felt that she would probably not be working, because her grandparents “would have thought that that would have been too much” for her. She went on to say “once you’re told [that] over and over that’s what you’re going to expect and believe.”

Positive school experiences. The only positive school experience for Alice occurred in high school. As will be discussed below, Alice’s grade school and junior high school experiences were more focused on her being in special education due to her arthritis. This changed for Alice when she was able to shed the special education label and thereby attend a “really good” high school where she began to take advanced placement classes that helped prepare her for college. Alice felt that her high school teachers were supportive of her becoming a worker someday. “I just never had any doubt that they would think differently.” She reports being a “good student” that was “involved in everything” and felt that her teachers “expected me to just kind of carry that on” into working someday.

Negative school experiences. The primary negative school experience for Alice was having a social burden related in various ways to her arthritis. Most burdensome for Alice was being put in a special education program that Alice felt focused too much on nonexistent cognitive deficits. In regard to her physical disability, the program assigned Alice a special aide for safety reasons, and this added to her social burden. Another problematic and burdensome situation for Alice was her mother visiting her elementary school classroom every year to explain Alice’s arthritis condition to her classmates. Alice
could also recall very few career development activities of any kind provided by her elementary school. Each of these issues will now be discussed.

Of paramount importance to Alice during her elementary school years was to be a regular “kid” as much as possible and not be singled out as having a disability, yet she felt that the school system’s practices often did just that. “I was special ed, and that was my label, and, oh, I hated it. I thought it was really unfair.” Despite hers being a physical disability, the school system put her “through all the same testing they put mentally disabled students through. So I had to go take all the tests every year” all the way into high school. Also, in “first and second grade, when the kids in class would be doing reading stuff, I had to go to the special ed department and [do my] reading one-on-one with the teacher.” This was supposedly because she started taking prednisone and methotrexate at the time and the school felt she was “kind of acting out a little,” but in her view it was not acting out as much as it was the drugs not “meshing with me” that caused her behavior.

In addition to the above academic issues, Alice felt the school added to her social burden by assigning her “a personal assistant, a woman who would be in the classroom with me and walk around and be with me on the playground.” This assistant also stood behind Alice during the school’s Christmas program, and this made Alice very “upset” to the point she “didn’t even want to do it.” The use of this attendant lasted through the third grade.
The third socially burdensome experience that occurred during Alice’s school years was having her mother come in and talk to the class about Alice’s disability. Alice tells the story:

I was pretty fragile. I was very small and the bones were very weak, and just, you know, she wanted to make sure all the kids knew during play time and stuff to be careful. It definitely singled me out. I made her stop (laughs) at [about] sixth grade, because I figured by that time they were all aware anyway. I had the same kids since I was in first grade.

Other than having career day, Alice feels her schooling was not very career-based. While recalling that work was talked about, Alice could not identify any specific career preparation activities such as field trips to places of work or other vocationally related events. Overall, Alice felt that school, in general, had minimal influence on her WSE development.

Positive peer experiences. Positive peer experiences for Alice were that she always had numerous friends, she attended the Arthritis Foundation summer camp for a number of years, and that she had working role models at the Arthritis Foundation. Each of these experiences and its influence on Alice will now be explored in detail.

Despite the perceived social burdens described above, Alice “always had a lot of friends” and reported no problems with other children related to her disability. “I never had any problems with teasing or anything…. They had a lot of questions, you know, but they were really nice.” And even the attendant seemed to be less an issue for her peers than it was for her, because it “didn’t seem like it affected them.” Alice enjoyed the
feeling of inclusion while in grade school. More negative experiences occurred in junior high school, and these will be discussed in the next section.

Besides the good peer relations discussed above, Alice also was involved with the Arthritis Foundation as a child. This included attending Arthritis camp every summer until the age of 12, which was “a lot of fun.” One of the reasons that arthritis organization-related activities were enjoyable was because of the unique opportunity they provided Alice to share time with others having disabilities. “There wasn’t anyone that physically disabled… at school and stuff, and that was always so frustrating for me.”

Alice also had the opportunity to associate with adults having arthritis whenever she was at the Arthritis Foundation. But the positive aspect of this was quite limited, as she found it to be “normal.” “I figured that they would be [working],” she said.

**Negative peer experiences.** Overall, Alice felt that peers had minimal influence on her WSE development and were rarely mentioned by Alice at all in regard to work. The only negative peer experience mentioned that was related to WSE development was once again Alice’s association with adults with arthritis working at the Arthritis Foundation. She found it to be disturbing to see people working with the same condition as her. Their debilitated state “really bothered” her. “I kind of saw my future. And that might have been kind of why I pushed away, too, [and stopped involvement with the Foundation]; because I didn’t want to deal with that.”

**Negative doctor experience.** While her current rheumatologist is “amazing” and “incredible” in her support for Alice to become a professor some day, past experiences with doctors have often been very discouraging. Alice reports going through a number of
doctors that saw her only as a diagnostic label and not a person until she found her current rheumatologist. Of note along this journey is one particularly negative experience. Alice tells the story:

I used to have to go once a week to get injections, methotrexate injections…. And when I was a kid, I got pretty depressed. I don’t know if I was just depressed or frustrated or sick of it, because I get really sick from the injections for the next day…. I just get really nauseated, and so I was in the office one day and I started crying, and I think I was 12. So my doctor kind of overreacted and she sent me to see a child psychologist, because she just wanted me to talk to someone. I went to [the child psychologist] twice, I think. At that time I wanted to do the safari stuff… and he told me, “you need to be realistic… you need to figure out what you can do, and I don’t think that’s going to be something you can do.” And I never wanted to go back. He was the most discouraging person I ever [met]. He really was very negative.

RQ3: What were Alice’s Current WSE Beliefs?

Global work cognitions. Alice felt that work contributed to her independence: “I don’t want to be a burden on [my parents].” But more importantly, she also felt that work “should be something that you really enjoy, because I think it’s really sad when people have 40 hours or 50 hours a week [working at something] that they hate…. It’s such a big part of your life that you have to find your passion, and then kind of find something you can do with it.” To Alice, work was more than just a vocation, more than just a way to earn money, but was “something you should be proud of.” Alice explains:
Table 3

WSE Experiences and Contributions Summary – Alice

<table>
<thead>
<tr>
<th>Developmental Experiences</th>
<th>Potential Promote/Inhibit WSE</th>
<th>Specific Experiences (RQ1)</th>
<th>Specific WSE Contributions (RQ2)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Work</td>
<td>Positive</td>
<td>Childhood chores</td>
<td>Work equals pay check; Good work habits</td>
</tr>
<tr>
<td></td>
<td>Negative</td>
<td>Work history progression</td>
<td>Increased confidence in abilities</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Lost job due to disability</td>
<td>Fought against it</td>
</tr>
<tr>
<td>Family</td>
<td>Positive</td>
<td>Both parents worked</td>
<td>Self-motivation and enjoyment</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Parental encouragement</td>
<td>Gave her a positive overall outlook</td>
</tr>
<tr>
<td></td>
<td>Negative</td>
<td>Parental overprotection</td>
<td>Fought against it</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Grandparents complaining</td>
<td>Fought against it</td>
</tr>
<tr>
<td>School</td>
<td>Positive</td>
<td>Teacher support</td>
<td>Felt supported</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Academic performance</td>
<td>Gave her confidence</td>
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<tr>
<td>Category</td>
<td>Emotion</td>
<td>Experience</td>
<td>Description</td>
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<tr>
<td>Negative</td>
<td>Social burden of special ed. label</td>
<td>Fought against it</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Few work preparation activities</td>
<td>Little help in career development</td>
<td></td>
</tr>
<tr>
<td>Peers</td>
<td>Positive</td>
<td>Arthritis Foundation summer camp</td>
<td>Fun with similarly disabled peers</td>
</tr>
<tr>
<td></td>
<td>Arthritis Foundation workers</td>
<td>Working role models</td>
<td></td>
</tr>
<tr>
<td>Negative</td>
<td>Arthritis Foundation workers</td>
<td>Repulsed by images of workers</td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td>Negative</td>
<td>Doctor crushing career dreams</td>
<td>Pushed it away</td>
</tr>
</tbody>
</table>
I don’t want to just work. I mean… I enjoy [my job] but it’s not benefiting anyone. It’s actually hurting. You know, people don’t need to be spending $50 on a bottle of fragrance. That’s a waste of money…. I don’t like money. I don’t like corporate America…. I want to make a change, and I think that I’m best suited to do that physically… in education.

In regards to Alice’s general feelings about work and people with disabilities, she said, “Oh, they should [work]!... Because to be a productive member… of society… to have some self worth… you need to have something in this life… something that makes you happy…. I mean, find something that you can do and you can be good at and [then] go with it.” And for those PWD that felt they could not work, Alice’s views were that “there’s a lot of people that don’t feel socially accepted or comfortable in certain settings,” but she also felt that “that they should try…. I don’t like that when people don’t work and use their disability as an excuse…. I just don’t like that.” She found that people using physical complaints as a way to get out of work “everywhere” and chose not to associate with them: “I don’t want to be around it. I just don’t. I don’t care for that.”

Job-specific WSE Cognitions. Alice’s job at the time of the interviews was working at the fragrance counter for a major retail store. While she “really enjoy[ed]” this job, it was not “something [she] want[ed] to do as a career.” As for her WSE perceptions, “I’m a good worker,” said Alice. “I do my job, and I do it well…. I work hard.” When asked to compare herself to other workers, Alice said, “I think that I’m better, definitely a better worker [than some]. [Some coworkers] take a lot of breaks, and they just aren’t motivated…. [But] I’m dedicated.” One of the contributors to this sense of WSE was her
product knowledge: “I feel like I really know what I’m selling…. I’ve really gotten a grasp over it.” But the most important contributor was the sense of performing a service while satisfying customers. Alice describes this:

I just feel when somebody walks away and they’re happy, you know, it’s just, you meet people and even if it’s just a little conversation, sometimes that can make you just really feel good, or like make them feel good…. There’s just a lot to it. Alice didn’t always feel this way about working with the public. When she first started working her self-confidence was “Maybe a three or a four.” Over time, however, especially recently, this has improved. She explains:

I definitely didn’t have any confidence when I started. I mean, from a year ago I’ve gained a lot of confidence. I didn’t like people looking at me. I was really worried that they would see my hands, and, I don’t know, I just thought that they would think less of me or something.

Whereas her self-confidence has increased, Alice still only rates it as “probably a seven.” Alice explains how what she feels her arthritis is holding her back:

I just don’t like having people notice it, and… I think that people do. I don’t even know if that makes a difference, but in my eyes it does, because I don’t want to be any different…. I don’t think it’s negative, like they just don’t like me, or something, but I have this idea in my head that it’s gonna make me lesser… or someone will feel sorry for me… which I don’t want. I just don’t want that attention, and… it’s just hard sometimes.
**WSE-contributing behaviors.** Alice worked between 15 and 25 hours per week, depending on the time of year and school demands. During the week she would attend school in the morning, do homework or take a break in the afternoons, and then work in the evenings, with more work hours on the weekends. Alice maintained this schedule with minimal difficulty, with only rarely having a problem “during a flare, finals or mid-terms.” Generally, however, she was “there all the time” and felt quite capable of working a full-time schedule, but preferred part-time due to having school as a priority and all the extra demands more work hours would put on her: “I [don’t] want to push it.”

One of the most important behaviors supporting Alice’s WSE beliefs is the successful achievement of her sales targets. Related to this are Alice’s communication skills: “

I like dealing with people…. And a reflection of that [is] my sales have been really good over the last six months, because if you can talk to someone and find out what they’re looking for and just be a person, then you can get what they need.”

Additionally, Alice’s knowledge of the Spanish language has “helped a lot,” especially as the store has a frequent and large Hispanic clientele.

The only difficulties Alice mentioned about working at her job were standing for hours at a time (which the store accommodated by allowing her to sit whenever possible), unpacking boxes (which presented minimal problems), and opening display cases. This was the most difficult because her “hands just don’t have the strength to get those [keys] to work all the time.” When faced with difficulty at work, Alice “will try everything
possible before asking a coworker for help” because she did “not want to keep the
customer waiting.”

WSE socioenvironmental supports. Alice received considerable social support for
her working. As mentioned earlier, all her family works, including her sister who works
as a retail manager for another store. Alice reported having “met a lot of friends through
work” and that “everybody works” in her current group of friends, and when they get
together they often talk about work. At work, Alice “absolutely adore[s]” her coworkers
and describes some of them as “amazing people.” Her supervisor at work, whom Alice
greatly respects and describes as a “wonderful woman,” praises Alice’s work
performance while expecting top performance from her.

The only negative social influences on Alice’s working were her overprotective
parents and negative coworkers, both of whom were discussed earlier. She also
mentioned the occasional complaining talk about work that occurs among friends, but she
did not deem this as excessive.

Bill’s Case Summary

Bill was a 28-year old Hispanic male with cerebral palsy (CP), first diagnosed
shortly after birth. His three interviews took place between 7/29 and 8/5/06. He chose to
do all three interviews in the researcher’s apartment, not his, as he lived at home with his
parents and preferred the privacy of another residence. At the time of the interview Bill
was engaged to be married and actively looking for an apartment for himself and his
fiancé to move into. The three interviews totaled 169 minutes and resulted in 53 pages of
1.5 spaced verbatim transcripts. As a result of his CP, Bill has dysarthric speech that
considerably slowed his rate of speaking. The result of this was less overall transcription pages than the other participants. Also, despite three requests, Bill never completed the WSE questionnaire, thus also restricting the amount of data for analysis. Whereas Bill may not have supplied as much data for analysis as the other two participants, the data he did provide yields sufficiently rich detail that the decision was made to proceed with only the one data source. Bill approved this case summary with no changes.

*Bill’s Disability Views*

Bill describes his CP as “spastic quadriplegia… that doesn’t affect me cognitively at all. However, physically, it is kind of difficult for me to manage some stuff…. [It] unfortunately affects my motor skills and long distance vision, so I am unable to drive and physically lift” and that “people have always [had to] help me physically.”

Bill’s earliest views on his CP were characterized by an almost complete lack of awareness:

“As a child when I was younger I didn’t recognize that I was that disabled. I knew that something was different about me, but I wasn’t sure about how different…. Why didn’t I know that? The truth is I don’t know…. [It] took parents, teachers, friends and family members, to bring me back to reality [regarding my limitations]. Whoa, wait a minute, hold it a while there, little Billy.”

Bill described this realization as “like a slap in the face” that occurred when he was approximately seven. When he was approximately 12 he made another important discovery about the disabilities of others: “For the longest time I didn’t know that Ray Charles was even blind…. Just like Stevie Wonder. I didn’t know he was blind [either].”
Bill’s father had to tell him about their blindness, as he thought they just wore sunglasses. There was also a female character with CP on the TV show *Facts of Life*, but Bill thought this person “was playing a person with cerebral palsy.” When he learned that she actually had the same disability as he did, he was once again surprised: “I’m, like, cool! I was amazed. I was very shocked.”

The crucial developmental period for Bill in regard to his disability awareness appears to be between the ages of approximately seven to 12, as noted above. During that time that he participated in a theater group for people with disabilities that traveled to “Washington DC, Seattle, Mexico, Japan, Germany, Australia, Hong Kong, the Czech Republic, just to name a few.” When he joined the group, Bill described himself as “quiet,” “babyish,” and “spoiled,” and he was very resistant. But the travel required placed great demands on him physically, emotionally, and mentally, while also exposing him to tremendously enriching life experiences. “It taught me how to grow up,” said Bill, and it also gave him an “excellent sense of accomplishment.” More details of this important stage in his life will be presented below.

With his growing maturity and depth of confidence, Bill began to push toward normalcy and against anyone that wanted to treat him as a “poster child” or “charity case,” because he saw the negative result; “I didn’t want to become another drooling kid with cerebral palsy who was put into a day program just because of [my CP],” as he had seen happen to others like him. Duly motivated, he eventually graduated high school and attended a community college where he earned two AA degrees. At the time of the interviews he was working two part-time jobs (one paid and the other volunteer) that
were the direct result of all his education and life experiences. His attitude regarding his CP at the time of the interview was in broad life terms. “It’s a part of me… it’s a characteristic…. I don’t want to look at it as an affliction,” he said. “Yes, I’m in a chair every day, so it’s always going to be a huge, tremendous factor. But does it negate who I am? And the answer to that is no” he said. “I’m comfortable with who I am.”

*Bill’s Development of Work Goals*

Bill started thinking of work as a young child. “When I was really young I always wanted to be a law enforcement officer.” This goal was supported by positive experiences.

“I guess what sparked the interest was a program called hallway patrol at elementary school…. I would guard the door as people came in or just yell, and I caught people running down the hall by running after them [in my wheelchair] and when I caught them walk them to the office.”

The goal of being a law enforcement officer lasted until he was eight or nine, the time he realized the limitations related to his CP. “So, when I realized I couldn’t be a cop that made me define my niche [in something that] would allow me to use my brain.”

Bill’s first goal after policeman was in another strong interest area, writing.

“When I was little I used to just sit down at my typewriter and write short stories, short fictional stories…. I have this book at home of all my fictional stories that I used to write as a kid, and, so my first real goal was to get a degree in writing, but I realized that there’s really no money in writing.”
The goal of being a writer lasted until he was “about 16 or 17.” It was also at about this time, 1997, that Bill began taking college courses though a local community college while still enrolled in high school. Once fully enrolled in college, he changed his major six times. He “went from mining to computer science, to court reporting, to an English major, to French studies, and then finally into social services.” The major in social services was declared in 2000, and his AA degree was completed in 2002 with a specialty in youth services. Unable to find work, Bill returned to community college in 2004 for a second AA degree in office administrative professions. This degree was completed in 2005. Since that time he also obtained Microsoft certification as an office specialist.

Bill is now out of college and working at a variety of positions utilizing both of his degrees as well as his demonstrated interest in both theater and law enforcement. These jobs will be explained in the Developmental Work Experiences section. His current job goals are to continue building his career in these areas.

RQs 1 & 2: What were Bill’s WSE Developmental Experiences?, and How Did These Experiences Contribute to Later Work Self-efficacy Beliefs?

The following section contains all of Bill’s reported WSE developmental experiences relating to work, family, school, and peers. Each set of experiences is divided into positive and negative aspects. All of Bill’s WSE developmental experiences and contributions are summarized in Table 4 at the end of the section.

Positive work-related experiences. Bill’s positive work-related experiences include doing chores as a child, helping out with his father on the job, and participating in
his college internship program. Each of these experiences and its influence on Bill will now be explored.

Bill began doing chores when he was eight years old. This coincided with him getting his first power chair. His father had a creative way to utilize the new power chair as a vehicle for being able to do chores. Bill explains:

[My dad would] tie a rake to the back of my chair, and I used to go around our lawn and rake up all the grass and dead leaves. So there I was in my rope power chair with the rake tied to the back. And when I was done with our lawn, then I started to do the neighbors yard.

Bill also mopped the floor the same way, explaining how his parents “would put the mop under my left armpit and I’d go back and forth.” Bill said that these experiences ‘instilled’ in him the expectation that he would be working as an adult and served as the beginning of his work ethic.

Besides chores at home, Bill also was included as part of his father’s work as a maintenance technician for the city where the family lived. Bill describes these enjoyable and valuable experiences:

My dad would take me on little maintenance jobs and sit me on the side, and so I would be with him working on the weekends. My brother and I would go with him, and he would get me out of the truck and put me in my chair, and I would hold his tools for him. Meanwhile, I’d say, “Dad, don’t forget you need to fix this” or if he was painting I’d say, “Oops, dad, you missed a spot.” So I would always be in front or anywhere around him, supervising.
Once Bill became involved with the theater group, his various travels provided him with opportunities for enrichment and helped him mature. Bill explains:

Before I started my stage work I was very soft spoken, I guess you could say. I was a, umm, sheltered. I didn’t know very much about the outside world and the community as a whole…. [The theater] taught me how to interact with various kinds of people. And it taught me how to deal with different communication styles, and it taught me how to deal with different forms of opinion, because not everyone is going to agree with you. It taught me that being in the public eye wasn’t scary at all…. As I started working on different stage productions, I thought to myself, wow, you can do this. You can learn and remember and contribute to your fellow actors, and then of course, your finished product, There would always be a crowd, your standing ovations, and the congratulations that I, that we all received after the show.

Bill’s theater work eventually led to summer jobs working for them as a wheelchair dance instructor. These summer jobs lasted from 1997 until 2000, at which time he focused all his energy on school. Bill had returned to work for this company on a paid part-time basis at the time of the interviews.

Bill’s social service AA degree program required him to complete an internship consisting of 225 hours of field experience. He did this at a local program called Court Appointed Special Advocates (CASA), where he volunteers “with children who have been in the foster care system due to abuse and neglect.” This volunteer work satisfied his longstanding interest in law enforcement by allowing him maximum use of his cognitive
strengths without any excessive physical requirements. The result was that he felt he found a niche for himself. When he graduated with his AA degree, Bill said, “They liked my performance during field experience, so they kept me on.” At the time of the interview Bill was still performing this volunteer position, which will be discussed in greater detail below.

**Negative work-related experiences.** Bill was able to turn the only reported negative work-related experience during his childhood into a positive experience. As mentioned above, Bill joined a local theater group for people with disabilities at the age of seven. He then toured the world with this group “from 1987 all the way up to 2000.” All the travel and performance demands were understandably very stressful. This built up to one particular event that Bill describes as a turning point for him:

[In] 1990, President George Bush, Sr. had just taken office, and we were asked to speak at one of his public addresses. It was the day before we were supposed to [perform], Monica [the theater director] and I were sharing a room so she could keep an eye on me, and I started crying, you know, it was late at night. And she said, you know what, you can either shape up and stop crying right now, or ship out. If you’re going to keep this up, I don’t want you in this company. Boy, that hit me like a ton of bricks. From that moment on I didn’t cry. I kept doing what I was asked, and it got easier.

**Positive family experiences.** Bill’s positive family experiences were that both parents worked, both were also very encouraging to him regarding his abilities while balancing this with realism regarding his disability, and both also challenged him. Bill’s
relationship with his brother was also uniquely supportive. Each of these experiences and its influence on Bill will now be explained.

Bill’s parents were a great influence on him. Bill’s primary motivator was his father; he was Bill’s “biggest [and] number one influence.” Bill’s father worked as a maintenance technician for the city, a position he held for over 30 years. Bill can trace his interest in law enforcement and social services to one day when his father said to him, “Bill, you’ve always had this knack for walking the straight and narrow.” Bill’s mother worked for one company for 10 years and then got a better job with another company where she worked for another five years before getting injured and being unable to continue. At the time of the interview she was in school to get her GED in order to help her get another job. Bill described the family atmosphere as “100%” about work.

Bill described his parents as the type to tell him “never to give up on anything.” They were mostly positive in the messages they gave him regarding his abilities, what he could do, but they also tried to be realistic with him as to his limitations.

[They] would always talk about what I couldn’t do, but they would always add, “but” or “how I… have the cognitive ability to do this and this and this”…. So even though they would point out… that I couldn’t do something physically, they would always counter that with something positive, so it wasn’t constantly negative.

Bill’s parents also pushed him to try new experiences, such as joining the theater group, as described below. While the theater experiences provided enrichment in Bill’s
life, these experiences were also very stressful. Bill describes how his parents helped shape his reaction to that stress:

Honestly, I very well could have shut myself off, been angry, I could very well have turned that stuff into a negative aspect of my life, but it’s due to my upbringing that being angry doesn’t solve anything. My dad and mom always said, you can be angry or do something about it. So I decided to channel that frustration into going to school, going to school meaning college…. and then transferring that into a career which ultimately became social services.

Bill’s brother is five years older and also contributed by treating Bill as normal with typical brotherly “torture” such as wrapping him in a towel and hanging him from a hook for 20 minutes because he was crying too much or tipping over his wheelchair as a means of entertainment on boring afternoons after school. Bill describes these experiences as a form of “tough love” that taught him self-reliance. “I basically figured out that if I wanted anything done I would have to do it myself,” he said, and it forced him to learn how to “fend for [him]self.”

**Negative family experiences.** The only negative family experience discussed by Bill was the time his mother took him for the first time to join the theater group. As with the negative work-related story above, Bill also turned this experience into a positive one. Bill tells the story:

The first day I joined Third Street Theater, I remember was on a Tuesday, after school she says, my mom says, “I’m going to take you to a place that you may or may not like.” And, you know, here’s little Billy saying I don’t want to go. She
was, “Go on, you don’t even know what it’s going to be like,” and so I fought with my mom, tooth and nail, not to go, because at the time I was quiet, I was babyish, you know…. I started crying, of course my mom kept driving, driving, and driving. When we got to where we were going to go… my mom pushed me in, crying, practically kicking and screaming, and it took 20 minutes to half an hour to calm me down. And Monica [the theater director] says to my mom, “Just leave him, we’ll handle it.” And I grabbed a hold of my mom’s hand and said, don’t leave me. And sure enough, she left me. But now looking back, it was the best thing she could have done for me. That was a way of letting me experience [the theater group].

*Positive school experiences.* Bill’s positive school experiences included performing well academically, getting support from teachers, tutoring other students, and being a hall monitor. Each of these experiences and how it influenced Bill will now be explored.

School became very important to Bill after he realized he could not be a policeman, and the importance of school increased as he progressed from grade school to junior high school.

[I]n elementary school I didn’t realize [school] could lead to a good job in my future, I always knew that school was important, but I never really took it seriously until my second year in junior high. That’s when I knew I had to take my academic career seriously, and if I took my academic career seriously then I could achieve [success].
In school, Bill described receiving “reality checks” balanced with support from his teachers similar to what he got at home.

They would tell me if you don’t do your homework you’re going to get a bad mark… which will lead to a negative transcript. And I knew that if I had negative transcripts I wouldn’t be going to college. [But] they’ve always given [sic] me the emotional support I needed to succeed,

This led to one of the most important experiences for Bill in school, and that was his excellent academic performance. He “made the honor roll four to five times in junior high and elementary school” and “always scored quite well academically.” He reported a 3.5 grade point average in high school.

Another important experience in school for Bill that was related to his academic performance was helping others. He “would always be the one to help [other students] with their homework.” This included him serving as a “tutor [of] ESL students to show them how to read and write English.” This gave Bill “a sense of accomplishment.”

Bill’s first experience with law enforcement-related activities also happened in school when he served as a hall monitor. He “would guard the door as people came in” or catch “people running down the hall by running after them [in his power wheelchair], and when I caught them walk them to the office.”

**Negative school experiences.** The only negative school experience Bill described was during his senior year in high school when the support from others “just stopped” due to clique behavior. Bill explains:
I then discovered that people aren’t always going to be there for me, so I thought, well, why should I be there for other people, because people do their own things in high school. A lot of people don’t get their needs taken care of. You see, I always cared about me, how I did. If people liked me for who I was, that’s good. If they didn’t, oh well.

This was the only time during all the interviews when Bill admitted having “emotional ups and downs” and having experienced his “share of shit.” His response to it was to just move on to college and other new experiences.

**Positive peer experiences.** The only positive peer experience reported by Bill was socializing with peers. Bill reported having many different types of friends while growing up. These friends included “jocks,” “nerds,” “crack addicts,” as well as people with CP and other disabilities. In addition, in exchange for his tutoring services, others would help him with whatever he needed. Bill explained that, “If I needed help physically or if there was a group project I always had people around.” Bill said that the result of all this was that he “always had friends that would give me positive feedback.”

**Negative peer experiences.** The only negative experience with peers discussed by Bill was that he could recall seeing very few people in wheelchairs or with CP working when he was a child, and the few he did see lacked the support that he had and were doing “some minimum wage job [such as] counting things or picking up boxes.” He thought such menial work was “hurtful” to their self-esteem and felt that “they had the cognitive abilities to do more.” As a result, Bill was often a provider of emotional support to those with less of this than himself.
### Table 4

**WSE Experiences and Contributions Summary – Bill**

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<tr>
<th>Developmental Experiences</th>
<th>Potential to Promote/Inhibit WSE</th>
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<td>Work</td>
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<td>College internship</td>
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<td></td>
<td>“Work” with dad</td>
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<td>Parental encouragement/realism</td>
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<td>Brother’s tough love</td>
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<td></td>
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<td>Academic</td>
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<td>Negative</td>
<td>Lack of peer social support</td>
<td>Move on to college</td>
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[W]hat I’ve noticed throughout the years is my friends who have disabilities didn’t seem to have the support that I had, so I was always a mentor to them, and a friend. I was always a friend first, and then if they needed I gave emotional support. I would always share my experiences, I would sit down with them, talk with them, I would go bowling with them, I would invite them over for dinner at my mom’s and dad’s house, I would go over to their house. I always had this emotional connection with people.

**RQ3: What were Bill’s Current WSE Beliefs?**

*Global work cognitions.* Bill’s attitude towards work was related more to how he could benefit his community than how work could benefit himself. “I don’t want to be identified as a person that works,” said Bill. He preferred to be identified as “a contributing member of community… emotionally, physically, and cognitively.” Working did give Bill a sense of “positive accomplishment,” but he consistently cited “giving back to the community” before “providing for myself and my future.”

Bill did admit that “a paycheck is nice to get,” but he quickly added that “it’s not the same thing as external gratitude that people show you.” He then went on to describe this gratitude:

[Having] a three year old come up to you and say “Help me, please” or “Bill, I love you” or “Bill, can you help me?” or “What do you think about this picture of a cat?” or if they hug me or ask my opinion about a picture or artwork, that means more to me than anything…. because that’s something that the kids are going to remember.
Compared to the above experiences, Bill considered a paycheck as “just icing on the cake.”

*Job-specific WSE cognitions.* As has been discussed, Bill held two part-time positions at the time of the interviews: a volunteer position with CASA and a paid position with a local theater group. His WSE in his effectiveness in the theater group job is directly related to the intrinsic and extrinsic benefits he received from his work there, as discussed above. Other factors contributing to his feelings of WSE at the theater group were his long history with them both as a performer and paid instructor, also previously discussed.

Unlike the theater job coming to fruition as a result of a long-standing developmental process, Bill’s going to work in the CASA job was different. It came about after a field placement course he took in his college program required him to participate. He admits that doing such work “was a hit or miss shot in the dark kind of a thing” and that he had little idea how the legal system even operated. As a result, when he started he “didn’t feel very confident,” but the positive feedback he got from the CASA staff led to them keeping him on as a volunteer and has since been a strong contributor to his WSE in this position. Specific feedback he gets that contributed to his WSE included “talks that I got from judges, lawyers, and CPS workers…. It’s just the simple thank you, good job, you know, or I like what you’re doing, you CASAs are really important to these kids’ lives.” As a result of all this encouragement, Bill now feels quite confident he is “doing good at what I do.”
**WSE-contributing behaviors.** A typical day for Bill involves doing his CASA job in the mornings. Specific duties include report writing or taking phone calls at home or attending legal meetings and trials at the courthouse. Bill then goes to work at the theater arts center in the afternoon and remains there for the remainder of the day, getting home sometime in the early evening. The two jobs combine to create the equivalent of full time work in terms of hours or approximately 40 per week.

Bill feels “very effective” in the CASA job because of how he has “successfully placed many [children] in foster homes” over the past five years. These successful outcomes are the most important factor in his feeling effective in this job. Other behaviors associated with the process of doing this job that make Bill feel effective are his being bilingual in both English and Spanish, his ability “to navigate outcomes in computer software,” and his “knowledge of different cultures and different ideas.”

Behaviors associated with being effective in his job with the theater arts center include his “humor” and his “ability to express… both negative and positive feelings” effectively; however, Bill felt his most important behavioral skill was his “capacity to love and to give.”

**WSE socioenvironmental supports.** Bill received most of his support from working from his fiancé and his father. He received more concern about work than support from his mother, and he received very little support for work from his disabled peers. In addition, Bill also is the recipient of skepticism from people he does not know that are not disabled. Each of these will now be discussed.
The type of support Bill receives depends on the person offering the support. For example, Bill’s fiancé supports him emotionally, and he is supremely grateful towards her for this intimacy. “She always knows when I need to cry, she’s always there when I need to vent,” said Bill. Whereas Bill’s father offers support in the traditional form of encouragement with messages such as “I’m proud of you, keep going.” It was these two forms of encouragement in combination that Bill found so helpful.

Bill’s mother, however, is considered by him to be “way overprotective.” Bill described the overall message he got from her as being filled with fear that he felt was “within herself” that she then “puts on” him through saying things such as “Oh my god, don’t get hurt.” The result of this has been many fights between Bill and his mother, but over time Bill says she has “learned to accept, accept the fact that I am capable and productive.”

The people that most often discouraged Bill were his friends that had disabilities and were not working. They question why he is working and doing so much and ask him to be with them instead of working. Bill’s response to them is to say, “Well, I can’t do that, that’s not who I am. But I will come… see you on the weekends.” Others that discourage Bill include people that are skeptical of his abilities because of his disability. The messages he hears from them are things such as “How can you? How can you?” or “Are you sure that you’re going to be able to do da da da da da.” These requests to do things other than work and skepticism over being able to work Bill reported as having been delivered to him all through his school years and on into adulthood. The constant hearing
of such messages does trouble Bill and he has to actively struggle against giving in to such ideas, as he explains:

[I]t doesn’t matter what other people think. It’s what I know, in my mind. But definitely… it does play a factor… because if they’re professional… well, maybe they’re right, maybe not. So I do consider the fact that there are skeptics out there, but I don’t really let them control who I am.

**Carl’s Case Summary**

Carl was a 44-year old Caucasian male with cerebral palsy as a result of a difficult birth. His three interviews took place between 3/30/07 and 8/9/07. Between interviews two and three Carl changed jobs, moving from a part-time job with a private employer to a full-time position with the state. This job change required a major change in his city of residence, a move of approximately 270 miles. Interviews one and three took place at his different residences, and interview number two took place at my university office. The three interviews totaled 294 minutes and 94 pages of 1.5 spaced transcripts. Despite three requests, Carl did not complete the WSE questionnaire. However, because of the quantity and quality of the material he provided in the interviews the decision was made to proceed with only the one data source. Carl approved this case summary with only one minor correction.

**Carl’s Disability Views**

Carl’s CP primarily affects his legs but he is able to ambulate for short distances using two canes, otherwise he uses an electric wheelchair. He admits that he could be more accepting of his limitations but says he realizes “there are times when I need help.”
His fear, however, is that this could result in losing control of his life and becoming dependent on someone, saying, “If I allowed myself to be dependent on someone else that would be hurting myself more than helping anything.” Carl’s strong need for independence can best be understood by a review of his life.

Shortly after Carl was born his mother was told to “put [him] in an institution and let the state take care of [him],” which she resisted; however, he later did spend two of his preschool years at a research hospital for children with developmental disabilities. Carl explained that “at that hospital we were taught basic life skills, how to dress ourselves, how to feed ourselves, how to bathe ourselves, anything that accompanies taking care of yourself.” This training was only Monday through Friday, so he spent weekends at home with his family. When it was pointed out by the interviewer that this weekly pattern resembled a job, it led Carl to comment, “My job at a young age was to cope with my disability.”

As a child, Carl admitted to feeling like a burden to his family. The reasons for this were primarily related to inaccessibility. Carl describes what would sometimes happen:

I remember… the whole family would go out, but I would stay home…. They would usually hire a baby sitter for me, and I used to cry and cry and say, “Why can’t I go? Why can’t I go? My brother and sister can go, why can’t I go?” And she would say, “Honey, I don’t know if we can get you in there. I don’t know. This is something new we’re trying. I don’t know if we can get you in there. What we’ll have to do is you let us go and we’ll find out if we can get you in there, and
if we can get you in there we’ll take you next time.” Well, consequently, it always seemed like there was never a next time.

On other occasions, the family would not go out at all because of Carl. He would then hear “bits and pieces of arguments and discussions” about it. This made him “feel kind of bad sometimes.”

Carl attended public schools with non-disabled children where he had “quite a bit” of experience being laughed at and made fun of because of his disability. When Carl was approximately nine years old, he began to attend a special school for people with disabilities. It was during his two years there that Carl began to realize something that would deeply affect him.

I realized then and there that whether you have a disability or you don’t have a disability, you have the same dreams, hopes, and desires as everybody else.... You still talk about the same things, your hobbies are the same, your dreams are the same. I mean, it doesn’t matter whether your legs don’t work, you’re still a person. And that my exposure to it, and a lot of it was good, because I began to realize that, hey, I am normal, you know… and these people are just like I am. They’re not going to make fun of me, they’re not going to laugh at me, because they are just like me.

After graduating high school and earning an AAS degree in Business, Carl’s family incurred serious financial difficulty and the decision was made that he would not work so that he could contribute his monthly disability income to the family. “There were times that because of my disability check, that meant we could eat,” said Carl. But he was
“really down” on himself for accepting that money because he “didn’t earn it.” Carl’s staying at home and not working lasted for eight years despite the fact that his family’s financial situation had significantly improved over that time. The staying home resulted in his developing a case of major depression, which only began to lessen when his mother realized the seriousness of his condition and took him to the doctor. Also, about that time, Carl joined a bowling league for people with disabilities. At the bowling league, Carl met the woman (“love of my life”) he would eventually become engaged to marry. Through her influence he left home at the age of 32 and returned to college, eventually getting a BA and MA degree in Rehabilitation Counseling, which then led to the job he held at the time of our interviews.

Currently, Carl talks about his disability in broad social terms. He feels a deep connection to other people with disabilities. He considers himself as “one of the underdogs” and that it is his “duty to speak up for everybody else who can’t or won’t speak for themselves.” He feels “passionate about disability and life issues… about fighting for your rights… [and] about overcoming society’s stereotypes about people with special needs.” As for how he feels personally about his disability and all the challenges it has presented to him; Carl said:

I think my disability has helped define who I am and define what I stand for, and I think it’s given me a… I was going to say give me inner peace, but I don’t think it gives me inner peace, because there are some things I am not peaceful about. But it’s given me an inner strength to keep me going…. I realize I have limitations because I have a disability, and that I have to learn to live within certain
parameters of that disability, but within those parameters I am not afraid to take risks [in life].”

This section will conclude with an example of the risks Carl is willing to take. Carl chose to move into an apartment that had stairs in the entryway even though there were other apartments available that were accessible. Carl tells the story of how he handled this situation:

Management’s attitude was we have special places where people with disabilities can live…. And I said, “Yeah, and what if I don’t want to live there for whatever reason?” And they said, “Why wouldn’t you want to live there? They are really nice places.” And I said, “That doesn’t matter. What if I don’t want to live there?” And they said, “Well, we don’t have to put in a ramp.” So [after six months of not getting the ramp built so that I could get into my apartment] I called [an advocacy group]. And they sent a lawyer out here to talk to me, and just as he showed up I was coming home from work. He said, “How are you going to get in the house?” And I said, “Watch this.” And I had to get down on the ground and crawl up the steps, and keep in mind I’m in a suit, and he looked at me and said, “Oh, this is bullshit. I’ll be right back.” He came back with a camera and said, “Crawl up them steps again,” and I said, “OK, I will.” So he took pictures. Do you know that within 48 hours after he sent in those pictures to the management, that ramp was not only poured, but it was dry and ready for me to use (laughs).
Carl’s Development of Work Goals

Carl grew up with no expectation of working as an adult. He traces this back to his parents, saying, “because of their lack of expectations, I guess I developed a lack of expectations.” Carl said his parents “didn’t see me going very far beyond 12th grade….and then I think my mom’s philosophy was that the family will take care of you.” Carl did have vocational goals while growing up, but the message he received from his parents was “We don’t know if you can do this, we don’t know if you should get your hopes up, we don’t know if you’re liable to get hurt,” and so he reported not expecting to ever meet any of his work goals.

The first vocational goal for Carl was to be a radio disc jockey. “There was always music playing in my house, and I’ve always liked it,” said Carl. This goal started when he was about 11 years old and lasted until he was around 16, when he was talked out of it. “I was kind of led to believe from family that [it] wouldn’t be a realistic goal,” he explained. “Although I’m not sure I kinda believed them, I just took their word for it.”

As Carl’s goal of being a disc jockey was beginning to fade, a new goal of being an accountant began to emerge. After graduating high school, he immediately entered community college. In two years he had earned his AAS in Business Administration and Accounting and set out to work in the accounting field. Carl explained what happened next.

I did it for about a year, and I realized that it was real stressful and real demanding, and it was really taking a toll on my health…. I started having heart
problems and blood pressure problems…. My hair went thin, you know, and I thought I gotta get out of this.

After Carl had to quit accounting work, his family had its problems and he endured his eight years at home. When that was over, he moved out of town with his new girlfriend and went back to college to major in Rehabilitation Services. Carl chose this major after meeting with a professor who explained all the things it entailed. Carl considered rehabilitation a “practical” choice given his past history. After earning his BA degree, this same professor encouraged him to return to school for his MA, thus setting Carl on the course of his next vocational goal: Vocational Evaluator.

At the time of the first two interviews, Carl was working part-time as a Vocational Evaluator’s Assistant. Carl explained his work situation this way:

I’m only working 20 hours a week is because my boss can’t afford to pay me any more. I’m making $10 an hour, and my boss just can’t afford it. He said the day he interviewed me, “I know you’re worth more, your education and experience and all that is worth a whole lot more that I can pay you.”

Carl knew he was underemployed, and he also needed more money for him and his fiancé to live on, so he began searching for other jobs he was qualified for. After much searching, and rejection, he eventually found a job with the state as a Disability Examiner/Specialist for the department of Disability Determination Services. This is a full time, well-paid position, and, at the time of the third interview, he was quite satisfied with it.
RQs 1&2: *What were Carl’s WSE Developmental Experiences?, and How Did These Experiences Contribute to Later Work Self-efficacy Beliefs?*

The following section contains all of Carl’s reported WSE developmental experiences relating to work, family, school, and peers. Each set of experiences is divided into positive and negative aspects. All of Carl’s WSE developmental experiences and contributions are summarized in table 5 at the end of the section.

*Positive work-related experiences.* Carl’s positive work-related experiences included doing various chores at home, having a volunteer job, getting his first professional job that was part-time, and then getting his second professional job that was full-time. Each of these experiences and its influence on Carl will now be explored.

Carl’s first household chore was doing the dishes, and this started when he was about 10 years old. Specifically, Carl said he “would make sure all the plates got rinsed off before they got put in the dishwasher.” In his early teens, Carl also took on the chores of “mak[ing] sure the bathrooms were clean” and “be[ing] in charge of vacuuming, sometimes.” Once in his middle teens his chore was to wash and detail the family’s four cars. “It would take me all day to wash one car,” said Carl, “[so] I would cycle them and wash one car every two weeks.”

Payment for chores began when Carl was in his early teens, and “it had a big impact.” Carl said, “When you’re 13 and you got ten dollars you think you got the world. So I was, like, what’s it gonna be like when I have a job and multiply this, you know. I just began to realize the work ethic has a big payoff.” Doing chores was about more than just getting paid, however; it also earned him praise from his parents for a job well done.
This helped give him a “sense of accomplishment” and the feeling that he was “making a contribution to the family as a whole,” even if the chores were sometimes a “pain in the butt.”

The theme of feeling good about making a contribution would return in Carl’s first work of any kind outside the home, as well as other positions in the future, but something else about working also became important. Carl’s first outside job was a volunteer position with the local YWCA. “And it felt good,” said Carl, “because I had a title. I was Program Assistant or Program Coordinator, and it felt good to make a contribution.”

Carl’s first professional job after earning his MA degree was as a Vocational Evaluator. He was very “grateful” for this position, as he said to his boss, “Look, you’re the first person to let me in the door.” Beyond his appreciation, however, he also felt rewarded, saying during the second interview, “I’m beginning to realize that all my hard work is paying off.” By the time of the third interview, Carl had moved on to a better full-time job as a Disability Examiner for the state. Carl described his experience at this new job as making him feel “more respected and valued.” He also said, “It allows me to provide for myself in a way that I’ve never been able to…. more money.”

Negative work-related experiences. Negative experiences for Carl included health problems related to his working as a bookkeeper and tax preparer, being discouraged from working by his internship supervisor, and possible hiring discrimination while trying to find a full-time job. Each of these will now be explored in detail.
As noted above, Carl’s first job was as a Bookkeeper and Tax Preparer, but he found this job to be “real stressful and real demanding. As a result, his health started to decline. “I started having heart problems and blood pressure problems,” said Carl. He even started to lose his hair, and so he said to himself, “I gotta get out of this,” and quit.

Carl’s next work-related activity, years later, was his internship at a local office of the state rehabilitation services agency. According to Carl, his on-site supervisor told him almost every day, “I don’t think you can do this job…. You will not be able to do this job, and I don’t know why they sent you.” Carl reported this to his university supervisor, who then advocated for him in order to preserve the internship. Carl was eventually able to complete his internship but did not get hired by the state agency, unlike almost all other interns.

Discouragement and skepticism of his ability to work has been a regular occurrence for Carl, he reports. Here he describes a recent experience while interviewing for a different state job where he once again felt negatively stereotyped by his disability:

One of the things the [interviewer] said to me was, “I’m worried about… your level of stress. This is a very stressful job, and you’re going to be carrying a caseload.” Maybe she had a legitimate concern… but I just felt like she was trying to find a [politically correct] way to say, “Because of your disability I don’t think you’ll be able to do this job.”

Positive family experiences. Carl’s positive family experiences were that his stepfather and mother were accountants that worked out of the home and that they encouraged him to overcome any difficulties he faced. For the latter, however,
consistency between family members varied. Each of these experiences will now be explored.

“Most of the practical things that I needed to help me function in life I learned at home,” said Carl. To start with, Bill’s stepfather was a Certified Public Accountant, and with Carl’s mother the two of them ran an accounting business out of their home. “That’s [how] I kind of latched onto [the] idea [of becoming an accountant],” said Carl. When Carl’s vocational goal became to become an accountant, it was supported by his parents. Carl said their reasons for support the accountant goal were that “it was more practical, and they thought it was actually something where people would look beyond my disability, and that I might be able to make a good living at it.” His parents also “strongly encouraged” him to take accounting and other career-oriented classes at school.

Carl described his parents’ approach to him, a child with a disability, was to treat him as if he were “very normal” in regards to performance expectations of doing chores. Carl said, “The same expectations they had for [my brother and sister] they had for me.” These expectations were high. Carl explains:

There was times in my life when I wanted to be lazy, there was times in my life when I wanted to just quit, and there was times in my life when I wanted to just say to heck with it. But my mom, and my family in general, would come to me and say, “Look, we’re not going to let you use your disability as an excuse. We’re not going to let you hide behind your disability. You’re letting your disability make you lazy, and we’re not going to allow that.”
The result of the family attitude was a strong work ethic, for which he mostly credits his mother. “My mom had the philosophy of do what you can for yourself,” said Carl, “but don’t use your disability as an excuse, but the things you can’t control, don’t worry about them. Whereas my philosophy was the things I couldn’t control, that made me worry about them more.” It was the difference in philosophy that led to negative experiences to be discussed in the next section.

Carl always felt most supported in his family by his older brother, whom he describes as a “big influence” on his life. “Anything I wanted to do he always supported,” said Carl, “even to the point of letting me try something even if he knew it was going to turn out bad, because his philosophy has always been ‘I’ve got to let Carl learn for himself…’” Carl has always appreciated this and feels very close to his brother for it. Carl describes their relationship:

He and I are like this close [holding his fingers together]. OK, if you were to ask me, among my family, who understands me more, I would say my brother. Because he has actually taken the time to sit down with me and say, “OK, what are your dreams? What are your hopes? What are your goals?” But no one else in the family has ever done that.

*Negative family experiences.* The negative family experiences for Carl were characterized by parental discouragement of career goals while growing up that then became over protectiveness in regards to actually working when he reached adulthood. The other major experience was spending eight years at home alone not working. Each of these will now be explored in detail.
Carl felt both his mother and stepfather discouraged his career goals, but most of the discouraging messages came from his mother at a ratio of “80/20.” For example, Carl’s goal of becoming a disc jockey was discouraged with comments such as, “We’re not going to support you just because you are going to fly off the handle and follow a dream,” or “that’s not a very realistic goal for you.” When he asked them what would be realistic, Carl said their response would be, “I don’t know, but that one’s not.” This was not an unusual occurrence, according to Carl, and it had a cumulative effect. Said Carl:

I got talked out of a lot of dreams I had…. That kind of mentality kind of beats you down a lot, and… after a while you start to listen to some of that, and it starts to play on you, and you lose your drive to achieve when you’re told you can’t [all the time].

As Carl recalls, the discouragement from his parents was directly related to his disability. The older he got the consequences increased, and the more he began to “resent it.” Carl tells the story of how he and his siblings were treated differently as each of them grew old enough to go to work:

Their approach to dealing with me as a child was very normal… up until the time I hit adulthood, and then my brother began to work, my sister began to work, and I looked at them, why can’t I go to work, and why can’t I do this, and why can’t I do that, and they said because it’s not available to you. You don’t have the same abilities.

It was how his parents treated him during the transition from teenager to young adult that Carl found most difficult to deal with. “My mom fought for me to have an
equal and fair education,” said Carl, “but she [wouldn’t] fight for me to have a fair and equal adulthood.” Carl speculates the reason for this was not maliciousness, but rather “simply out of fear.” Carl said, “My parents did not want to see me get hurt. My parents did not want to see me suffer humiliation, suffer disappointment.” He felt his parents “didn’t really know” that he had viable vocational options, and that they “bought into [the] mentality” of people with disabilities not being able to succeed in the world. “They didn’t see me going very far beyond the 12th grade,” said Carl. “They didn’t want me to get hurt, they didn’t want me to get my hopes up, and boom and bust.” Carl explains:

I think my mother wanted to see me succeed, but she wanted to see me succeed with limitations and boundaries…. I think she had decided in her mind that there is only so much I can expect from Carl, and if I push him too hard he’s going to crash. And if I let him stick his neck out too far he’s going to get hurt. And so I think she wanted to see the balloon blown up, but she didn’t want to see the balloon pop.

The consistent discouragement and over protectiveness made Carl feel “like a mouse in a mouse trap.” Yet he said he never completely succumbed to the negative messages he was hearing. “There was always something inside of me that said, No, this can’t be right,” said Carl. But the ratio of external negative messages from his parents to his internal messages that told him he could succeed at working was “three to one.”

When this combination of childhood discouragement and adult over protection met with severe financial difficulty because of his mother’s divorce from his stepfather, the result was a family “consensus” that Carl would stay home while everyone else
worked. The primary reason was money; Carl was receiving Veteran’s Administration benefits plus a disability check each month, with the total being approximately $1800. This was much more than he could have earned in a job with only his AAS degree. The family’s financial problems lasted only three and a half years, but by that time Carl had “hit a brick wall.” For the next four and a half years Carl fell into “a deep, deep, deep depression.” Carl described his routine as, “I’d get up in the morning, [but] I wouldn’t bathe until like three in the afternoon [and] wouldn’t eat until like supper time.” He tried to tell his mother he needed more meaningful activity and purpose in his life, but he describes her attitude as being like “you just need to grow up and deal with it, you know, life sucks.” Eventually, she grew to understand the seriousness of his problems and took him to the doctor, who prescribed anti-depressants and started him on the road to working.

To summarize, the messages Carl received from his mother about work while growing up were complex and contradictory. He was encouraged to do chores and take career development and work preparation classes, yet he was not given any expectation of actually ever working as an adult. When adulthood arrived, he was actively discouraged from working and instead, due to extenuating circumstances, encouraged to stay at home and not work. In discussing these contradictions with Carl during the interviews, he expressed that he was still trying to resolve these messages 11 years after he left home to pursue his independent life. “On some level,” said Carl, “[those messages] haven’t been resolved…. I still get the impression that simply because my mother doesn’t approve, I still have suspicion, I still have this nagging feeling that she
doesn’t agree with my perspective on life; that she doesn’t believe in me.” This has led to
an estrangement from his mother. “I haven’t spoke with my mother in three years,” said
Carl. “When will she reach a point in her life where she just says I want a relationship
with her son more than I want to be right.”

*Positive school experiences.* The only positive experiences for Carl in school were
having mostly supportive teachers and taking career development and skills classes once
he got into high school. Each of these will now be explored.

Carl described grade school as “pretty awesome” with “teachers and staff [that]
were really kind of warm and accepting” towards him and his disability. “About 80%” of
his teachers in junior high and high school were also supportive. They would tell him
things such as, “don’t ever give up, and don’t ever let other people’s opinions influence…
where you want your life to go.” They would also “go out of their way” to provide him
any resources he needed in order to succeed in school.

The most rewarding part of school for Carl was taking classes that closely related
to work. In work preparation classes he was taught “how to properly dress, how to
properly conduct [him]self during an interview, what things to say, what not to say.” He
also took classes that provided him with specific work skills. He describes these and his
reaction to them:

I took my first business course when I was a junior in high school, and I fell in
love with it. I took several basic accounting classes, and I loved it. Something as
simple as a typing class, you know, these are skills that will have an impact on
some career level, and the fact that I [learned] accounting, I [learned] basic
business law, and I [learned] basic typing skills, [I knew these were] going to impact my career.

Negative school experiences. The negative experiences at school were difficult experiences with the administration and some of his teachers, along with an overall lack of emphasis on the school’s part regarding vocational preparation. Each of these experiences will now be explored.

Carl did not feel welcomed in his junior high school. “The school district I went to really fought my disability, and they fought it hard” said Carl. He described having to “fight” the school administration to go on field trips because they were worried about liability insurance if he got hurt. This was not directed solely at him, but included all the students with disabilities. On the occasions that Carl went on vocationally related field trips (newspaper and soft drink bottling plants), he reported not getting the experience processed by his teachers afterwards on how these might relate to him personally in regards to future work.

One particular problem of note is a classroom teacher that told Carl that she didn’t like him and didn’t want him in her class. Carl describes what happened:

She would ridicule me in front of [the class]. She would make fun of me in front of other students, and she would go out of her way to let me know what a pain in the neck it was to make any kind of accommodation for me. I remember one time asking if I could have a tape recorder in my class, and she said, no. So I went to my counselor a couple days later and my counselor said to use it anyway, just
ignore her. And so I did, and my teacher saw the tape recorder sitting in my desk and she came and picked it up and took it away from me.

When Carl went to the administration to complain, they said “deal with it,” So Carl and his parents went to the school board. Six weeks later she was fired, but this brought little satisfaction. “They blamed it on she was pregnant and her hormones were going crazy,” said Carl, and nothing to do with her behavior towards him was officially noted.

Carl spent most of his school years in special education and his opinion of this experience was quite low. “Grade school and high school didn’t really prepare me [to work] much at all,” said Carl. “The goal there is not really to get you ready for the world, only to teach you your ABCs [and] make sure you know how to read and write.” When asked what was missing in his school experience, Carl said, “They don’t get people with disabilities ready for the work world…. Public school does not allow you to explore occupations. At least from my perspective, all they’re concerned about is, do you have enough credits to graduate?”

Positive peer experiences. The only positive peer experiences for Carl were attending the school for children with disabilities and getting involved in the bowling league for people with disabilities. Each of these will now be explored. Already discussed above was Carl’s attendance at a school for children with disabilities for two years starting when he was nine. He enjoyed this school very much because he “wasn’t isolated.” Here, Carl felt that he was “one of them,” and that his fellow students with disabilities “saw the person… not the disability.” Carl’s adult experience with the
bowling league was similar. He described the group as “wonderful people” and that time of his life as “pretty good” and everything was “cool.” In both experiences Carl felt strongly connected to others, and these were the only times where he really felt this way with a group of people. The other major contribution of his being involved with the bowling league is that it was where he met his fiancé, and it was she that encouraged him to leave home and resume his college education, thus finally putting him back on the path to achieving his vocational goals.

**Negative peer experiences.** The only negative experience with peers for Carl stands in stark contrast to the positive experience above; it was actually a lack of exposure to others with physical disabilities similar to his own. Most of Carl’s disabled classmates in school had learning and other hidden disabilities, and this contributed to him feeling isolated “from a psychological standpoint and an emotional standpoint.” Carl said:

If I had been exposed to, if I had gone [longer] to a special school where every student has a physical limitation and it was obvious that they had certain barriers, my philosophy in life probably would have been a little different…. I probably would have been more accepting of my limitations…. I probably would have grown up with a much healthier respect for my disability. I don’t think I would have fought the status quo so hard. I don’t think I would have fought so hard to be accepted.
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RQ3: What were Carl’s Current WSE Beliefs?

*Global work cognitions.* Carl is “passionate” about working because it has a great deal of meaning for him. Working provides him direct benefits such as personal purpose, having a title, and earning an income, but it also allows him to benefit others. Each of these will now be explored.

The personal importance of working in the present is directly related to Carl’s not having worked for so long in the past. “Having been unemployed for ten years,” said Carl, “I have a real strong desire to work.” Carl explains:

Work means having a purpose…. having something to do every day, some where to go, somebody who needs my talents and is willing to say to me every day, “The reason we hired you is because you have this ability.” You know, that reinforces my existence, my purpose for being there….

Carl was strongly invested in his job title of Vocational Evaluator. “That’s what I do,” said Carl, “that’s who I am.” He explains:

[I] have a title now. [I] wear it proudly…. [I’m] more than just a college student, [I’m] more than just a grad student…. [I’ve] made it to the next rung in the ladder…. I’m a professional…. And to me, that makes all the hard work and everything I went through tremendously worthwhile.

Along with working comes money, which Carl described as an “immediate reward” that allowed him to provide for himself and his fiancé. But the most important aspect of money to Carl was that he earned it rather than it being awarded to him from the government in the form of a disability check. His beliefs about the added meaning of
earned money were extensive, extending to items purchased (“If you have a steak and a baked potato in front of you and someone else buys it for you, it doesn’t taste quite as good as if you bought it”) and even to paying his taxes (“It feels pretty damn good”). Carl also saw earned money as validation. “When I get that paycheck every week,” said Carl, “[it means] I have overcome another week, I have proven myself another week.”

Despite the multi-layered meaning of money to Carl, he repeatedly said, “I’m not in it for the money.” The most important meaning of a paycheck for Carl was what it symbolized:

It identifies… [that] you are contributing to your world on a personal level, and you are contributing to the lives of others. This check is a symbol that you are making a contribution [to the world], and the world is paying you back.

An opportunity to “make a contribution” to society and “make a positive difference” in the lives of others was also meaningful for Carl. He saw himself as a “voice for the public” with the ability to help other people with disabilities. He explains:

If I know a decision I make has helped improve somebody’s life, as much as I can, [then that] has a whole lot of meaning to me…. And being able to help somebody who is not having that good a time to get something they need, [that] means a lot to me.

Job-specific WSE cognitions. As mentioned above, Carl changed jobs during the course of the three interviews. He was still learning the intricacies of his new job at the time of the third interview, so the focus of this discussion of his WSE focuses on his job at the time of his first two interviews. This job was Vocational Evaluator, and he was
working only 20-25 hours per week but was fully confident he could work a full 40 hour week. “I know I could,” said Carl.

When Carl began this job he described his level of supervision as very close. “They wouldn’t let me touch anything, they wouldn’t let me do anything,” he said. But over the next six months this began to loosen. “The analogy I use is a dog on a leash,” said Carl. “[and] they’re starting to give me more leash.” He began to work with clients independently as well as conduct multiple client evaluations simultaneously. His confidence in his skills and knowledge was strong, and he felt his disability was not “going to be a stumbling block” to his productivity. Despite his confidence and growing responsibilities, Carl felt that his employer was still keeping a closer watch over him than normal. He felt that because of his disability he was “being watched maybe a little more closely than someone who [was] not disabled.” Regarding this, he said, “[It] still kind of annoys me.”

Feedback from clients regarding his performance was more important to Carl than feedback from his supervisors. His rationale for this was that as an employee, feedback from an employer was “going to come with the territory,” but feedback from clients is unsolicited and therefore “it carries a little more weight.” For Carl, client feedback included being treated as a professional. Here he gives an example:

Ten minutes before closing the phone rang. This client asked for me, and clients don’t normally ask for [me]…. And my supervisor’s wife was at the office, and she said, “Well, he’s in the restroom, can someone else help you?” and the client said no, that he wanted to talk to Carl. And he said, Carl knows what’s going on,
he understands me, he understands what’s going on in my world and I want to talk
to him. So of course, after I got out of the restroom I called him back, and we took
care of his issue. And when I hung up I sat there for a minute and wondered why
did he go to so much trouble to ask for me and only talk to me if nobody else
does? And that’s when I realized that I had made a connection with somebody. I
had, at some point in our dealings with each other, I had made a positive influence
on his life, and he remembered something I said, something I did, you know,
some kind of interaction we had that meant something to him…. This was
probably one of the first times that this happened to me where I’ve gotten positive
feedback that yes, you’re doing something, you did something right, you did
something that impressed me, you did something that made a change in my life
for the better.

A major part of Carl’ job was writing vocational evaluation reports, and he took a
great deal of pride in the quality of those reports regardless of how long it took him to
complete them. “People say that time is money,” said Carl, “but for me quality is
money…. If it takes me two days to write a report, I still go to bed and sleep good at
night knowing that I’ve done a good job.” But because Carl was still under close
supervision, all his reports needed to be reviewed and edited by his supervisor before
being sent out. Carl could judge the quality of his reports by how quickly this occurred. “I
can usually tell when they don’t like a report,” said Carl, “because they won’t let me sign
off on it immediately. But… the quicker I get it back for my final signature, that’s when I
receive my confirmation that I did a good job.
**WSE-contributing behaviors.** A typical day for Carl when he was working as a vocational evaluator involved coming in at approximately 8AM and performing administrative tasks such as preparing the files and paperwork necessary for that day and answering the phones. Once clients arrived, Carl’s duties were to help them complete the paperwork and answer any questions they had. After that, he put the clients through various work simulation tasks as part of the formal vocational evaluation process. Other available time was spent writing the reports that could be as long as 17 pages. Carl felt very effective at all of these tasks, only being challenged when he had to conduct simultaneous vocational evaluations with multiple clients. “At one point,” said Carl, “I had four clients at the same time. So I was running around like a chicken with my head cut off.” But this type of experience was rare.

Particularly important to Carl was the day to day interaction between him and his supervisor, because he felt so closely supervised. One of the things that made Carl feel effective in these interactions was when he was able to show his expertise. Carl explains:

> When a supervisor comes up to me and they’re curious about something and they have a question that they know I have the answer to, and when I know the information they want, and they allow me to impart that knowledge, that’s when I feel productive [sic].

Carl felt his strengths were that he was “real easy to get along with,” as well as being “persistent” and able to “concentrate on tasks until they are done.” He felt his strengths fit well with his job as a vocational evaluator; he had the people skills to work with clients and coworkers while also persistence and concentration to write the
necessary reports. He felt the same way about his new job as a Disability Examiner, although there he had no direct client contact and his task was more research-oriented than report writing.

WSE socioenvironmental supports. Most of Carl’s support for working came from his brother and his fiancé. Among all of his peers with disabilities, he knew of only a few that were working and only one that he personally felt close to. He did not feel at all supported by his mother. Each of these will now be discussed.

Support from Carl’s brother has been discussed extensively above, and this support for Carl remains consistent, with Carl talking to him regularly. Carl’s brother owns his own software development company, and Carl reports he is doing very well with this financially. Both Carl’s mother and sister work for his brother, but he has never asked Carl to come to work for him. Carl suspects the lack of invitation is because his brother knows it is more important for Carl to be on his own than it is to be taken care of by his brother. Thus, by his brother not offering assistance, Carl feels more supported than if he did.

Carl’s fiancé, who is not working, provides daily encouragement to him in his working endeavors. Her support takes more than just verbal form; it also includes tangible items. For example, she and her mother once bought him a suit for job interviews. A friend with a disability, who is no working, also provides regular encouragement. Overall, Carl tries to surround himself with people who are supportive of him and his efforts. “They tell me that they are very proud of me,” said Carl. “They reaffirm for me that whatever I face, whatever I want, they are behind me.”
The only person Carl mentioned that discouraged him in regards to working was his mother, whom he described as discouraging “to the extreme.” Carl described getting much more encouragement in his life than discouragement because he tried to surround himself with positive people. On those rare occasions that Carl gets discouragement from someone, he is able to ignore that person. “If somebody is discouraging me and somebody is tearing down my dreams, my wishes and my goals,” said Carl, “I just shut them off…. Even if it’s my mother.”

Analysis

A series of analyses will now be presented regarding the participants’ stories as they relate to the study’s research questions and theoretical structure. Research question number one will be discussed first, and this discussion will include an examination of which specific developmental experiences have the potential to promote and which have the potential to inhibit WSE. The discussion of research question number two will include an examination of the relative occurrence of potential promotion and inhibition of WSE experiences, the mechanisms and sources of promotion and inhibition, and the overall WSE developmental process. The discussion of research question number three will consist of the overall characteristics of WSE, as expressed by the participants.

Research Question Number One:

What are the WSE Developmental Experiences for People with Disabilities?

Each of the participants’ WSE developmental experiences are summarized in Tables 3, 4, and 5. Comparing these tables reveals a number of similarities across the domains of work, family, school, and peers regarding experiences with the potential to
promote or inhibit WSE. Experiences with the potential to promote WSE within each of these domains will be discussed first, with the focus on potentially inhibiting experiences to follow.

**WSE Promoting Experiences**

All participants reported the following experiences with the potential to promote WSE: performing household chores, a positively progressing work history, having both parents working, parents encouraging of their abilities, and having teacher support for the future. Two of the participants reported that getting good grades in school promoted their WSE, whereas the other participant felt that taking relevant skills classes promoted his WSE.

Within the work-related domain, each of the three participants started performing household chores at a young age. All of the chores were somehow related to cleaning: Alice swept the garage and helped clean the house on Saturdays; Bill raked the yard and mopped the floor; and Carl did the dishes, cleaned the bedrooms, and vacuumed. All three participants started doing chores between the ages of seven to ten and continued to do their chores as they grew older. In each case, the participant’s parents found something their child could do that was within their capabilities (sometimes creatively, such as with Bill’s raking and mopping from his electric wheelchair) and left the child to complete the task.

Once the participants grew old enough to work outside the home, their work history also progressed in a positive manner: Alice progressed from a physical job stacking books to a less physical job working at a fragrance counter in a retail store, and
both Bill and Carl went from volunteer positions into paid positions. Bill went from just participating with the theater to being a paid wheelchair dance instructor, and Carl went from volunteering at the YMCA to a part-time position as a Vocational Evaluator and then to a full-time position as a Disability Examiner. The progression into better jobs was not always smooth or without setbacks for the participants, but the overall trajectory for each of them was positive.

The family was also a very positive factor for each of the participants. Each participant reported that both their parents worked. Alice lived on the horse ranch where her father worked and her mother taught at her school, so she was acutely aware of work in both places. Bill’s father took him to work on occasion, even letting Bill “supervise” so that he could participate in the experience. Bill’s mother worked in one job and then progressed to a better job before getting hurt and being unable to work. Her response was to go to school for her GED so that she could go back to work. These events were well known to Bill, and he found it admirable. Carl’s mother and stepfather ran an accounting business out of their home, so Carl was able to witness work closely at an early age.

Besides having parents as working role models, the participants also reported that their parents were supportive of them working, although in unique ways. Alice’s parents were always supportive of her work goals, even when her goals were unrealistic because of the progressive nature of her rheumatoid arthritis. Bill’s parents, on the other hand, supported his general goal of work, but they were more direct than Alice’s parents in pointing out to him the realistic future job limitations imposed by his CP. Carl’s parents encouraged him to overcome any difficulties he had and not to be lazy or use his
disability as an excuse. They also encouraged him to take work preparation classes at school, but Carl felt their encouragement did not extend to actual employment after graduation from school.

Academics were important in promoting the participants’ WSE in a couple of ways. All three participants reported having teachers that were encouraging of their academic performance and future goals. They were thankful for this support and took comfort in going to school. They also clearly recognized the importance of academics to their future. Alice and Bill emphasized their strong academic performance in terms of good grades, both of them knowing that getting into college was the key to the future as workers. Carl never discussed his grades and had no expectations of being a future worker while in school. Instead, Carl emphasized the practical skills he learned in his work preparation classes. Through these classes he discovered he had skills and abilities within his limitations, and this filled him with hope.

No specific similarities among the participants regarding peer experiences that promoted WSE were found. Alice interacted with adults with arthritis working at the Arthritis Foundation but she expected them to be working, so she felt this had little impact on her. By tutoring others, Bill learned he could trade his intellect for physical help when he needed it. Attending a school for children for disabilities and participating in a bowling league also for people with disabilities helped Carl find social acceptance and a stronger personal identity, which he then used as a springboard to later independence.
**WSE Inhibiting Experiences**

All participants reported parental overprotection and the experience of PWD as negative role models with the potential to inhibit WSE. Two of the participants reported job discrimination and special education as having a potentially inhibiting effect on WSE, and one participant reported a negative professional opinion as potentially inhibiting. Each of these domain experiences will now be explored in detail.

Both Alice and Carl expressed the belief that they were discriminated against in relation to working. Alice’s employer would not accommodate her return to work after her hip replacement, and Carl felt a potential employer would not hire him because of his disability. Bill did not report any feelings of discrimination regarding work and turned his only negative experience (homesickness) into a positive by letting it make him stronger.

Parental overprotection was reported by all three participants. Alice reported her parents always wanting to do things for her. Bill and Carl reported their mothers were always worried about them getting hurt in some way. All of the participants resisted the overprotection to the best of their abilities and expressed either concern or frustration over it.

Special education received extremely negative reviews from Alice and Carl. Alice felt socially burdened by her placement in special education for a variety of reasons. She had a specially assigned aide to keep her safe, her mother would come into her classes at the beginning of each school year and talk to her classmates about her disability, and she sometimes had to go to a special class away from her classmates for instruction. All of these experiences made Alice feel singled out because of her disability. She also resented
the repeated academic testing her school required of her that seemed to focus on nonexistent cognitive deficits. Carl felt that school was not preparing him to be a worker and was instead only interested in him having enough credits to graduate. He had to fight his school administration just to participate in normal curricular activities with reasonable accommodation as well as extracurricular activities such as going on field trips. Bill’s only inhibiting experience was that his social support system so carefully built over the years drifted away during his senior year in high school.

All three participants expressed negativity regarding their disabled peers as a role model influence on WSE, although for varied reasons. Alice was repulsed by seeing physical deformities in adults with RA. Bill’s friends with disabilities did not have the same drive to become a worker in the future as he did. Carl felt he did not have enough friends with similar disabilities to his own.

One other noteworthy experience with the potential to limit WSE was Alice’s trip to a child psychologist when she was 12 years old. The psychologist’s apparent professional opinion was that she could not pursue her career dreams, which Alice found very upsetting. None of the other participants reported a similar negative experience from someone in a helping profession.

Research Question Number Two:

How Do the Work Self-efficacy Developmental Experiences of PWD Contribute to Later Employment Behavior and Beliefs?

The analysis of how WSE developmental experiences contributed to later behavior and beliefs was three-fold. First, the relative number of experiences that had the
potential to promote or inhibit the participants’ WSE will be compared. Next to be examined will be which of the four mechanisms of self-efficacy (performance experiences, vicarious learning, verbal persuasion, and affective states) and the three sources of self-efficacy (family, peers, and school) most promoted or inhibited the participants’ WSE. The cognitive processing of the various mechanisms and sources will also be analyzed. Third to be examined will be the WSE developmental process itself as it compares to the SCCT model of career development.

Relative Occurrence of Potentially Promoting and Inhibiting WSE Experiences

Table 6 shows the relative occurrence of all the potentially promoting and potentially inhibiting WSE experiences for each of the participants. Overall, the participants reported ten more potentially promoting WSE experiences (n = 31) than inhibiting experiences (n = 21). Such a finding might be expected given that all the participants were working successfully at the time of the interviews. However, looking at each participant’s results individually reveals both Alice and Carl had only one more potentially promoting experience (Alice, n = 8; Carl, n = 11) as potentially inhibiting experiences (Alice, n = 7; Carl, n = 10). Bill, on the other hand, had eight more potentially promoting experiences (n = 12) than potentially inhibiting experiences (n = 4). Thus Bill accounts for 8/10 (80%) of the difference between potentially promoting and potentially inhibiting WSE experiences.

Based on Bill’s case profile that showed him to be a very optimistic person, it seems reasonable to expect that he would focus on, and thus report, more positive experiences than negative ones, or perhaps his life was truly filled with many more
promoting than inhibiting experiences. In either case, having more potentially promoting WSE experiences would logically lead to Bill having a strong WSE. But then how can we explain the high WSE of Alice and Carl? For this we need to look at the mechanisms and sources of WSE development.

**Mechanisms and Sources of Work Self-efficacy Development**

Before the discussion of WSE mechanisms and sources begins, a brief review of thee topics is in order. Mechanisms are the types of experiences that impact self-efficacy and sources are the social structures where these different types of experiences take place. There are four self-efficacy mechanisms. Ranked in order of effectiveness, these four mechanisms are performance, vicarious learning, verbal persuasion, and affective states. The three primary sources of self-efficacy are, in descending order, family, peers, and
school (Bandura, 1997). For purposes of the study, a fourth source of self-efficacy labeled Work was added. The rationale for this addition is related to the development that takes place as children become adults. That is, most child interactions take place within the primary social structures of family, peers, and school. But once a person transitions into adulthood, the next major place where interactions take place is within the social structure of work.

Using the above format, all of the participants’ WSE developmental experiences were coded and then put into tables. Tables 7, 8, and 9 detail all the mechanisms with the potential to promote or inhibit the participants’ WSE, and Tables 10, 11, and 12 detail the sources with the potential to promote or inhibit the participants’ WSE. Each mechanism is listed in the tables according to its frequency of use in promoting and also inhibiting WSE. That is, the most frequently utilized mechanisms and sources are listed toward the top and the least utilized are listed toward the bottom. An examination of these tables gives an indication of which mechanisms and sources most promote and most inhibit WSE.

WSE mechanisms. The most frequent mechanism promoting WSE for Bill was performance (n = 7). This was also the case for Carl (n = 5). For Alice, it was both performance and vicarious learning (n = 3). Vicarious learning was the second most frequently used mechanism for Carl, but for Bill it was verbal persuasion. The mechanism of affective states was not coded for any of the participants as a WSE promoting experience.
The most common performance activities for all three participants were (1) doing household chores and (2) having a positively progressing work history. The demonstration of increasing mastery over a long developmental period likely contributed more to each participant’s WSE than role models or social support while growing up, although all three almost certainly had a cumulative effect. That performance had a stronger effect was in evidence in the participant interviews. Alice and Carl both emphasized that their abilities were more important to them than what they heard from others, and Bill stated directly that the things he did in life held more weight for him than the things he saw or heard from others.

The vicarious learning about work for all three participants came from their families. None of the participants cited a peer as a positive role model for working. Rather, when talking about role models as workers, all three participants talked about their parents and siblings instead. Families were also the main source of verbal persuasion in the form of parental encouragement for all three participants. Families as a source of WSE will be discussed in detail below.

Examining the tables for inhibiting mechanisms revealed similar consistent results. The most common inhibitor of WSE for Alice was verbal persuasion (n = 4), and also for Bill (n = 2), as well as Carl (n = 7). Affective states, as experiences with the potential to inhibit WSE, were mentioned only once by Bill and once by Carl. The most common form of verbal persuasion (dissuasion) for all the participants was parental overprotection. Alice and Carl also perceived job discrimination, and Carl experienced negative comments from a teacher and a school administrator. The common reaction by
all participants in all these situations was to resist, possibly because knowledge of their performance overpowered any negative comments from others. All of these results are consistent with Bandura’s (1997) assertion that performance mastery is the most powerful mechanism for developing self-efficacy, and thus also WSE, with vicarious learning, peers, and affective states having incrementally decreasing effects.

WSE sources. The ranking of sources promoting WSE was consistent for all participants. The most frequent source of WSE promotion for Alice (n = 3), Bill (n = 3), and Carl (n = 5) was family. School was the second most frequent source, peers was third, and work was last.

Families used the three major mechanisms to promote WSE: They assigned chores (performance), provided support (verbal persuasion), and served as working role models (vicarious learning). While not mentioned specifically by any of the participants, the support provided by the parents may have also contributed to the participants’ calm affective state, thus allowing them to benefit most from the other mechanisms. School was the second most common source of WSE promotion. Teacher support (verbal persuasion) and academics (performance) of some kind were mentioned by all three participants. Having disabled peers was the third most source of WSE promotion via their being positive role models (vicarious learning); however, peers were just as often found to be sources with the potential to inhibit WSE (more on this below). The work environment was the lowest ranked source of WSE promotion, possibly because all three participants had less experience with work in comparison to experiences with family, school and peers.
<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Mechanism</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Mechanism</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Performance</td>
<td>Parental overprotection</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Academic performance</td>
<td>Performance</td>
<td>Social burden of special ed. label</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Work history progression</td>
<td>Performance</td>
<td>Doctor crushing career dreams</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Both parents worked</td>
<td>Vicarious Learning</td>
<td>Lost job due to disability</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Arthritis Foundation workers</td>
<td>Vicarious Learning</td>
<td>Grandparents complaining</td>
<td>Vicarious Learning</td>
</tr>
<tr>
<td>Arthritis Foundation summer camp</td>
<td>Vicarious Learning</td>
<td>Arthritis Foundation workers</td>
<td>Vicarious Learning</td>
</tr>
<tr>
<td>Parental encouragement</td>
<td>Verbal Persuasion</td>
<td>Few work preparation activities</td>
<td>Performance</td>
</tr>
<tr>
<td>Teacher support</td>
<td>Verbal Persuasion</td>
<td></td>
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</tbody>
</table>

WSE promoting experiences: Performance (n = 3), Vicarious Learning (n = 3), Verbal Persuasion (n = 2)

WSE inhibiting experiences: Verbal Persuasion (n = 4), Vicarious Learning (n = 2), Performance (n = 1)
<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Mechanism</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Mechanism</th>
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</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Performance</td>
<td>Lack of peer social support</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>College internship</td>
<td>Performance</td>
<td>Theater group – homesick</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Theater group – travel</td>
<td>Performance</td>
<td>Negative disabled role models</td>
<td>Vicarious Learning</td>
</tr>
<tr>
<td>Brother’s tough love</td>
<td>Performance</td>
<td>Mother encourages theater group</td>
<td>Affective</td>
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<tr>
<td>Academic performance</td>
<td>Performance</td>
<td></td>
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<tr>
<td>Tutoring</td>
<td>Performance</td>
<td></td>
<td></td>
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<tr>
<td>Hall monitor</td>
<td>Performance</td>
<td></td>
<td></td>
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<tr>
<td>Socialization with peers</td>
<td>Verbal Persuasion</td>
<td></td>
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<tr>
<td>Parental encouragement/realism</td>
<td>Verbal Persuasion</td>
<td></td>
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<tr>
<td>Teacher support</td>
<td>Verbal Persuasion</td>
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<tr>
<td>“Work” with dad</td>
<td>Vicarious Learning</td>
<td></td>
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</tbody>
</table>
Both parents worked | Vicarious Learning
---|---

WSE promoting experiences: Performance (n = 7), Verbal Persuasion (n = 3), Vicarious Learning (n = 2)

WSE inhibiting experiences: Verbal Persuasion (n = 2), Vicarious Learning (n = 1), Affective (n = 1)
Table 9

Mechanisms Promoting WSE Experiences – Carl

<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Mechanism</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Mechanism</th>
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</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Performance</td>
<td>College internship harassment</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Work preparation classes</td>
<td>Performance</td>
<td>Perceived hiring discrimination</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Volunteer job</td>
<td>Performance</td>
<td>Mother’s discouragement</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>First professional job –</td>
<td>Performance</td>
<td>Eight years at home not working</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>part-time</td>
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<tr>
<td>Second professional job –</td>
<td>Performance</td>
<td>Negative Assistant Principal</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>full-time</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Both parents worked</td>
<td>Vicarious Learning</td>
<td>School field trips not reinforced</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Special school for disabled</td>
<td>Vicarious Learning</td>
<td>Non-supportive teacher</td>
<td>Verbal Persuasion</td>
</tr>
<tr>
<td>Bowling league for disabled</td>
<td>Vicarious Learning</td>
<td>Poor special education academics</td>
<td>Performance</td>
</tr>
<tr>
<td>Mother’s encouragement</td>
<td>Verbal Persuasion</td>
<td>Few physically disabled peers</td>
<td>Vicarious</td>
</tr>
<tr>
<td>Brother’s encouragement</td>
<td>Verbal Persuasion</td>
<td>Bookkeeper/tax preparer job</td>
<td>Affective</td>
</tr>
<tr>
<td>Teacher support</td>
<td>Verbal Persuasion</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
WSE promoting experiences: Performance (n = 5), Vicarious Learning (n = 3), Verbal Persuasion (n = 3); WSE inhibiting experiences: Verbal Persuasion (n = 7), Performance (n = 1), Vicarious Learning (n = 1) Affective (n = 1)
Findings regarding the source that most often inhibited WSE were inconsistent. For Alice, the most frequent source to inhibit WSE was family (n = 2), for Bill it was peers (n = 2), and for Carl it was school (n = 4). By combining the results across all participants, however, some trends do become evident.

The most common source of WSE inhibition for all participants was school (n = 6), although only Alice and Carl felt this way. Specifically, special education was a social burden (Alice) and did not provide enough work preparation activities (Alice and Carl). School personnel were also negative toward disability (verbal persuasion) and did not verbally process vocationally relevant activities such as worksite field trips as potential career options (Carl), thus there being an absence of verbal persuasion in this case.

The second most overall source of potential WSE inhibition was family (n = 5). The mechanism most used by families to potentially inhibit WSE was parental overprotection (verbal persuasion), as experienced by Alice and Carl. Bill’s sole experience with family inhibiting WSE was his mother’s pressing him into participating in the theater group against his will, at least initially, thus making him very upset.

The third most overall source of WSE inhibition was peers (n = 4) as negative, absent, or distant role models (vicarious learning). Alice was repulsed by visions of others with advanced RA. Bill’s friends with disabilities did not share his drive for working in the future and turned to images of people with disabilities on television or in movies (once he understood they were actually disabled) for empowering role models. Carl, on the other hand, just wished he had more friends with disabilities similar to his so that he would have more people to relate to.
Work (n = 3) and other sources (n = 2) were the least overall sources of potential WSE inhibition. Perceived discrimination against disability was the potential source for WSE inhibition for two of the participants. For Alice it was not being allowed back to her job, and for Carl it was being harassed by his internship supervisor and not being hired for another job because the employer doubted his abilities (verbal persuasion). Bill did not report any specific instances of work as an inhibitor. The other sources of potential WSE inhibition were outside professionals. For Alice it was the child psychologist that crushed her dreams of going on safari, and for Bill it was the director of the theater company that told him to “shape up or ship out” (verbal persuasion).

To summarize, by totaling all three participants’ citing of WSE sources, both potentially promoting and inhibiting, the following results emerge: Families were the most frequent source of WSE and tended to promote it (n = 11) more than inhibit it (n = 5); whereas schools, the next most frequent WSE source, had a slightly higher tendency to inhibit it (n = 7) rather than promote it (n = 6). Of lesser importance than the above were the sources of peers (n = 5) and work (n = 3). Finally, outside sources (n = 2) had only inhibiting effects. Finding families as the most frequent source of WSE is consistent with Bandura’s (1997) assertion that family is the primary source of self-efficacy. Having school as a more frequent source of WSE than peers, however, is not consistent with Bandura’s ranking of self-efficacy sources. The lesser place of peers in the hierarchy for this study’s participants may be related to their disabilities limiting socialization opportunities (something all participants mentioned as having happened to them to at least some extent) or possibly because so many of the participants’ peers were actually
negative role models. The influence of outside sources appears negligible in comparison to all the primary sources.

Research Question Number Three:

How Do PWD Describe Their Current Work Self-efficacy Beliefs and Behavior?

The analysis for RQ3 involved a review of each participant’s case profile to look for common themes. The decision to include a theme was made if at least two of the participants talked about the same topic. Themes were divided into three categories that corresponded to the SCT triad of cognitions, behavior, and environment (Bandura, 1997). In order to do this, the case profile categories of global work cognitions and job-specific work cognitions were combined into one category labeled Work Cognitions. The other case profile categories of work behaviors and socio-environmental work supports remain unchanged.

Work Cognitions

All of the participants were motivated more by the intrinsic rewards of work than extrinsic things such as money. The specific intrinsic award varied by participant, however. For Alice, work provided her independence, enjoyment, and pride. Carl also gained a feeling of independence from working. In addition, Carl talked at length about how working gave him a sense of purpose and a worthy identity. Bill’s intrinsic rewards were the relationships he established with people and the sense of accomplishment he gained by helping people.
Table 10

Sources Promoting and Inhibiting WSE Experiences – Alice

<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Source</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Family</td>
<td>Parental overprotection</td>
<td>Family</td>
</tr>
<tr>
<td>Both parents worked</td>
<td>Family</td>
<td>Grandparents complaining</td>
<td>Family</td>
</tr>
<tr>
<td>Parental encouragement</td>
<td>Family</td>
<td>Social burden of special ed. Label</td>
<td>School</td>
</tr>
<tr>
<td>Academic performance</td>
<td>School</td>
<td>Few work preparation activities</td>
<td>School</td>
</tr>
<tr>
<td>Teacher support</td>
<td>School</td>
<td>Arthritis Foundation workers</td>
<td>Peers</td>
</tr>
<tr>
<td>Arthritis Foundation summer camp</td>
<td>Peers</td>
<td>Lost job due to disability</td>
<td>Work</td>
</tr>
<tr>
<td>Arthritis Foundation workers</td>
<td>Peers</td>
<td>Doctor crushing career dreams</td>
<td>Other</td>
</tr>
<tr>
<td>Work history progression</td>
<td>Work</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources promoting WSE: Family (n = 3), School (n = 2), Peers (n = 2), Work (n = 1)

Sources inhibiting WSE: Family (n = 2), School (n = 2), Peers (n = 1), Work (n = 1), Other (n = 1)
<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Source</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Family</td>
<td>Negative disabled role models</td>
<td>Peers</td>
</tr>
<tr>
<td>Brother’s tough love</td>
<td>Family</td>
<td>Lack of peer social support</td>
<td>Peers</td>
</tr>
<tr>
<td>Parental encouragement/realism</td>
<td>Family</td>
<td>Mother encourages theater group</td>
<td>Family</td>
</tr>
<tr>
<td>“Work” with dad</td>
<td>Family</td>
<td>Theater group – homesick</td>
<td>Other</td>
</tr>
<tr>
<td>Both parents worked</td>
<td>Family</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Academic performance</td>
<td>School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Hall monitor</td>
<td>School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Teacher support</td>
<td>School</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tutoring</td>
<td>Peers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Socialization with peers</td>
<td>Peers</td>
<td></td>
<td></td>
</tr>
<tr>
<td>College internship</td>
<td>Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Theater group – travel</td>
<td>Other</td>
<td></td>
<td></td>
</tr>
<tr>
<td>-----------------------</td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Sources promoting WSE: Family (n = 5), School (n = 3), Peers (n = 2), Work (n = 1), Other (n = 1)</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sources inhibiting WSE: Peers (n = 2), Family (n = 1), Other (n = 1)</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 12
Sources Promoting and Inhibiting WSE Experiences – Carl

<table>
<thead>
<tr>
<th>WSE Promoting Experiences</th>
<th>WSE Source</th>
<th>WSE Inhibiting Experiences</th>
<th>WSE Source</th>
</tr>
</thead>
<tbody>
<tr>
<td>Childhood chores</td>
<td>Family</td>
<td>Negative Assistant Principal</td>
<td>School</td>
</tr>
<tr>
<td>Both parents worked</td>
<td>Family</td>
<td>Non-supportive teacher</td>
<td>School</td>
</tr>
<tr>
<td>Mother’s encouragement</td>
<td>Family</td>
<td>Poor special education academics</td>
<td>School</td>
</tr>
<tr>
<td>Brother’s encouragement</td>
<td>Family</td>
<td>School field trips not reinforced</td>
<td>School</td>
</tr>
<tr>
<td>Work preparation classes</td>
<td>School</td>
<td>Mother’s discouragement</td>
<td>Family</td>
</tr>
<tr>
<td>Special school for disabled</td>
<td>School</td>
<td>Eight years at home not working</td>
<td>Family</td>
</tr>
<tr>
<td>Teacher support</td>
<td>School</td>
<td>College internship harassment</td>
<td>Work</td>
</tr>
<tr>
<td>Volunteer job</td>
<td>Work</td>
<td>Perceived hiring discrimination</td>
<td>Work</td>
</tr>
<tr>
<td>First professional job – part-time</td>
<td>Work</td>
<td>Few physically disabled peers</td>
<td>Peers</td>
</tr>
<tr>
<td>Second professional job – full-time</td>
<td>Work</td>
<td>Bookkeeper/tax preparer job</td>
<td>Affective</td>
</tr>
<tr>
<td>Bowling league for disabled</td>
<td>Peers</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Sources promoting WSE: Family (n = 4), School (n = 3), Work (n = 3), Peers (n = 1)
Sources inhibiting WSE: School (n = 4), Family (n = 2), Work (n = 2), Peers (n = 1), Affective (n = 1)
Self-confidence was another cognition that all the participants talked about. This self-confidence was specific to the job each was doing, and it grew over time as each performed his or her job. Alice’s self-confidence was related to her working with the public, and her rating of it grew from approximately a three to a seven out of ten as she progressed in her jobs. Bill said his CASA volunteer job was a “shot in the dark” when he started but was quite confident of his performance by the time of the interviews. Because of his Masters degree in Vocational Rehabilitation, Carl reported always being confident in his abilities to be a Vocational Evaluator, but his confidence in the report writing part of this job, a major aspect, grew as he practiced this skill. Carl’s confidence in being a Disability Examiner was not as strong when he started because he did not have as directly related an educational background as in his previous job. However, Carl’s confidence grew rapidly via on-the-job training.

The third cognition that all three participants agreed upon was that they all felt they were performing a service in their jobs. The service for Alice was in satisfying customers so that they walk away happy. Bill’s service was to contribute to his community through emotional connections with others and education about the arts and disability. It was important for Carl that both of his jobs allowed him to make a positive difference for others with disabilities. As a Vocational Evaluator he was able to kind appropriate careers for people, and as a Disability Examiner he was able to help people with disabilities get needed financial assistance.

Having job-specific knowledge was noted by Alice and Carl, but not specifically by Bill. Alice’s knowledge of fragrance products was important to her job performance
self appraisal. The knowledge Carl had about disabilities and vocational evaluation techniques that he gained through his Masters degree program was also a strong contributor to his job performance self appraisal when working as a Vocational Evaluator. When Carl moved into his new job as a Disability Examiner he discovered that he needed more knowledge than he then possessed, but by the time of the third interview he was gaining in confidence in that job because of all the new knowledge he was acquiring.

Work Behaviors

There were four inter-related work behaviors that all the participants agreed gave them feelings of WSE. The first work behavior that all the participants performed that contributed to their WSE was maintaining a work schedule. Alice took pride in her never calling in sick unless she was having severe difficulties with her RA. She would only cut back on her work hours in order so that she could put in more hours at school. Bill was working two different jobs, one paid and one volunteer, plus also doing computer skills tutoring for individuals for an hourly rate. While working a part-time job, Carl was eager to work full-time, feeling very confident in his ability to do so.

Besides maintaining their work schedule, all the participants also gained a sense of WSE by having the physical ability to do their essential job tasks. Alice described a learning process where each job she had gave her more information about what physical tasks she could do until she found the best fit. She started with a physical job shelving books, then progressed to a retail job that required her to stand all the time, and then got the job at the fragrance counter that did allow her to sit and rest at times. Bill’s jobs were
all sedentary, requiring him only to talk on the phone, use the computer, and meet with people, all duties ideally suited for a person in an electric wheelchair. Carl only experienced difficulty at the Vocational Evaluator job when he had multiple clients that required him to move from place to place rapidly, or when he had to lift heavy work samples for the clients to use. Once at the Disability Examiner job, his physical requirements were essentially the same as Bill’s.

The next work behavior contributing to WSE was one step beyond just having the physical ability to do the work; it was having the skills to do the work. Alice’s skills were in dealing with diverse people and being bilingual in English and Spanish. Both of these skills combined to help her serve her store’s significant number of Hispanic customers. Bill was also skilled in dealing with diverse people and bilingual in English and Spanish, and these skills were particularly helpful in his CASA job when dealing with Hispanic families getting services. Bill’s skills also included his computer expertise, acting, and wheelchair dancing abilities; the former serving him well in his office duties, and the latter serving him well in his artistic endeavors. Carl also possessed skills in dealing with people and in having the concentration to do the intellectually demanding jobs of Vocational Evaluator and Disability Examiner.

The final work behavior contributing to WSE is the culmination of the previous three skills. Only by maintaining a regular work schedule, having the physical ability to do the essential job tasks, and possessing the requisite skills for the job can you then possibly meet the performance requirements of a job. Alice met or exceeded her sales quotas. Bill received regular CASA referrals and was regularly asked to give wheelchair
dance demonstrations or teach classes. Carl was left alone to work with clients when working as a Vocational Evaluator and had successfully completed all his training so that he was able to work solo as a Disability Examiner.

Socioenvironmental Work Supports

The first area of support that all the participants talked about as essential to their sense of WSE was getting support for working from outside the workplace. For all the participants, this support came mostly from families and loved ones, but rarely from peers. Alice received strong support for working from her parents, but not without some concern about her overworking. Her working was considered normal by her friends, so she did not consider this as support or lack of support, just neutral. Bill received strong support from his father and fiancé, whereas his mother’s support for him was mixed with concern of him getting hurt. Almost all of Bill’s friends with disabilities wanted him to spend time with them instead of working. Carl’s support for working came from his brother and fiancé, but not his mother. He tried to surround himself only with people that are supportive of his working.

The next area of social support for all the participants was how positive customer or client comments enhanced their sense of WSE. For Alice, this was closely related to her customer service skills. When a customer is happy with the service she gives them and leaves happy, it makes her feel good about how she does her job. One of the main indicators of how good a job Bill was doing was when a child gave him a hug. Carl told the story about how the client wanted to talk to him and no one else as an indicator that
he had made a connection with someone. For Carl, positive client feedback was more salient than positive supervisor feedback.

The next two areas of social support are coworker support and supervisor support. Only two of the participants talked about this specifically. Alice and Bill commented on how gratifying it was to have supportive coworkers, people that gave them positive feedback about the job they were doing or were just generally kind to them. Carl never discussed this topic specifically. Besides coworker support, there was also support from supervisors. Alice was very fond of her supervisor and felt much supported by her, but Carl’s relationship with supervisors was more complicated. Carl was very grateful to his supervisors when they hired him to be a Vocational Evaluator, but he also felt overly watched by them. Getting a report back from a supervisor quickly was feedback for him that he had written a good report, not verbal comments. As a Disability Examiner, Carl felt more heard, respected, and valued by his supervisors, and this enhanced his feelings of efficacy in that position.

To summarize, overall there were 12 characteristics that contributed to participants’ WSE, four in each area of the self-efficacy triad. The WSE characteristics are:

- Work Cognitions
  - Intrinsic rewards
  - Self-confidence
  - Service-orientation
  - Job-specific knowledge
• Work Behaviors
  o Maintain a schedule
  o Physical ability to do essential tasks
  o Possessing required job skills
  o Meeting job performance requirements

• Socioenvironmental supports
  o Social support from family and loved ones
  o Customer or client positive feedback
  o Coworker support
  o Supervisor support
CHAPTER 5
DISCUSSION

Chapter 5 contains a discussion of the study. The chapter will begin with a summary of the research in which the findings from the study will be examined in relation to previous research in the areas of social cognitive theory (SCT), self-efficacy theory, social cognitive career theory (SCCT) and the SCCT model of the career development process. An unexpected finding regarding the similarity of work self-efficacy (WSE) to resilience will also be discussed. Specific limitations of the study will also be included in the conclusion of the chapter. Areas for follow-up research will be noted throughout the discussions. The chapter will conclude with some personal reflections from the researcher.

Research Summary

The foundational theory for the study was social cognitive theory (SCT), which states that it is the sum results of the interaction between environment, cognitions, and behavior that generates peoples’ knowledge about themselves and their world (Bandura, 1986). But specifically guiding the study were two theories derived from SCT. The first, self-efficacy theory, attempts to explain peoples’ judgments regarding their effectiveness at performing in specific behavioral domains as a result of the interaction between environment, cognitions and behavior (Bandura, 1989). The specific behavioral domain of working was explored in the study, with WSE being defined as a person’s judgment of his or her capability to do the basic tasks necessary in order to work in and maintain a job for an extended period of time. Since the study was exploring the development of WSE,
the second theory that guided the study was social cognitive career development theory (SCCT), which views career development as the result of an interaction between the sociocultural environment, a person’s attributes, and goal-directed behavior (Lent & Brown, 1996).

The purpose of the study was two-fold: (1) to describe, from a first-person perspective, how WSE develops in people with disabilities (PWD); and (2) to explore how WSE developmental experiences impacts adult beliefs and behavior regarding employment. The three research questions were as follows: (1) what are the WSE developmental experiences for PWD?; (2) how do WSE developmental experiences for PWD contribute to later WSE beliefs?; and (3) how do PWD describe their current WSE beliefs? The findings for each of these research questions will now be briefly summarized and discussed.

**RQ1: What are the WSE experiences for PWD?**

All of the participants had both potentially promoting and inhibiting WSE experiences. Potentially promoting experiences were performing household chores, having a positively progressing work history, having working parents as role models, getting parental and teacher support for abilities, getting good grades in school, and taking work-related skills classes in school. Potentially inhibiting experiences were having overprotective parents, having other PWD as non-working role models, perceiving job discrimination, feeling inhibited by special education, and hearing the negative opinions of professionals.
Extrapolating the above lists of WSE events to the general population, to a limited extent, we can speculate that WSE promoting events occur to people with and without disabilities. That is, people with disabilities probably have the same WSE promoting events during their development as people without disabilities. However, when reviewing the list of WSE inhibiting events, we can also speculate that people with disabilities probably have different experiences than people without disabilities. That is, PWD are likely to be more overprotected by their parents, have more non-working role models with disabilities, perceive more job discrimination, and feel more inhibited by the educational system (special education) than people without disabilities.

Specific research is needed in the future to make the above suppositions of group similarities and differences empirical, but three of the potentially WSE inhibiting events generated from this study are similar to findings in other studies already reported on for this study. Dowrick et al. (2005) found that students with disabilities often reported that their families were overprotective and discouraging regarding their future. Hitchings et al. (2001) and Morningstar et al. (1996) found that schools provided a generally weak context for promoting vocationally related self-efficacy. Finally, Schur, Kruse, and Blanck (2005) found ample evidence of job discrimination towards PWD by employers.

No studies were found that showed other PWD as negative role models for working; however, the theoretical evidence indicates that this is possible. The factors affecting the effectiveness of vicarious learning are that the role model is similar to the observer, how many role models the person observes, the perceived power of the role model, and the perceived similarity of the observer’s problem with that of the role model.
(Maddux, 1995). Applying these factors to this study, we see that a similar role model for
the participants in this study would be other PWD, and that most of the PWD the
participants in this study observed were not working. How the participants in this study
perceived the power of other PWD role models in their lives was not assessed, nor was
the perceived similarity of their respective problems. Additional research regarding all
aspects, positive and negative, of how role models, disabled and non-disabled, impact
career development is recommended.

*RQ2: How Do WSE Developmental Experiences Contribute to Later WSE Beliefs?*

The word “potential” to describe the effects of promoting and inhibiting
experiences on WSE has been used deliberately up to this point of the study because self-
efficacy developmental experiences are not simplistically deterministic. In the present
study, all the promoting experiences did actually promote WSE, but the negative
experiences that might have been expected to inhibit WSE had minimal or opposite
effects. There appear to be two reasons for this: (1) the relative effectiveness of the
mechanisms and sources of WSE, and (2) how the participants cognitively processed the
mechanisms and sources of WSE. Once these two reasons are discussed, the section will
conclude with a discussion of the role that WSE plays in the career development process.

*Relative effectiveness of WSE mechanisms and sources.* The most frequent
mechanisms for potentially promoting WSE for the participants were, in descending
order, performance experiences (chores and work history), vicarious learning (family as
role models), and verbal persuasion (encouragement from family and teachers). These
findings correspond to Bandura’s theory (1997) regarding the order of effectiveness of
self-efficacy mechanisms. The most frequent mechanisms for potentially inhibiting WSE for the participants were verbal dissuasion (parental overprotection) and vicarious learning (non-working disabled role models). The two least effective mechanisms of self-efficacy were those that inhibited WSE.

The most frequent sources of potentially promoting WSE experiences for the participants were, in descending order, family, school, and peers. As with self-efficacy mechanisms above, these findings correspond to Bandura’s theory (1997) regarding the order of effectiveness of self-efficacy sources. The most frequent sources of potentially WSE inhibiting experiences were school and family. As above, the two least effective sources of self-efficacy were those that inhibited WSE.

To summarize, the most effective self-efficacy mechanisms and sources potentially promoted WSE and the least effective mechanisms and sources potentially inhibited WSE. Thus, it should be expected that WSE would be more effectively promoted than inhibited in the study participants. Additional research is recommended to investigate the process further, especially for PWD that do not feel they can be effective at working.

*Cognitive processing of WSE mechanisms and sources.* In addition to the relative effectiveness of the mechanisms and sources of WSE discussed above, also important is how a person cognitively processes those mechanisms and sources. This cognitive processing is an individualized process that depends on each person’s environment and behaviors (Bandura, 1997). How each of the research participants cognitively processed their individual experiences will now be discussed.
Alice consistently resisted all potentially inhibiting experiences. She repeatedly said that she “pushed it away” when asked about parental overprotection, her grandfather and grandmother complaining, special education services, the child psychologist’s professional opinion, and even the Arthritis Foundation activities. Instead of focusing on these negative external factors, she chose to focus her attention on her internal belief that she would be able to meet her goal of working. She was able to hold on to her positive internal belief (cognition) because her family supported her in this goal (environment), and she was able to reference her positive performance experiences (behavior), thus demonstrating Bandura’s triadic reciprocal determinism (1986).

Bill used his cognitive skills to turn all the potentially inhibiting experiences into growth promoting experiences. He cried, begged, and pleaded not to join the theater company, but then threw himself into its activities (behavior). One of these activities was going on the road for long periods of time, which resulted in his being homesick, but his reaction to this was to focus on the enrichment opportunity provided him (cognition). When his social support system fell apart his senior year in high school, he said “tough” and went on to get new friends, and a fiancé, in college, thus creating a new supporting environment via his behavior. And finally, when surrounded by his friends with disabilities that did not want to or feel they could work, Bill’s reaction was to try and lead them by behaving in an encouraging manner rather than follow them on the path to inactivity and disability checks from the government.

In the case of Carl, he did succumb to a lack of parental support to the point of inactivity and serious depression. But his dream of working persisted, even if he did not
expect to achieve that dream. His cognitive processing during those eight years at home always included the hope of one day being a worker. Once finally free from his oppressive home environment and surrounded by supportive friends with disabilities, Carl’s self-efficacy began to emerge when he engaged in goal-directed behavior that eventually evolved into WSE.

*The Work Self-efficacy Developmental Process*

The social cognitive career theory (SCCT) developmental process, as interpreted by the current researcher and shown in Figure 1, is the result of the triadic interaction between a person’s attributes, behavior, and environment (Lent & Brown, 1996). However, the current study theorizes the development of work self-efficacy, not career, thus the SCCT model must be reexamined. A model of WSE development based upon the results in the current study created by looking at similarities of the environments, behaviors, and cognitions of all the participants in this study will now be examined.

To the extent that the data can be generalized, for WSE development to occur the social environment at home needs to have an emphasis on working, which then leads to the assignment and performance of household chores by the PWD. Over time, the effect of doing chores is that the PWD begins to develop a work ethic that includes a feeling of accomplishment. That feeling can derive from verbal praise for a job well done or even in the form of an allowance, in essence an early form of paycheck. A natural extension of the PWD’s work ethic is him or her openly talking to his or her parents about the idea of working in a job some time in the future. If the idea of future is supported by the parents (such as with Alice and Bill) or other significant people in the PWD’s life (such as with
Carl), the PWD then develops an outcome expectation of working in the future and the developmental process continues. Inherent in the WSE model, but not explicitly drawn in the diagram, is ongoing social support from this point forward. Armed with the outcome expectation of working, the PWD then engages in the goal-directed behaviors of training or education, job search, and, eventually, job acquisition. Positive performance appraisal of job functions from the PWD, coworkers, and supervisor then leads to a sense of WSE. The WSE developmental model is shown in Figure 2.

The WSE model proposed here bears a close resemblance to the SCCT developmental model (Lent & Brown, 1996), with one important difference. In the SCCT model, feelings of self-efficacy lead directly to outcome expectations, but the data provided by the participants in this study show that support must be in place before outcome expectations of working can develop. The provision of support, therefore, seems to be the most crucial step in the WSE developmental process. The case of Carl demonstrates this most clearly. When his parental support for working was weak, the WSE developmental process stalled until support was provided by significant others. Carl’s outcome expectancy of working did not develop until after his social support for working was reestablished. However, if social support is early, ongoing, and strong enough, such as with Alice and Bill, a PWD’s outcome expectancy of working develops quickly, thus enabling him or her to withstand the rigors and rejection inherent in a job search. To summarize, it appears that social support leads to WSE, which then leads to outcome expectations of working and establishing a career. WSE therefore appears to be essential to career development, for without it there can be no career.
Figure 2

Model Showing the Interaction of Environment, Behavior, and Cognition in the Development of Work Self-efficacy in People with Disabilities

Notes: Triangles represent an environmental condition, ovals represent behavior, and squares represent cognitions.
RQ3: How Do PWD Describe Their Current WSE Beliefs?

Twelve characteristics of WSE were identified in the study. These characteristics were evenly divided between the areas of work cognitions, work behaviors, and socio-environmental supports. The four characteristics in the area of work cognitions were intrinsic rewards, self-confidence, service-orientation, and job-specific knowledge. The four characteristics in the area of work behaviors were maintaining a schedule, physical ability to do essential tasks, possessing required job skills, and meeting job performance requirements. The four characteristics in the area of socio-environmental supports were support from family and loved ones, support from a customer or client, support from coworkers, and support from a supervisor. As this was the first study to identify and categorize the characteristics of the WSE construct, additional research is needed regarding the stability of these characteristics.

Certain WSE characteristics may be more specific to people with disabilities than those without disabilities. In the work behavior category, the physical ability to do a task is likely to be more important to PWD’s WSE because disability, by definition, restricts ability. All of the socio-environmental supports may be more important to people with disabilities to those without disabilities. Preliminary evidence for this added emphasis on social support for PWD working can be found throughout the study participants’ case summaries. It seems unlikely that people without disabilities would care so much about their working being supported by so many different people, but additional research into how the characteristics of WSE may differ in people with and without disabilities is recommended.
The one characteristic that already exists in the literature regarding PWD and work is the intrinsic reward of working. Conyers et al. (1998) found that working helped PWD to feel more independent and less disabled. PWD viewed the main impediments to their achieving work as society’s attitudes toward their disabilities. Achieving work is a mastery experience, and Bandura (1997) states that two of the factors important in appraising successful completion of mastery experiences are the perceived difficulty of the task and the effort expended on the task. All of the participants in this study clearly expressed how difficulty it was to achieve and how much effort it took to maintain a working lifestyle. Thus, it seems reasonable to speculate that the intrinsic reward of working is probably more important to people with disabilities than those without disabilities due to them having more difficulty and effort involved in the process than those without disabilities. Further research is needed to verify this conclusion.

**Work Self-efficacy as Resilience**

An unexpected finding of this study was how each of the three participants’ descriptions of WSE development bore a close resemblance to resilience, defined as positive developmental outcomes despite adversity (Luthar, Cicchetti, & Becker, 2000; Masten, 2001). While not measured specifically in this study, factors known to be positively associated with resiliency shown by the participants in this study include high intelligence, social skills, support from adults, caring relationships with siblings, strong commitment to school, a positive attitude, good problem-solving and coping skills, and a motivation for a better future (Jenson & Fraser, 2006; Masten et al., 2004; McWhirter, McWhirter, McWhirter, & McWhirter, 2007). Each of the above factors could be
considered to be consistent with a particular component of Bandura’s (1997) SCT triad of person (cognitions and perceptions), environment (relationships with others), and behavior (performance of skills).

Bandura (1997) views the bond to a caregiver as a key to the development of self-efficacy, stating “Such caregivers offer emotional support and guidance, promote meaningful values and standards, model constructive styles of coping, and create numerous opportunities for mastery experiences” (page 172). In the case of the study participants, the primary caregivers were their parents. All of the participants discussed to some degree how they had emotional support from their parents, how they learned the value of work through their parents, how they modeled their parents’ coping styles, and how their parents provided mastery experiences. Carl had somewhat less parental support and bonding than Alice and Bill, however, which may explain some of the discrepancy between his longstanding resilience and his delayed WSE development. Further research into the similarities and differences, as well as developmental issues, of resilience and WSE are recommended.

In addition to the participants being influenced by their parents, self-efficacy theory postulates that they also likely exerted influence on their parents via their behaviors, which were likely influenced by their cognitions (Bandura, 1997). However, this reciprocal interaction process was not explored in this study, thus being a limitation of the study. Future research in the form of a complete case study where interviews are performed with all of the significant persons involved in one participant’s WSE development is therefore recommended.
Limitations and Directions for Future Research

One of the primary limitations of this study was the difficulty of finding a male and female participant that did not expect to go to work while growing up but did expect to work once reaching adulthood. This difficulty may be explained by a combination of three factors. The first factor is historical and the other two are related to self-efficacy theory. Each of these factors will now be briefly reviewed as a basis for future research.

The Individuals with Disabilities Education Act (IDEA) was passed in 1990, and it required that all students in special education, that is, those with disabilities, need to have a career transition plan included in their Individual Education Plan (IEP). This meant that students with disabilities began being asked about work during adolescence, thus forcing a socialization pattern that would result in the formation of outcome expectations that working was achievable, or at least possible, in their future. Research comparing generational differences of PWD’s outcome expectations would help illuminate this hypothetical change in attitudes.

How outcome expectations function as children develop is the first theoretical issue that may explain the difficulty of finding participants without the outcome expectation of work yet actually went on to work. In general, outcome expectations and actual outcomes tend to be strongly correlated in a variety of domains (see Bandura, 1997). Thus, in retrospect, it should have been anticipated that it would be difficult to find participants that met these discrepant criteria, yet there was nothing in the current literature that specifically forewarned of this discrepancy in PWD in regards to work. Therefore, future longitudinal research comparing the vocational outcome expectations of
PWD with their actual outcomes would be very helpful in deepening our understanding of this developmental process.

The second theoretical issue relates specifically to the problem in this study of not being able to locate a female participant with a discrepancy between childhood vocational outcome expectation and actual adult outcome. Research has shown there are differences in how males and females are socialized into work, with females having more social pressure to maintain stereotypical gender roles and more constricted career opportunities than males (Fitzgerald and Crites, 1980; as cited in Bandura, 1997). Thus, future research directed at comparing how boys and girls with disabilities are socialized into work and how their vocational outcome expectations and actual outcomes may vary by gender would be enlightening.

A secondary limitation of the study was that two of the participants never completed the WSE questionnaire, thus depriving the study of data that could have added valuable depth and detail. All participants were physically handed a hard copy of the WSE questionnaire at the conclusion of the first interview. It was explained to each of them at that time that the questionnaire was needed for interview number two, but Alice was the only participant to complete and return it. Bill and Carl were reminded about returning the questionnaire in subsequent interviews. Also, it was twice emailed to each of them as an attachment with the request to complete and return it, yet neither ever did so. Despite the absence of these data, the results of this study still yielded rich and useful detail. Future research protocols with so few participants need to address the problem of such a low questionnaire response rate by either structuring the completion of
questionnaires during time with the participants or incorporating questionnaire items into the interviews.

In addition, the reader is cautioned against generalizing the results from the present study onto larger populations. The present study was small and explorative. Beyond the above research areas that could provide depth to the current study, additional research into establishing and defining the specific construct of WSE is needed. Specific investigations are needed into the areas of the relative occurrence of WSE promoting and potentially inhibiting developmental experiences, the mechanisms and sources of WSE development, and the WSE developmental process proposed here. In other words, replication of specific aspects of this study’s overall findings is recommended. Furthermore, qualitative comparisons of WSE in PWD that are working and those that are not would be very beneficial. The creation of a valid and reliable quantitative WSE assessment tool would also be worthwhile. Should the above research efforts prove fruitful, there will also be research needed into developing WSE training programs and materials, which would need to be followed by research into the effectiveness of the curriculum in improving WSE.

Researcher Reflections

This report will conclude with a series of reflections regarding the study, and because these reflections will be personal a switch to first person narrative is in order. This was my first experience with extensive qualitative research, and in the process of completing the study I discovered a number of rewards matched with difficulties inherent for me in this method.
It was tremendously humbling yet rewarding to have complete strangers open their lives to me in intimate detail over an extended period of time. It was difficult not be moved by the three impressive people that participated in the study. But this also posed a number of difficulties. First, it was tremendously complicated to balance these stories against the rigor needed for theoretical research. Making the task even more complex was the fact, as stated in chapter 1, that I am a life-long person with a physical disability that is adding to my life story every day. These complications posed two potential problems: (1) during the interviews, I also had to constantly guard against sharing my history with the participants so as not to bias their responses; and (2) after the interviews, I had to constantly guard against letting my story bias theirs when creating and analyzing the case summaries. For the first problem I relied on my 20 years of professional rehabilitation experience and all my skills and experience as a rehabilitation counselor, and for the second problem I relied on my training in ethical research practices and the member check process.

My main point here is that the professional distance required during the overall process of interviewing and analyzing does not preclude a researcher from being personally involved, but the form of that personal involvement becomes more with the data than with the people that provide the data. The unique result of this process was that I felt rewarded by the people as well as the data.

Another difficulty, with matching reward, was handling the large quantity of data. Accurate transcription was absolutely essential in order to meet my goal of preserving the participants’ stories as faithfully as possible, and thus the process of transcribing was
long and tedious. Transcribing required a high level of concentration over an extended period of time. Some sections required repeated listening in order to make sure I had all the words and phrasings correct. Then, once the transcriptions were all completed, I had hundreds of pages of data to read over and over in order to try and make sense of it all.

It was at the point of reviewing all the voluminous data, however, that my reward for all the transcription effort became evident; because I had met personally with the participants and then listened so closely to their interview tapes, I could still vividly hear the participants’ voices in my own mind as I read through the transcripts. Instead of just words on a page, the transcripts became multi-dimensional to me. There is no substitute for spending time just staring at data, quantitative or qualitative, but I have found no substitute for being able to also “hear” data while looking at it. The ideal of being able to spend all the time I did personally interviewing and then transcribing so many interviews may not be achievable in the future when there are so many other professional demands on my time, but it is an ideal I intend to aim for whenever possible.

Here at the end I can say that I found the qualitative research process to be one of the most challenging tasks of my professional career, and because of that challenge I also found it to be especially rewarding. I plan on continuing qualitative research into peoples’ stories about their disability so that I can attempt to convey the richness that I find there to others in the hopes that they will learn to appreciate it as much as I do.
4 free movie tickets!!!*  

Research participants needed to help explore the career development of people with disabilities  

Do you fit this description?  
• 18-25 years old  
  o A life-long physical disability  
    ▪ Have a stable work history...  
  • Or have never worked at all  

Then please call Alan Larson at 795-2746, or email him at abl1@email.arizona.edu to see if you can participate and earn 4 free movie tickets (*or cash value, if you prefer).
APPENDIX B
Qualitative Interview Protocols
Interview #1 Protocol: RQ - What are the developmental experiences related to work self-efficacy for people with a disability?

QUESTIONS

Background
1) What did you want to be when you were growing up? Where did you get this idea? What happened to this goal?

2) What expectations regarding your future as a working person did you have while growing up? Where did these expectations come from?

Mastery Experiences
3) What chores, if any, did you have while growing up? How well did you perform your chores?

4) What school experiences did you have regarding your future as a worker?

5) What is your work/volunteer history?

Modeling
6) Please describe any visits you may have had to where a family member or friend worked. What did you do during these visits?

7) What exposure to people with disabilities did you have while growing up? What was your experience with them?

8) What is your first memory of a person with a disability? Where did you see them? Who were they? What were they doing?

Verbal Persuasion
9) What encouragement did you get from your family about your abilities while growing up? If they discouraged you, please describe this also. (Repeat question asking about friends and teachers).

Summation
10) What role do you feel your disability played in the issues we have discussed today?
Interview #2 Protocol: RQ - How do PWD describe their current work self-efficacy beliefs and behavior?

QUESTIONS

General
1) Is there anything you would like to add from our previous interview that you may have thought about since we last met?

2) How do you feel about work in general? What does work mean to you right now?

3) In your own words, please describe how effective you would be as a worker right now. Why do you feel this way?

Mastery Experiences
4) What activities do you do throughout the day? How effectively do you perform these activities?

5) What makes you feel productive? Why?

6) What do you feel are your strengths or skills?

Modeling
7) How much contact do you have with other people with disabilities that are working? (Repeat question asking about nonworking).

8) How do you feel about other people with disabilities that are working? (Repeat question asking about nonworking).

Verbal Persuasion
9) Who encourages you in your present lifestyle? How do they encourage you? How do you feel about that?

10) Who, if anyone, discourages you about your present lifestyle? How do they express their discouragement? What do they say or do? How do you feel about that?

Summation
11) What role do you feel your disability played in the issues we have discussed today?
Interview #3 Protocol: RQ - How do work self-efficacy developmental experiences for PWD contribute to later employment behavior and beliefs?

QUESTIONS

General
1) Is there anything you would like to add from our previous interviews that you may have thought about since we last met?

2) How do you think all of these experiences we have talked about over our past two meetings have influenced how you feel about your potential for being an effective worker right now?

Beyond the above general questions, specific questions for this interview will need to be individually determined based on a review and analysis of the earlier two interviews. The questions listed below are therefore to be considered generic in nature.

Mastery Experiences
3) How do you think the mastery experiences we have talked about over our last two meetings have influenced how you feel about being an effective worker right now?

Modeling
4) How do you think the modeling experiences we have talked about over our last two meetings have influenced how you feel about being an effective worker right now?

Verbal Persuasion
5) How do you think the verbal persuasion experiences we have talked about over our previous two meetings have influenced how you feel about being an effective worker right now?

Summation
6) What role do you feel your disability played in the issues we have discussed today?
APPENDIX C
Work Self-efficacy Questionnaire
Questionnaire

Name ___________________________________  Date _________________

Please answer the following questions in the space provided. You may use a separate sheet of paper if necessary.

1) Please describe your disability and how you feel it affects your ability to be an effective worker.

2) Please describe a recent problem you had and what you did to successfully overcome it.

3) Please describe your ability to maintain a regular work schedule. Give examples. If there are problems with maintaining a regular schedule, what are they?
4) If you have a job right now, please describe how well you get along with your coworkers. Give examples. (If you are not working, then describe how well you get along with your peers and what activities you do with them).

5) If you have a job right now, please describe how well you get along with your supervisor. Give examples. (If you are not working, then please describe how well you get along with authority figures).

6) Please describe what you feel are your most important or valuable work skills. How did you acquire these skills?

7) Please describe why you feel you can or cannot work effectively at a job right now?
REFERENCES


