

Addis Ababa University
School of Graduate Studies

***Assessment of Vocational Behavior of Persons with
Mental Retardation in Addis Ababa***



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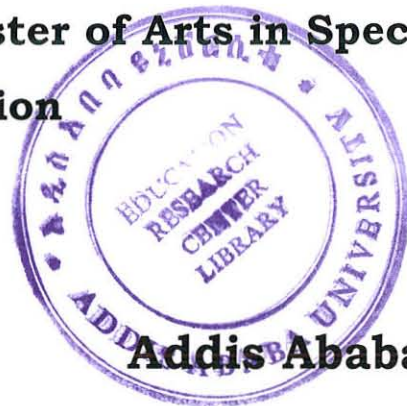
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***Assessment of Vocational Behavior of Persons
with Mental Retardation in Addis Ababa***

By

Kassahun Bogale Sirna

**A Thesis Submitted to the School of Graduate
Studies of Addis Ababa University in Partial
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Abstract

This study focused on assessing the vocational behavior of persons with mental retardation at center of mental retardation in Addis Ababa

The participants of this study were thirty two students (mild males=9, mild females=3, moderate males=12 and moderate females=8), six teachers, two principals of the center, and one Ministry of Labor and Social Affair team leader of persons with disabilities. Except the students all of them were selected using purposive sampling method; hence the students were selected by random sampling. Four data collection instruments were used, namely, competency rating scale, questionnaire, interview, and document analysis. In order to analyze the data both qualitative and quantitative analysis were used.

The result showed that in center of mental retardation there are ten varieties of prevocational adaptive skills and prevocational skills training given for students with mental retardation. The majority of the students were competent in these skills training, except in functional academics and petty trading; and their first vocational skill training choice was janitorial activity. Moreover, the performance on prevocational adaptive skill was correlated with prevocational skill training. On the other hand, the performance on these skills training analyzed by sex seems to appear in favor of males, where as in the case level of retardation, mild students performed better than those of moderate with some exceptions.

The results also showed that persons with mental retardation have higher rates of unemployment comparing with persons with and with out disabilities. In addition, the finding indicated that the main challenge of the implementation policy was financial shortage, lack of skilled persons, and lack of awareness.

This study concluded that students with mental retardation are able to perform different tasks of vocational skills training options with appropriate order and supervision. Despite this demonstration of competency, many persons with mental retardation are underemployed. However, few of them have job in non-governmental organizations Suggestions and recommendations based on this study are included.

Acronyms

MR	Mental Retardation
SOOM	Support Organization of Mental Retardation
CMCC	Center of Mentally Challenged Children
PVT	Prevocational Skills Training
PAS	Prevocational Adaptive Skills
D₁	Social Competency
D₂	Language Competency
D₃	Self-Care
D₄	Home keeping
D₅	Physical development & activities
D₆	Functional academics
D₇	Travel competency
D₈	Responsibility
D₉	Self- Direction
D₁₀	Safety awareness
PV-1	Tailoring
PV-2	Food Preparation
PV-3	Simple Trading
PV-4	Wood Work
PV-5	Painting
PV-6	Pottery
PV-7	Weaving
PV-8	Janitorial Activity
MOLSA	Ministry of Labor and Social Affairs
UNIEF	United Nation Children's Fund
AAMR	American Association of Mental Retardation
ILO	International Labor Organization
UNESCO	United Nation Education Science, and Cultural Organization
AAMD	American Association of Mental Deficiency

CHAPTER ONE

Introduction

Many researchers believe that children with mental retardation can benefit from vocational skills training. Since vocational education enhances the quality of life of those children by offsetting their limitations and, hence, they shall have the same right to get such opportunities as their non-retarded counterparts. In practice, however, this is not happening (<http://www.thearc.org/>). It is less likely that they get the appropriate vocational skill training to develop their career awareness and they are often discriminated from their age-peers. Therefore, it should be noted that it is possible to train and hire them (Drew et al., 1988).

At present, there is no local study conducted on the vocational behavior of persons with mental retardation in our country, Ethiopia. It seems that vocational skills training is not given much attention, although it is very important for the career development and creating job opportunities for all children with disabilities and children with mental retardation in particular.

In accordance with this, there is a transitional period of proclamation concerning the employment rights of person with disabilities Article 9(d) of the Charter of Ethiopia (editorial, 1994), it is proclaimed as:

A disabled person having necessary qualification shall, unless the nature of the work dictates otherwise have the right to compete and to be selected for:

a) a vacant position in any office or undertaking through recruitment, promotion, placement or transfer procedures

b) a training program to be conducted either locally or abroad[p.1].

In spite of this, children with disabilities in general and those with mental retardation in particular do not enjoy their rights because employers hesitate to recruit, train, and hire them for fear that such

children may not come to know how to accommodate their disabilities.

For the Ethiopian society, it may be difficult to apply this study, since there are no well-developed instruments to screen prevocational children to vocational skill training and employment. In addition, there is only two vocational and prevocational training centers in Addis Ababa.

It is in view of this gap that this study focuses on assessing prevocational adaptive skill and prevocational skill training, the kinds of the vocational training choice, and identifying job opportunities.

The report of the study consists of seven main parts. They are the Introduction [background, statement of the problem, objectives, significance, operational definition, and delimitation], the literature review, the research method and procedure [the sampling procedure, instruments, data collection and analysis], the results, discussion; the summary, and the conclusion and recommendation. The report also has references and appendices.

1.1. Background of the Study

Traditionally, the MR were excluded from vocational training services and they were assumed to be people created to consume services rather than supply them to their communities. Many of these persons were not considered capable of being employed until 1940's; they were rather considered as creatures destined to remain inefficient to have skill training. Drew et al. (1988) state that access to vocational training and employment for persons with MR has been negligible in the world's disabled history. Recently, however, it is realized that individuals with MR, if they have access to effective skill training and education, can be competitive for jobs. Accordingly, Beirne-Smith (1994) reports recent experiences of developed countries in giving prevocational, vocational and retraining opportunities for this target group. Nevid (1997) also indicates that especially those with mild retardation can acquire vocational skills and they can effectively support themselves through income-generation.

In the Ethiopian context, individuals with MR were mostly considered to be dependent on others throughout their lives. As a result, they have been denied opportunities of vocational training. MOLSA (1996) has noted that "All efforts shall be made to create opportunities for the youth to develop their abilities and become productive citizens making significant contributions to the development of the country". However, this statement rejects the right of MR children to benefit from appropriate and suitable vocational training in governmental vocational schools. Even if few non-governmental organizations are interested in giving training services for these children, the effectiveness of the training in making them assert their independence and secure employment for the future is apparently unsatisfactory.

The MOE (1997), annual statistical report on the state of education of children with disabilities has revealed that the number of children with mental retardation who participated in special classes in regular school setting was 218 and 0 from grade 1 to 6 and from grade 7 to 12, respectively. After grade 6 children with mental retardation need vocational skill training and education, but still government does not seem to give attention to open vocational schools for people with mental retardation. On the other hand, some non-governmental organization have recently opened this program. The well-known in this regard are Support Organization of the Mental Retardation (SOOM) and Center of Mentally Challenged Children (CMCC) in Addis Ababa.

In SOOM, the vocational training program was started in 1997 and, since then, has been providing training to children with mental retardation, and their mothers with the intention of making the former self-supportive. It is in the following areas of income generation activities that trainings are offered.

- a) Sewing
- b) Carpet making
- c) Embroidery
- d) Small-scale trades
- e) Weaving

So far, 140 children and 80 mothers have benefited from the project.

On the other hand, CMCC has adopted education program for children with MR and their parents in its children and youth care program (CYCP). As a result, the CMCC was founded in 1986 with the support of concerned international partner organization Kiner nothlife (KNH).

The program was first started at the Mekane Yesus Urael Child Day Care Center at Kasanchis area in Addis Ababa city. In 1995, part of the activities moved to the new multi-purpose training center of CMCC at Mekanissa. The center provides education for children with MR and their parents and gives life and work skills training for children with MR in sewing, embroidery and dyeing, gardening and animal rearing, petty trading (shopping), and local food preparation

Moreover, the center has prospects and plans to:

- enable children with MR to be integrated with their society.
- help them gain better awareness in the society through advocacy work
- work on job placement for children with MR
- embark upon new working programs with similar organizations
- boost life and work skills training
- participate in service delivery to the community.

1.2 Statement of the Problem

Individuals with mental retardation, like any other person have developmental tasks of achieving independence, selecting and preparing for occupations. They are able to perform different tasks of vocational skills training options with appropriate order and supervision, and hence they need to be helped to acquire vocational and social skills because choice of occupations is a critical life decision. But a number of barriers contribute to their low employment rate worth-mentioning are the fact that they do not receive sufficient vocational skill training and work; that they do not learn

about career options; and that they may not have experiences to develop appropriate social skills required for successful employment. In our country as well many such children don't find services in their community to assist them in securing employment due to different reasons.

Tirussew (1998) emphasizes that there are serious problems encountered by persons with disabilities in the area of employment. He indicates that there is “unwillingness of the management to hire persons with disabilities, mismatch between interest and job assignments”. This indicates that the rights of persons with disabilities are not respected even if there is a law promulgated to that prohibits their being discriminated.

Taking the above problems into consideration, the study attempts to address the following basic questions.

1. What are the types and performances of students with mental retardation with regard to prevocational adaptive skills and prevocational skills training?
2. What are their vocational skill training choices?
3. Do they get job opportunities and appropriate vocational skill training?

1.3 Objectives of the Study

Assessment of the vocational behavior of children with mental retardation will play a major role in improving and selecting the vocational skills that would change life situation for better, and hence integrate them in different work setting. The specific objectives of this study would, therefore, be to:

1. identify the kinds of prevocational adaptive skills and prevocational skills training and their performance as well.
2. identify their choices in vocational skills.
3. examine job opportunities & vocational skill training.

1.4 Significance of the Study

As indicated in the background of the study, in Ethiopia, little attention has been given to the study of vocational skills training or vocational behavior of children with disabilities in general and children with mental retardation in particular. It is therefore, necessary to study prevocational skill training, vocational training, and identifying job opportunities for children with mental retardation. In light of the above mentioned ideas, the study will have the following significances. The study shall:

- help to give information about the situation of vocational education and training , and job opportunities of children with mental retardation.
- create better awareness to teachers, principals and others who work with children mental retardation
- contribute to the improvement of vocational assessment instruments of the targeted and other similar centers.
- initiate others to conduct more rigorous research studies on the vocational behaviors of children with mental retardation.
- help the country to identify job opportunities for such people.

1.5 Operational Definitions

Vocational Behavior: the degree to which individuals acquire vocational skills that lead them to become competent for a certain type of work and way of life.

Prevocational Adaptive Skill Training: training on skills necessary for vocational capacity with emphasis to adaptive behavior as expressed in conceptual, social and practical adaptive skills.

Prevocational Skill Training: training on skills necessary for vocational capacity with emphasis to simple vocational skills training given in preparation for vocational training.

Vocational Skill: the particular skills necessary for success in specific profession, jobs or trades.

Mental Retardation: a disability characterized by significant limitations both in intellectual functioning and in adaptive behavior as expressed in conceptual, social and practical adaptive skills (Luckasson et al, 2002).

Assessment: a way of gaining some understanding of students [any individual for that matter] in order to make informed decision (Sattler, 2001).

1.6 Delimitation of the Study

The study is delimited to vocational skills training of students with mental retardation in vocational training schools of Addis Ababa. Currently, there are two vocational skill training centers for students with MR. This study is conducted on one of them called the CMCC which was purposely taken by the researcher. The source of the data for this research were principals of the training center, teachers of children with mental retardation, parents' representatives, MOLSA team leader of persons with disabilities, the students themselves, and center documents.

CHAPTER TWO

Review of Related Literature

2.1 Concept of Mental Retardation

The concept of mental retardation has been understood differently by different scholars at different times in different societies. For this reason, a number of terms are used to refer mental retardation. Currently, the most common definition, which is used in many studies on mental retardation, is the definition which was devised and regularly adjusted by the American Association of Mental Retardation, AAMR (the previous American Association on Mental Deficiency/AAMD/). In 1992, the AAMR published a revision of the definition of mental retardation. According to this revised definition:

Mental retardation refers to substantial limitation in present functioning. It is characterized by significantly sub average intellectual functioning, existing concurrently with related limitations in two or more of the following applicable adaptive skill areas: communication, self-care, home living, social skill, community use, self direction, functional academics, health, leisure, and work. Mental retardation manifests before age 18 (AAMR, 1992,p.12).

In communicating this definition, AAMR (1992) has pointed out the definition offers a functional perspective on mental retardation. The association defines mental retardation according to a person's functioning in daily life, through conceptual, practical and social intelligence. The definition focuses on the relationship among capabilities (cognitive, learning, and adaptive skills).

The definition also stressed mental retardation is the outcome of disabling circumstances. Accordingly, disability can be defined in the context of functional assessment. Broline (1995) states

that “A physical or mental impairment that substantially limits one or more of the major life activities of such individual.” Two important terms in this definition “substantially limits” and “major life activities”, have a direct relationship to the functional assessment process. Major life activities mean “functions such as caring for oneself, performing manual tasks, walking, seeing, hearing, speaking, breathing, learning, and working”. The term substantially limits means:

- a) unable to perform a major life activity that the average person in the general population can perform or;
- b) significantly restricted as to the condition, manner, or duration under which an individual can perform a particular major life activity as compared to the condition, manner, or duration under which the average person in the general population can perform that same major life activity.

With regard to the major activities of working “the term substantially limits means significantly restricted in the ability to perform either a class of job or a broad range of jobs in various classes as compared to the average person having comparable training, skills and abilities.”

2.2 Education of Persons with Mental Retardation

Educationally, children with mental retardation can benefit from attending school at the same time as average students, having access to school facilities, participating in extra-curricular activities, and following regular school rules and routines (Winzer, 1990). Ideally, each child is provided with the most beneficial services and the minimal amount of segregation. Tirusew(2000)indicates children with mental retardation may be placed in regular classes, self-contained class rooms, special day-schools, or residential schools. In each case, the child’s degree of retardation and adaptive behavior are the determining factors. Children with mild retardation are likely to be placed in the regular classroom, and to receive special help in the resource room. Children with moderate mental

retardation may learn in the regular class or in special self-contained classrooms; in the latter case, they would still be able to integrate with their non-handicapped peers for such non-academic subjects as physical education and art. Children with severe and profound mental retardation may learn in special classes, special schools, or in group homes. Fewer and fewer children are in residential programs.

Education of Students with Mild Mental Retardation

In early grades, children with mild retardation are taught readiness skills in such area as sit still and attend to teacher, discriminate auditory and visual stimuli, follow direction, develop language, increase gross- and fine-motor coordination, develop self help skills, and interact with peers in group situation (Hallahan and Kauffman, 1988). At the intermediate school levels, educational emphasis is placed on activities for every day life. These activities include functional reading, writing, and math. At the secondary level, students with mild retardation are taught personal-social adjustment and occupational skills along with basic academics. Work study experiences founded on the premise that there should be a cross coordination between school work and vocational experiences, play a major role in the secondary curriculum. Students are placed in work situations in the community, and their academic programs are oriented to supplement the work experience.

Although, many students with mild retardation are moving into regular class rooms, the competencies required by these children for successful academic and social integration remain elusive. We can perhaps say that if instruction in the class must accommodate differences in the child's learning ability, then the child must possess at least minimal competencies that are appropriate by the standards of the class room. In addition, exceptional student must stand accountable for their own social and academic behavior in the regular classroom (Winzer, 1989).

On the other hand, pupils with mild mental retardation are the largest group of retarded learners and possess probably the widest range of skills and needs. According to Shea and Bauer (1994), the advent of mainstreaming philosophies and practices has proved particularly advantageous for children identified as having mild mental retardation. In the past, these children were placed into special classes or classes for slow learners and too often condemned to live of unrealized potential.

According to Gearheart (1992), currently, the trend is to mainstream the student with mild mental retardation to what ever extent may be appropriate and yield success. Educational options depend on the child's unique set of strengths and weaknesses. A child's success in the regular class room depends on such factors as support services, resource-room assistance, curriculum modifications, acceptance by the other students, the class room teacher's experience with and exposure to exceptional children, and the availability of community sources.

Although, youngsters with mild mental retardation are prime candidates for integration into regular classrooms the measure of success would appear to vary with age level. Younger children acclimatize more rapidly to maintain setting than do older students. Integration at the secondary level is harder to implement. Not only does the mental gap between non-handicapped and retarded students continually widen with age, but the instructional emphasis at the secondary levels are in different forms than that of the elementary level. Generally, traditional secondary school subjects are not related to the future needs of mildly handicapped students and the over all curriculum is not congruent with their present wants. Preparation for independent living requires much more than academic goals for adolescents with mental retardation. Their hope is to work, not to continue schooling (Hallahan and Kauffman, 1988).

As a result, participation in regular class rooms often diminishes as students with mental retardation move into secondary setting. This was far more pronounced in the past when

conventional wisdom nearly always placed students with mild mental retardation into vocational or non-academic streams. Today, however, more of the intervention options available to elementary pupils with mental retardation are now open to adolescents-placement in regular classrooms, resource rooms and special classes within the regular school plant (Kirk et al., 1993).

Students with mental retardation need to function successfully in school, home, job and community settings. The major goal of education is not to compensate for intellectual deficiencies per se; rather, instruction is directed toward the development of critical skills necessary for adulthood for success in daily life, citizenship and a future career. Educational programs stress the most critical functional skills. Educational intervention is directed toward training pupils with mild mental retardation eventually to live and work independently in the general community. It, therefore, implies the maximum development of intellectual, personal, social, emotional, and motor skills necessary for vocational competence and independent living. Stress is placed on self-care, mobility training, communication, social interaction, academics, health and safety, leisure time and vocational pursuits (Ysseldyke and Algozzie, 1995).

According to Taylor and Rechard (1995), the actual curricular objectives will be the same for students with mild retardation as for their peers. Students require instruction in basic academic skills, personal and social competence, and occupational skills. Nevertheless, the stress and the pacing may be different. Most, if not all, students with mild mental retardation integrated into regular classrooms will be provided with additional help in the resource-room.

Although youngsters with mild mental retardation may consistently lag in academic areas such as reading, math, science and social studies, they can achieve adequately in terms of developing independence. Moreover, they learn in the same way as other pupils. Studies on the learning characteristics of children with mild retardation show that even if their rate of learning is slower and the level reached not as high, their learning curves approximate those of non-

handicapped pupils (Chauhan, 1989)

The problems faced by pupils with mental retardation in academic areas may be specific to one subject or generalized. Most often, pupils encounter problems across academic domains, with the most severe difficulties occurring in the area of reading(Gearheart,1992). Other areas identified as deficient-memory, attention, generalization, and motivation can be improved through appropriate instructional techniques.

According to Winzer (1990), at the secondary levels, students with mental retardation are given opportunities to learn a trade through high-school sponsored vocational training and on-the-job training in the context of full or part-time study programs. In addition, social, occupational educations as well as functional academics are also very important. And transitional programming, or the preparation of students with mental retardation for the world of work after secondary school, becomes critical.

One of the keys to students' with mental retardation achieving a successful transition after secondary school is the degree to which they have developed appropriate social skills. Brolin's (1993) career education model is an example of how curriculum content at the secondary level stresses the development of personal social skills, as well as the other "real world" skill related to daily living and occupational preparation.

Brolin's Career Education Model

Daily living skills

1. managing family finances
2. caring for home furnishings and equipment
- 3.caring for personal needs
- 4.raising children, family living

5. buying and preparing food
6. buying and making clothing
7. engaging in civic activities
8. using recreation and leisure
9. getting around the community

Personal social skills

10. achieving self-awareness
11. acquiring self-confidence
12. achieving socially responsible behavior
13. maintaining good interpersonal skills
14. achieving independence
15. making good decision, problem-solving
16. communicating adequately with other

Occupational guidance and preparation

17. knowing and exploring occupational opportunities
18. making appropriate occupational decisions
19. exhibiting appropriate work behaviors
20. exhibiting sufficient physical and manual skills
21. acquiring a specific salable job skill
22. seeking, securing, and maintaining satisfactory employment

Source: D.E Broline, vocational Preparation of persons with handicaps.

Education of Children and Youth with Moderate Mental Retardation

According to Taylor and Rechar (1995), children with moderate mental retardation, in the past, attended special schools. Although, these schools provided an appropriate curriculum, a controlled learning environment, and a suitable daily schedule, they also presented the major draw back of segregation. More often today, students who need special-education arrangements outside the regular class room are placed in small, self-contained special classes in the regular school. In these classes, they receive most of their academic instruction.

Functional independence is the ultimate goal of education for students with moderate retardation. Generally, the curriculum for children with moderate retardation is less academically oriented than for children with mild retardation (Hallahan and Kauffman, 1988). Teachers' present limited academic curricula with a stress on functional skills in the entire domain. In general, children with moderate retardation do not learn to read beyond the first grade level. Although, academics are not stressed, children are taught to read names, directions, and labels, and to write relevant names and words. They are also introduced to numbers, time and simple money exchange.

According to Drew et al. (1984), for students and young adults with moderate and severe mental retardation, the public school curricular are changing. Recent trends have been away from the specification of curricular goals on the basis of developmental age and toward instruction of chronologically age appropriate skills that students need to meet the demands of their community environments.

Deficits in student performance during the school years and beyond suggest that skill instruction is best conducted in real world settings, in the presence of non-handicapped people, and using naturally occurring situations and materials (Drew et al.,1988). Natural environments include stores, restaurants, public transportation, banks, and drug stores.

Much more emphasis is placed on providing students with skills that will enable them to function independently in a social and work environment. According to Hallahan and Kauffman (1988), two very important curriculum content areas are self-help skills and job related activity. Children are trained in such self-help skills as independent eating, dressing, toileting, washing, combing hair, brushing teeth, and using a handkerchief. They also learn simple home making skills, such as dusting, sweeping, setting and clearing a table, washing and drying dishes, washing and ironing, sewing, using simple tools, and telephoning. Children are also taught the safety rules and how to use public transportation.

Moreover, children learn communication which is designed to help the child develop the skills necessary for every day communication. Personal and social skills include consideration for others, common courtesy, obedience and self-judgment. Students also learn perceptual-motor and physical skills (Johnney, 1991). These include sense training in the visual, auditory and tactile modalities, eye-hand coordination, balance, and gross and fine motor movement.

Furthermore, the ability to care for oneself is fundamental in achieving independence and self-sufficiency in life skill training. Self-help skills have been divided into those related to eating, dressing, bathing, grooming and toileting (Drew et al., 1988). Older students learn about apartment living, marriage, family responsibilities, community resources, job preparation, including skills like locating job openings in news papers and displaying correct behavior during job interview.

Secondary education programs are more explicitly vocationally oriented and directed toward securing employment upon graduation. The functional nature of programming for pupils with moderate retardation places great stress on simple vocational skills. In many cases, such programs are operated in conjunction with sheltered workshops (Johnney, 1991).

Education of Students with Severe and Profound Mental Retardation

According to Taylor and Recharad (1995), the placement of students with severe and profound retardation in the regular schools is more difficult, however most students with mild mental retardation can be educated in regular class rooms.

Some educators argue that the limitation of these children prohibit normalized education and mainstream setting. They believe that youngsters with severe and profound retardation are best served in setting in which their cognitive development and social limitations can be addressed more intensively. On the other hand, opponents of regular school education for children with severe and profound retardation view main- stream settings as potentially harmful. Because, not only may the physical environment of the public school present difficulties but there is also a lack of medical intervention. Moreover, opponents argue that the regular school may inhibit the children's development by imposing education model and social demands which do not meet their needs. Skills should be taught in the environment where they are most likely to occur in the community, home or work setting (Beirne-Smith et al., 1998).

On the other hand, other educators do not believe in limiting the learning experiences of children with severe and profound retardation. They insist that these children are best served in integrated school and community settings (Mittler, 1993). These educators argue that students with severe and profound retardation should be educated in special classes throughout regular schools. This would integrate the children in all aspects of normal school and community life, offer them good role models, and foster their acceptance by normal peers.

Educators continue to struggle with challenge that students with severe and profound retardation present to the traditional frame work of education. Teachers must always keeping mind the criterion of ultimate functioning (Burack et al., 1998). They must not only stress the

development of basic skills, but also anticipate future setting and teach skills around these. Children should attain skills in areas commensurate with their wants and abilities and consonant with their limitations.

We must redefine the term education beyond its traditional academic limit, for children with severe and profound retardation. For these students, the major educational goals are to decrease dependence on others, increase awareness of environmental stimulation, teach basic communication and self-help skills, and push achievement levels higher. These children often require a range of other services, involving such professionals as doctors, speech therapists, social workers, and psychologists.

For children with severe and profound retardation, the training begins with the basic survival and self-help skills, along with the elimination of undesirable behavior. Repetition and simple conditioning are primary teaching strategies. At first, teachers focus on obtaining responses to environmental stimulation; these responses include head and trunk balance, sucking, swallowing, chewing, grasping, movement of body parts, and vocalization. Later training includes language acquisition, self-feeding, ambulation, dressing skills, toilet training, social, recreational behavior, and functional academics (Dolce, 1994).

2.3 Vocational Education

Historically, according to Mauricholt (1987), the first informal type of vocational education started by accident. The trial and error approach was the second. Finally, after many years as labor became socially required division of labor started. Vocational education that has formal and informal nature has a great contribution for the self- support and efficient working life. It is one aspect of education. Vocational education and vocational skill training are synonymous, and they refer to mean the organized educational programs, which are directly related to the preparation of

individuals for paid or unpaid employment people have learned to work, and earn in different ways. According to John and Sons (1987), the basic program components for vocational education are recognized as basic skills, specific job training, personal and social adjustment skills, career information, modified content in subject areas, and other job training.

Tirussew (2000) reveals that the growing emphasis on preparing students with skills is to function as independently as possible. Across a wide variety of domestic community recreational and vocational domains has heightened the need for students to learn there skills not only in specific teaching situation, but to be able to generalize them across appropriate non- trained environments, people, and activities as well.

2.3.1 Vocational Special Training

Vocational special training involves the development of some specific vocational skills. Students should be trained on basis of their present skill level, their interest, and projected job availability. Robert (1990) indicates that the major challenge in vocational education is to make sure that skills learned in a training setting will transfer to a real work setting, as well as be maintained after the student has graduated.

Different strategies and options are also used in the vocational special training of the individuals with disabilities by different countries and service delivery agencies. According to Sarkees and Scott (1986) in Dagne (2001), there seem to be a series of five vocational education delivery options. They are:

- a. regular vocational education programs** that allow learners / trainees to participate in the existing vocational programs on a full-time basis with slight modification to ensure success.
- b. adapted vocational education program** requires specific adaptations in the program, curriculum, teaching techniques and/or instructional materials for learners to experience successes.

c. special vocational programs, which are developed for learners who are unable to succeed in a regular vocational education program on a full-time basis. Instruction is usually provided in self-contained classroom. This program could have to be modified and individually prescribed to meet the specific needs of each learner.

d. individual vocational training programs are prescribed to meet the specific special needs of learners/trainees who can not succeed in regular vocational education programs. These programs are developed for learner whose disabilities are so severe that they are unable to participate.

e. prevocational training / evaluation programs are developed to provide learners with appropriate prerequisite skills for specific jobs.

Although, disability limits a person's ability to perform certain tasks in the same manner in which most non-disabled persons do. According to Heward and Orlansky (1988), all young students with disabilities who are in the process of school-to-adult life need to be trained and acquire an appropriate functional vocational skill training, which enables them to hold a job and earn a living.

Many special needs education writers agree that one of the basic tasks of special schools is to prepare the pupils for practical activity, and for their participation in a suitable productive labor. This task is to a considerable degree accomplished with the help of a system of vocational training, which allow the pupils to learn various trades which corrects and compensates for the defects of their mental and physical development (UNESCO,1973;Sarkees and Scott, 1988 cited in Dagne,2001).

In this respect, vocational training is highly considered, as the most helpful to the students with disabilities. Because it helps them to develop, and to engage in self-supporting productive work in their post school life. Adults with disability are able to merge into the community and work at a variety of semiskilled and service positions. Most can partially or totally support themselves.

The major goal of many persons with disability is to obtain and to hold a job. In this regard, Kokkola (1997) has stated that one of the main objectives of vocational special training is to provide vocational skill for independent living of the individual with disability.

In designing the content of vocational and technical training for individual with disabilities, the training must take account of the local labor market and industrial infrastructure. According to a UNESCO report (1974), the curriculum for vocational training in the special educational needs in Cuba comprised three main stages are in schools for children, the emphasis was on manual work in elementary workshops and educational excursion to productive centers; in schools for adolescents, prevocational workshops which is focused on enabling pupils to familiarize themselves with the materials, tools, and basic operations of machines; and in vocational schools, specific branch of work with greater stress on the vocational subjects like wood work, metal work, needle work, photography, gardening, art, carpeting, garment working, etc.

This indicates that training the young adults with disability in prevocational and vocational skills would be very significant and determinant for their future working life. Prevocational training is a training program, which is devised for the preadolescent children with disability. Kirk et al. (1993) states that for the preadolescent child, lessons often take the form of prevocational experience, focusing on the knowledge, and skills that are the basis for vocational competence.

Transition services are considered to be important in different transition stages of teaching every day living skills in combination with vocational skills. The transitional stages of young students from school-to-work life of the community are critical and depend on the good characteristics of the secondary school vocational education service programs. There are three stages of transitional instructional strategies of curricula that are indicated by Jefferson et al. (2001). They are:-

- a) **the curriculum must stress functional skills:** that is, students with disability must learn vocational skills, which they will actually need and use in local employment situations.
- b) **school- based instruction:** which must be carried out in integrated settings as much as possible, and;
- c) **community-based instruction:** which should also begin early at about age 12 for students with severe disabilities, and must be used for students with severe disabilities, and must be used for progressively extended periods of time as the student nears to graduation.

Moreover, handicapped students at secondary school level need to be trained and work in a certain proper special vocational skill to which the community gives value, and also that fits the interest and capacity of the student. This basic specific observable behavior often is the axis of the individual's special need education program that must be completed for all children with disability.

The development career awareness and special vocational skills should begin in the early years for children with disabilities as a form of prevocational training. Heward and Orlansky (1988) have also indicated that the establishment of the vocational skills training institution depending on the objective conditions of the special vocational training schools (centers) which can be established in special schools, or as a unit in the regular vocational training schools.

The underlying assumption of special vocational training program is that handicapped students need special help if they are to succeed in the normal world. Whenever possible, this special help is designed to teach handicapped students but through different or more intensive methods than non-handicapped students use.

According to Kokkola (1997) in many countries the objective and policy of the establishment of special vocational training is preferred to use the integration of special vocational units within the vocational training schools. In most cases, the special vocational units are integrated into ordinary trades units. These are also training institutes that the students share the facilities with

the "*mainstream*" students. Integration has been encouraged through awareness increasing workshops where special vocational training programs have been introduced to the staff.

2.3.2 Vocational Education for Persons with Mental Retardation

Vocational education programs in the public schools provide training in a variety of skilled occupations, helping some students graduate directly into employment. Students with mental retardation should have access to a range of vocational courses/ choices to develop skills for jobs and learn appropriate work and social behaviors through interaction with co-workers that occur naturally in a work setting. Students who have work experience in several kinds of jobs will be better able to make decision about the kinds of work they would like to seek when they leave school (<http://www.thearc.org/>). Schools can offer instruction and practice in the skills necessary to obtain a job. This will help students know what to expect and be better prepared whether they seek a job on their own or receive assistance from a community.

According to Beirne-smith et al. (1998), there are five phases in the special education and work program for person with mental retardation: vocational exploration, vocational evaluation, vocational training, vocational placement, and follow-up. These phases are incorporate into a work oriented special education curriculum of skill training experiences and job related classroom instruction (Hallahan and Kauffman, 1988). Vocational exploration, the first step, the student would be familiarized by the instructor with various occupations and the skill requirements. During this prevocational stage, two separate sets of assessment take place. One evaluation determines students' vocational capabilities and the types of jobs that may interest them. A job analysis is performed within the community, simultaneously. In the second phase, vocational evaluation, involves experiences with different job skills in the pupil's general area of preference. To help prepare for a variety of occupations, training covers a wide range of job skills, usually at the semiskilled level. In

the next stage of the program, vocational training, the person is exposed to a variety of actual on-the-job experiences under the supervision of the special education faculty. In vocational placement, an individual who has tried out several jobs for brief periods will then begin to seek permanent employment. It consists of locating a job for the student upon completion of training from high school.

The last phase, follow-up, prepares counseling to help the newly employed person deal with any difficulties encountered on the job. It may also involve further training or replacement if the student is unable to adjust to the assignment.

2.3.3 Vocational Education in Ethiopia for Children with Mental Retardation

The MOE (1997), annual statistical report contains adequate information about the state of education of children with disabilities. This statistical report reveals that the number of children with mental retardation who participated in special classes in regular school setting was 218 and 0 from grade 1 to 6 and from grade 7 to 12, respectively. After grade 6 children with mental retardation need vocational skill training and education, but still government does not give attention to open vocational school of mental retardation. On the other hand, some non-governmental organization opened this program. The well known are Support Organization of the Mental retardation (SOOM) and Center of Mentally Challenged Children (CMCC). In SOOM, the vocational training program started in 1997. It provides to children with mental retardation, and their mothers with intention of making this children self-supportive in following fields of income generating activities are sewing, embroidery, weaving, and carpet making and small trade.

So far 140 children and 80 mothers of children with mental retardation are benefiting from the project.

On the other hand, CMCC adopted education program for children with MR and their parents in its children and youth care program (CYCP). As a result, the CMCC was founded in 1986 with the support of concerned international partner organization Kiner nothlife (KNH).

The program first started with a day care center at the Mekane Yesus Urael child day care center in Kasanchis. In 1995, part of the activities moved to the new multi-purpose training center of CMCC in Mekanissa. The center provides education for children with MR and their parents and gives life and work skills training for children with MR in the fields of sewing, embroidery and dying, gardening and animal rearing, petty trading (shopping), local food preparation.

Moreover, the center has perspectives and future plan to:

- enable children with MR to integrate with the society.
- creat more awareness in the society through advocacy work
- job placement for children with MR
- new working with similar organizations
- intensify the life and work skills training
- service delivery to the community.

2.4 Assessment of Vocational Education

Assessment is more than testing. It is a systematic process of using information from a wide array of sources so educator and significant others can make informed decisions about their students (Sattler, 2001). It has become generally recognized in the field that there is a need to focus more instructional and assessment activities on the critical skills that students will need in order to compete in today and tomorrow's rapidly changing and demanding society.

According to Reynodes and Lesterman (1987), vocational assessment is a term that

encompassed the process undertaken in determining eligibility and appropriate program plans for students entering vocational education. It has been important component to career education effort for many years and is another functional assessment approach. Specific components and processes used in vocational evaluation include assessment of skills, aptitude, interest, work behavior, social skills, and physical capacity (Beirne-smith et al., 1994). Assessment of several work samples or tasks that measure functional skills such as gross and fine motor dexterity, color and finger discrimination, spatial aptitude, and other aptitudes that are important on various jobs (Broline, 1995) . According to Johnney (1991), dexterity and aptitude tests are used to assess the presence of motor skills that are thought to be related to job clusters. The underlying assumption is that if individuals possess specific motor skills, they may do well at a job requiring similar skills.

For individuals with disabilities to realize work potentials and identify existing pattern of applicable employment, evaluation must evolve from a focal point that systematically utilizes either real or simulated work experiences (Venn, 1994). Career development based on logical and analytical approaches to assessment is facilitated when observed patterns of behavior are formulated into a plan that will assist in employment choice and success. It becomes imperative that a system of assessment be established that identifies unique strengths and weaknesses and attempts to develop a comprehensive, viable work plan (Broline, 1995). The eventual goal is for individuals with disabilities to become more productive to adequately function in achievement - demanding work setting.

Work samples have been identified as the most popular assessment strategy used in vocational program today (Johnney, 1991). This method of assessment relies on tasks similar to specific job categories. An individual is given a series of tasks and his /her performance is compared to that of others. This procedure evaluates each individual's rate of production and general job-related behaviors. Broline(1995) has offered the following suggestions for making the most of this

procedure: The job sample or work sample should be written up and organized with the requisite tasks in rank order from the least to the most demanding. The students should be allowed to practice each task and learn it completely before proceeding to the next one; in this way, they can master each task necessary for the production of a particular good or service.

From the experience of Korea as stated by ILO (2003) shows that a vocational rehabilitation programs in the republic of Korea strive to become more competitive, the success of Eden house has made its training and production program a model for other institutions. Eden's success has also contributed generally to the growth of vocational rehabilitation in the country. In addition, by giving workers with multiple disabilities and /or intellectual impairments a chance to prove themselves, the program has changed public attitudes, with the proof in the popularity of the products produced by Eden house.

The facility in Eden house provides assessment and counseling for people with disabilities. It follows these steps in training and hiring process.

- Initial assessment.** The counselors assess the applicant's vocational abilities, including physical, daily living, language development, judgment and level of understanding. They also assess psychosocial traits, such as motivation, job-search capacities, and family back group.

- On-the job assessment.** After the initial screening, a prospective trainee is assigned to a production task for a month- long assessment of on-the -job performance. During that period, the vocational counselors and work site managers further asses the person's abilities and work with him or her on work habits and performance and help the prospective trainee determine his or her interests.

- On-the job training.** After completion of the above assessment, the official on the job training program begins. It includes a four-stage process that helps the trainee analyze work tasks, learn

specific subtasks, develop appropriate work methods and set a schedule. Gradually, the training team provides more technical training, monitors performance and helps the trainee increase his or her level of output, which is tied to wages. People who experience difficulty in adjusting to a task continue in the training program and rotate from one type of work to another until they find an appropriate task match.

•**Employment in the production unit.** Once a person has completed the on-the-job training, the counselors reduce their involvement in favor of a site manager who monitors workers. When a worker no longer needs the support of a counselor and thus has achieved a measure of independence, he or she signs an employment contract.

•**Wages.** Salary is based on productivity and is re-evaluated every quarter to ensure a compensation scheme that progresses with skills and output. In addition, workers receive a benefits package that includes medical, employment and industry disaster insurance as well as contributions to the national pension plan.

Eden house is working with employers to create new work opportunity for its clients by encouraging the employers to use Eden house services. To that end, through patience and support, it is possible to reach productivity. The following short history in Eden house revealed about Mr. Lee improvement (remarkable change) in all areas of his life as:

Yong-Jae Lee has Down's syndrome and autism. After completing primary school, he spent almost two years in an institution of people with severe disabilities. He came to Eden house six years ago with few skills and no employment experience. According to an initial assessment, Mr. Lee's judgment, understanding and ability to socialize were limited. Mr. Lee would not interact with anyone except family members. His physical abilities and health were good, and he could care for himself in terms of eating, dressing and managing his belongings. Even though he could not count and barely spoke, he could write. During his period of on-the job training at Eden house, Mr. Lee worked in the processing and

packaging unit. Because he is unable to count, he packed bags but required considerable assistance in completing his work and was reluctant to ask for help when he needed it. When the on-the-job training ended, Mr. Lee was assigned to the same unit and received the minimum wage, even though his performance was not up to the unit's standards. According to the staff, he continues to require guidance and support. But the staff's patience and support paid off. Gradually, Mr. Lee's Performance, ability to work independently and social skills improved. Once "given up for hopeless" by his family, according to Eden House staff, Mr. Lee now works regularly and has shown marked changes in all areas of his life. He spends much of his leisure time surfing the internet. Mr. Lee lives and works at Eden House where he hopes to remain [P.67].

2.5 Instruments of Vocational Readiness Skills

Vocational assessment instruments have been many forms, including rating scales, inventories, standardized tests, and test batteries. Rating scales and Inventories are the most common vocational assessment instruments. Such inventories can be purchased commercially or developed locally or may result from the modification of a commercially available scale. Information is collected through file review, staffing, interviewing, observation, test and work sample administration, and is used to respond to the questions on the scales (Sattler, 2002). According to Broline (1995), a number of standardized behavior rating scales assess various functional skills. Examples include the prevocational assessment, the vocational assessment, the Vineland Adaptive Behavior scales, and the AAMD Behavior scale. These instruments report reliability and validity studies and are norm-referenced.

The prevocational assessment covers 46 special school and work shop expectations arranged in 9 areas: attendance /endurance, independence, production, learning, communications skills, social skills, grooming / eating skills, and toileting skills. The inventory is supplemented by a

curriculum guide to assist in setting instructional goals (Bigge, 1999).

Vocational placement of person with mental retardation has been fraught with many challenges. To assess the vocational readiness of persons with mental retardation in these work environments, an instrument was designed for ease of use, to be handled by teachers in special education as well as those trained in vocational training and employment. The instrument contains a set of behavioral descriptions which every teacher would be familiar with. A set of simple instructions are provided to determine scores that easily position the assessee in category of employment for which he is likely to be best suited. An annexure details some of the methods to be adopted from testing in certain specific areas so that identical criteria are used by all examiners. The instrument is so constructed that a minimum level of behavior to be present for qualification of placement in a particular category of employment. A higher score than that means placement in areas requiring higher grades of work skills (cornelius and Buchmaini, 1998).

2.6 Job Opportunities for Persons with Mental Retardation

Rowitz (1992) indicates about employment out come data that show individuals with mental retardation can work successfully in community business when they receive specialized training and on going support services. The value that they can participate in real work in the community and the commitment to provide those services is essential for converting vocational services. Several factors will influence the degree and rate with which employment opportunities are developed.

- a) Financial support need to be reallocated to fund supported employment services for qualified individual with mental retardation.
- b) Direct service staff and program manager training work shops and resources must be made available for those facilities who are interested in changing their service delivery system.
- c) Research on facility convention projects needs to be conducted and disseminated on the federal,

state, local, and program level to assist with policy development and implementation.

- d) The criteria for program decision making must shift from professional opinion to feedback from the local business community and persons with mental retardation.

According to Drew et al. (1988), in developing transition programs for individuals with mental retardation, professionals are preparing those individuals to enter the world of work. Two different kinds of employment arrangements are usually available. These are:-

i. Sheltered Employment

The traditional job training environment for adults with mental retardation, especially for individuals who need significant levels of support, has been the sheltered work shop. A sheltered work shop is:-

a structured environment which enables people with mental retardation to learn necessary work habits receive training in particular skills, and eventually gain salaried employment either within the work shop itself or through placement in the community. Of course, each sheltered work shop is unique to the characteristics of the people served, the local community, and the administration and workers (Mercer and Payne, cited in Hallahan and Kauffman, 1988,P.88).

In these work shops, clients work on contract jobs. These contract jobs are short duration, and a staff person is needed to bring in new ones. The facility may or may not provide vocational assessment and training for persons outside the center.

According to Beirne-smith et al. (1998), with recent emphasis on transition planning and integration of individuals who are severely disabled into competitive work setting, the concept of the sheltered work shop has come under fire criticism centers around its segregated approach to employment, low wages, and general failure to move clients effectively into competitive work

environment. The trend is to use non sheltered employment options.

ii. Competitive Employment

Competitive employment for persons with mental retardation can be described in terms of three service alternatives: a) employment with no support services, b) employment with time limited support and c) employment with on going support services.

a) Employment with no support services

Persons with mental retardation may be able to locate and maintain a community job without any additional support services from agencies. The individual finds a job independently either through contracts or through such sources as family source, their own effort job service etc. For person with mental retardation, competitive employment without support is possible if adequate training and experience are available (Winzer, 1987).

b) Employment with time- limited training and support services

Williams (1991) indicates after completion of training school, person with mental retardation may have access to several services on a short term basis, such as vocational education, on the job training, etc.

c) Employment with support services / supported employment/

The vast majority of persons with moderate and severe mental retardation can work in competitive employment. However, some times support for retraining, contingency management, or crisis intervention is typically needed- support that is seldom available in the truly competitive work setting (Burack et al., 1998).

In general, students with MR like any other normal adolescent need to acquire education and training for the task of independence, and selecting and preparing for occupation. To qualify

them for occupation, they must possess a significant functional strength to living or working.

The key to a successful vocational assessment is the accurate identification of functional strength and limitation and the determination of reasonable accommodations that can minimize or eliminate the identified limitations. Hence, this study deals with the vocational assessment of students with MR and the next chapter will present about the method and procedure part.

CHAPTER THREE

Research Method and Procedures

3.1 Research Method

A descriptive method employing both quantitative and qualitative approaches has been applied to conduct the study. Hence, this chapter presents the sampling procedure including area sampling and methods of selection together with data sources. A description of the tools and data collection techniques used and methods of organization and analysis is also presented.

3.2 Sampling Procedure

3.2.1 Area Sampling

As indicated in chapter one, though children with mental retardation need vocational skill training and education in Ethiopia, still the government does not seem to have attention to open vocational skill training center for them. It is only some non-governmental organizations in Addis Ababa which are engaged in offering such services. Two of them are Support Organization of Mental Retardation (SOOM) and Center of Mentally Challenged Children (CMCC).

It was planned to carry out the pilot study at SOOM. However, in this organization there was no a prevocational special classes as well as different options of pre/vocational skill training such as food preparation, wood work, etc. So, the researcher decided to conduct both the pilot and the main study at CMCC. Hence, the sample center was selected using purposive sampling method due to these reasons.

3.2.2 Data Sources and Method of Sampling

The data were collected from five important sources, namely, students with mental retardation, teachers, principals, parents, and MOLSA team leader of persons with MR. According to Nema

(2000), in Ethiopia, children are labeled as mentally retarded by their teacher based on their limitations in adaptive behavior skills. However, in CMCC children are labeled by their physical characteristics, educational level, and performance on adaptive behavior. In this center, children with mild mental retardation are equipped with academic skills at elementary school level and exhibit high performance in adaptive skill training. Their physical appearances do not make them differentiate from the non-retarded peers. Children with moderate mental retardation, on the other hand, show less academic and adaptive skills performance, as well as their physical appearance may make them easily differentiated from non-retarded children of their age groups. For instance, one could easily identify those with Down syndrome from the facial feature. Accordingly, the actual curriculum objectives will be the same for students with mild retardation as for their peers and they require instruction in basic academic skills, personal and social competence, and occupational skills (Winzer, 1990). Hallahan and Kauffman (1988) also stress that children with moderate mental retardation do not learn to read beyond the first grade level. They are taught to read and write relevant names, directions, and labels, and words. Generally, the curriculum for children with moderate retardation is less academically-oriented than the one designed for children with mild retardation (Tirussew, 2000).

Generally, in CMCC, children with MR are labeled by the following criteria:

- performance on adaptive skill training
- academic level
- physical appearance.

The pilot study was carried out on 8 students from prevocational special classes in the school/center. The sample class was also selected using purposive sampling method. Out of 40 students with mental retardation, 8 were selected by random number table. To obtain these students,

the names of 40 students were put into an alphabetical list and were assigned consecutive numbers from 1 to 40. However, educable males, educable females, trainable males, and trainable females were separately listed and random selection was made on the basis of the proportions. Therefore, the researcher selected 8 (educable males = 2, educable female=1, trainable males=3, and trainable females =2) students for pilot study and 32 (educable males = 9, educable females=3, trainable males=12, and trainable females =8] for the main study.

Six teachers and two principals who have been having constant contact with the children and a MOLSA team leader of persons with disabilities were also purposely taken as major informants.

3.3 Instruments

a) Competency Rating Scale

In line with Broline (1995), the Competency Rating Scale (CRS) was developed with the philosophy that teachers who work closely with the students can fairly accurately assess their competency level, given helpful and appropriate guidelines. The CRS manual provides these guidelines. It also helps to identify who should do the ratings and when they should be done, and provides criteria for the ratings, a rating key defining numerical rating values, and demographic information. Fifty eight major competencies contained within the two curriculum areas [prevocational adaptive skills and prevocational skill training] have been identified in this study. They were taken from Broline (1979), Cornelius and Ruchamani (1998), Nema (2000), and CMCC documents.

The pilot study was meant to create work relationship with care givers or teachers of the center, improve the research instrument, and assess the relevance of instruments designed to collect data for the study. This was done with the intention to avoid ambiguity, irrelevance, and

misunderstanding in each item. Copies of the instruments were given to two graduate students of special needs and the advisor as well. They were asked to give their reactions on each item of the instrument. Using relevant comments and suggestions gathered from them, some corrections were made. After the refinement of the instrument, the pilot study was conducted on the following two scales:

i. Prevocational Adaptive Behavior Scale

According to Broline (ibid), prevocational assessment and curriculum guide (PACG) covers workshop expectations arranged in different areas; attendance /endurance, independence, , learning, communications skills, social skills, grooming/eating skills, and toileting skills. Similarly, Luckasson et al. (2002) associate these areas with adaptive behavior to those social and daily living skills that people use to effectively function in their everyday lives. These include skills in such areas as communication, social interactions, taking care of oneself, monetary management, and using transportation, among others. Various tests of adaptive behavior assess skills by either observing the individual in situations where these skills are acquired, or by interviewing those who know the individual well.

The items of prevocational adaptive behavior were prepared in the form of a four-point rating scale ranging from not-competent [0] to highly competent[3]. The scale composed of 38 competencies (items) with sub competences and it was administered for the pilot study to the pilot samples and the reliability of each of the competencies was found to be highly reliable except in the following areas (Domain 4 = 0.65 and Domain 9 = 0.35)[see appendix v]. An item analysis was also carried out and mean scores of the upper and the lower groups of each item were compared. Based on the item analysis, a total of 25 sub-items have less discriminating power and these items were either zero or negative discriminating indices. Among these 15 were modified or edited, and the rest

10 were discarded (They were repeated and irrelevant). After the pilot refinement of the items, the scale of the main study has turned out to be highly and relatively reliable [see appendix v].

ii. Prevocational Skills Competency Scale

Broline (1979) mentions about types of prevocational activities which comprise decoration, wood working, class play responsibilities in getting ready for performances, making easter eggs, and painting. The activities are effective in building physical manual skills, work habits and behaviors, and personal social competencies. The prevocational skills competencies included under this study were tailoring (Pv-1), food preparation (Pv-2), simple trading (Pv-3), woodwork (Pv-4), painting (Pv-5), weaving (Pv-6), pottery (Pv-7), and janitorial (Pv-8).

The items of prevocational skills competency scale were prepared in the form of a four-point rating scale ranging from not-competent[0] to highly competent[3]. The scale consisted of 20 competencies with sub competencies. During the pilot study, the reliability of the items was established. For example, investigating the overall feature of the instrument, cronbach alpha reliability was calculated. The following reliability coefficients were found for each competency [$\alpha_{Pv-1} = 0.85$, $\alpha_{Pv-2} = 0.73$, $\alpha_{Pv-3} = 0.76$, $\alpha_{Pv-4} = 0.74$, $\alpha_{Pv-5} = 0.91$, $\alpha_{Pv-6} = 0.52$, $\alpha_{Pv-7} = 0.6$, and $\alpha_{Pv-8} = 0.86$]. Based on this pilot study result, an attempt was made to make the instrument more reliable. The sub items were found to discriminate the two groups, so that 20 of the items were either zero or negative discrimination indices. By taking those items that have the lowest item reliability index and as per the criteria of editing statement, 15 of them were modified /edited and the rest 5 were discarded because they were repeated and irrelevant. Finally, the scale of the main study reliabilities was increased (See appendix v).

b) Questionnaire

In addition to the above instrument, a close ended questionnaire was administered to teachers to

collect information on their students' interests and performances in vocational skills training which helps to screen students from prevocational to vocational skill training level. The questionnaire contained only two items and under these items, there were two tables. So, the teachers were informed to fill by putting a tick [✓] mark along with each student's performances and interests in their prevocational skills training.

The questionnaire was piloted to check whether it could generate the desired information. In this respect, the instrument was given for the thesis advisor to comment on the content validity. Finally, the instrument was improved based on his suggestions and recommendation. The same questionnaire containing only two items with two tables was then administered to both the pilot and the main study.

c) Interviews

The interview guide used in this research was prepared in order to focus on the vocational skill training as well as the job opportunities for students with mental retardation. So, to obtain adequate information, a multiple method [triangulation] approach was preferable. The methods employed included interviewing three groups of data sources, namely, parents' representatives, principals of the centers and MOLSA team leader of persons with disabilities. They were interviewed on same issues ,that is, on vocational skill training and job opportunities of persons with MR. According to Gall et al. (1996), triangulation is the process of using multiple data - collection methods, data sources, analysts, or theories to check the validity of findings.

The items were first prepared in Amharic by the researcher based on the review of literature and the researcher's experience in the problem area .Then, the draft items were given to language expert to comment on the clarity of the items. After necessary corrections were made, the items were given to an English language expert for translation and for further improvement.

After a thorough examination of the interview contents, the instrument was tried out in a pilot study. From the pilot study, a lot of useful ideas on the framing, wording and mode of asking has been gained. Accordingly, three items, which the mother can answer together with one of the question, were cancelled.

The interview guide for mothers of students contains 5 questions. This in general focuses on vocational skill training and job opportunities. The average interview time was one hour with parents of students with MR. This was done with a minimum of five days since it was hard to find those parents due to their personal reasons.

The second interview guide was prepared for principals of the center who have been supervising the target children selected for the study. The interview guide contained 7 items and most of them focused on vocational skill training and employment opportunities. The average interview time for the principals was 30 minutes for each.

Finally, opinions of the MOLSA team leader about job opportunities and implementation of national policy were gathered which contained 4 items. The average interview time was 30 minutes and it was conducted within a single day.

d) Document Analysis Guide

This guide was used to investigate the background of the center activities; it is currently involved in as well as its long-term objectives and missions. This was made possible by using written materials, magazines and brochures available in the center.

3.4 Data Collection Procedure

The result of the pilot study was found very helpful for the improvement of the competency scales, the questionnaire, and the interview questions. With regard to the instruments, some loaded, and

redundant questions, vague as well as irrelevant items were found and improved accordingly.

In this pilot study, the three instruments (competency scale, questionnaire and interview questions] were administered to the teachers, center principals, and the MOLSA team leader of the persons with disabilities. The scale was rated by the teachers who are believed to know the individuals better than any body else. 15 days were spent both for interviewing and rating the scale, 30 days were expended for the main study during the data collection.

The required data was collected in four ways; which were questionnaire, rating scale, interview, and document analysis. Primarily, information about prevocational adaptive skills and prevocational skill training, vocational skill training choice, and job opportunity of students with MR was collected and organized.

The actual study was conduced and the researcher collected data from the teachers of the students with MR. The teachers have rated the prevocational adaptive skill and prevocational skill training competency scales. More over, they have given their opinions about the vocational skill training choices of the students. Parents, principals of the center and the MOLSA team leader of persons with MR have provided information about vocational skill training and job opportunities of those targeted students.

3.5 Procedure of Data Analysis

In this study, quantitative and qualitative research methods were employed. The steps in analyzing the data involve tallying, tabulating and categorizing the collected data based on the objective of the study.

Then after, the data collected from the interview and the document analysis were interpreted qualitatively, and that of the questionnaire and rating scales were presented and analyzed quantitatively using mean, percentages and t-test.

CHAPTER FOUR

Results

The results of this study have been presented and discussed under different themes including types of prevocational adaptive skills and prevocational skills training, performances on these skills, vocational skill training choice, and job opportunities of persons with MR.

4.1 Types of Prevocational Adaptive Skills and Prevocational Skills Training

In CMCC, students attend classes full day from Monday to Friday. Since the 2005/2006 year, the center has started a one year long new prevocational skill training program for prevocational students. The prevocational adaptive skills trainings are given under the themes of social competency, language competency, self-care skill, home-keeping, functional academics, physical development and activity, travel competency, responsibility of handling of equipments, self-direction, and safety awareness. The prevocational skills are tailoring, food preparation, simple trading, woodwork, gardening and animal rearing, painting, pottery, janitorial activities, weaving, and dying.

In the above-mentioned year (2005/2006), eight prevocational skills trainings, other than gardening and animal rearing, and dying; ten prevocational adaptive skills have been given.

4.2 Performances on Prevocational Adaptive Skill and Prevocational Skill Training

Efforts have been made to assess the prevocational adaptive skills and prevocational skills training through percentage and t-test.

The percentages of competency on performance of the students in prevocational adaptive skills training is presented below. The table depicts the percentages of the students' performance according to their level of competency. This competency was rated by the teachers during data collection.

Table 1: Competency of the performance in P.A.S by domains, and level of retardation

P.A.S domains	Level of retardation	Highly competent		Competent		Partially competent		Not competent	
		No	%	No	%	No	%	No	%
D ₁	Mild	11	92	1	8	-	-	-	-
	Moderate	4	20	14	70	2	10	-	-
	Both	15	47	15	47	2	6	-	-
D ₂	Mild	4	34	7	58	1	8	-	-
	Moderate	2	10	9	45	7	35	2	10
	Both	6	19	16	50	8	24	2	6
D ₃	Mild	12	100	-	-	-	-	-	-
	Moderate	17	86	3	14	-	-	-	-
	Both	29	90	3	10	-	-	-	-
D ₄	Mild	11	92	1	8	-	-	-	-
	Moderate	9	45	7	35	4	20	-	-
	Both	20	63	8	25	4	12	-	-
D ₅	Mild	11	92	1	8	-	-	-	-
	Moderate	13	65	5	25	2	10	-	-
	Both	24	75	6	19	2	6	-	-
D ₆	Mild	4	34	1	8	6	50	1	8
	Moderate	-	-	3	15	6	30	11	55
	Both	4	13	4	13	12	38	12	38
D ₇	Mild	7	58	5	42	-	-	-	-
	Moderate	5	25	3	15	10	50	2	10
	Both	12	38	8	25	10	31	2	6
D ₈	Mild	11	92	1	8	-	-	-	-
	Moderate	5	25	10	50	4	20	1	5
	Both	16	50	11	34	4	13	1	3
D ₉	Mild	12	100	-	-	-	-	-	-
	Moderate	7	35	6	30	5	25	2	10
	Both	19	59	6	19	5	16	2	6
D ₁₀	Mild	10	84	1	8	1	8	-	-
	Moderate	5	25	8	40	5	25	2	10
	Both	15	47	9	28	6	19	2	6

Note: No of educable=12 Total=Both=32

No of trainable=20

As table-1 could indicate, students performance in social competency functioning (D₁) was about 47% [92% educable and 20% trainable] of them were highly competent while 47% [8% educable and 70% trainable] of them need slight support to manage social activity. On the other hand, few of them, particularly three trainable students were partially competent in greeting, assisting, participation in social activities, group functioning, as well as tolerance to criticism.

The students' performance in language competency (Domain 2) showed that most of them to be in a good position. About 19% and 50% of the students highly and competently manage both verbal and non-verbal communications respectively. This has been manifested in facial expression, speech mechanism, construction of letters, speaking, and conjunction of words, among others. However, 24% of them show partial performance; still there are also two trainable students who exhibited severe language and communication deficit. For instance, they couldn't express their feeling be it orally or in writing. In addition, 10% of the trainable, and 8% educable students were highly and partially competent, respectively.

As regards domain 3, 90% [100% educable and 84% trainable] of the students highly managed self-care skills, such as toileting, personal hygiene, dressing and eating. Few of them, particularly three trainable students, need slight support to perform them.

The findings on their performances in home-keeping (Domain-4) indicate that substantial number of them 63%[92% educable and 45% trainable] manage high performance in home living, where as about 25%[8% educable and 35% trainable] of them were competent to perform the activity. However, four trainable students exhibited difficulty in order to do home keeping [living] activities like cleaning home, washing clothes and house hold utensils, participating in simple food preparation as well as in other chores independently.

According to the data in table-1, about 75% [92% educable and 65% trainable] of the students highly performed physical development and activities, (Domain 5), which involve sensory

activity (hearing and seeing), motor activity, eye-hand coordination and eye-foot coordination. On the other hand, 19% [25% trainable and 8% educable] of them performed the activity competently; while two trainable students have partial performance in motor activity and in eye-hand and eye-foot coordinations.

In functional academics (Domain-6), most of them (about 76% of the students) exhibit deficits on academic activities. Particularly 38% of them were not competent in identifying letters, numbers, and writing and reading numbers, words and computing simple arithmetic (like simple addition and subtraction). On the other hand, 13% of them performed highly, where as 13% of them were competent. Besides, 34% of the educable students were highly competent; while 8% of the educable and 15% trainable were competent. 8% of the educable and 55% of trainable students were not competent.

With regard to travel competency, the data showed that 38% [58% educable and 25% trainable] of the students exhibited sound travel competency and 25% [42% educable and 15% trainable] of them were competent to move from point to point. It was about 31% of them who exhibited partial travel competency. Two trainable students exhibited severe travel competency. For instance, difficulty in using public transport, lack of taking safety measures in using transport and difficulty in following directions and sign boards were exhibited.

Regarding their responsibility of equipment in domain 8, about 84% of them performed above average. Among these 34% of them were competent. Whereas few (about 16%) and among them, particularly two trainable students exhibited deficits in shouldering responsibilities. They were found to be careless and inattentive to activities like caring for personal property, family's owning, friend's belongings, and public properties, chairs, books, etc. 92% educable, and 25% trainable students were highly competent. 8% educable and trainable were competent.

As it could be observed from table-1, about 59% [100% educable and 35% trainable] and

30% trainable students were highly competent, and competent in the management of self direction (Domain-9) respectively. However, 25% of the trainable students show deficit in this domain. Specifically, two trainable students show severe deficit in self-direction. The deficits involve lack of taking initiatives and interest in work or play, in coordinating others or being coordinated by others. It also includes lack of perseverance, attention and concentration.

With respect to safety awareness [Domain 10], the students' performance in this area showed that 47% [84% educable and 25% trainable] of the students were highly competent in awareness of hazards but 28% [8% educable and 25% trainable] need slight support to be aware of hazards. On the other hand, 19% [8% educable and 25% trainable] were partially competent; while the rest two trainable students hadn't exhibited competency.

Besides, percentages of competency on performance of the students in prevocational skills training is presented below. The table depicts the percentages of the students' performance according to their level of competency. This competency was rated by the teachers during data collection.

Table 2: Competency of the Performance in P.V.T by domains, and level of retardation

PVT	Level of etardation	Highly competent		Competent		Partially competent		Not competent	
		No	%	No	%	No	%	No	%
PV -1	Educable	9	75	1	8	2	17	-	-
	Trainable	7	35	4	20	7	35	2	10
	Both	16	50	5	16	9	28	2	6
PV-2	Educable	10	84	1	8	1	8	-	-
	Trainable	4	20	3	15	10	50	3	15
	Both	14	44	4	13	11	34	3	9
PV-3	Educable	6	50	-	-	4	33	2	17
	Trainable	-	-	5	25	2	10	13	65
	Both	6	19	5	16	6	19	15	46
PV-4	Educable	6	50	1	8	4	34	1	8
	Trainable	8	40	6	30	2	10	4	20
	Both	14	45	7	21	6	19	5	15
PV-5	Educable	7	58	2	17	3	25	-	-
	Trainable	1	5	12	60	6	30	1	5
	Both	8	25	14	45	9	27	1	3
PV-6	Educable	9	75	2	17	1	8	-	-
	Trainable	2	10	9	45	6	30	3	15
	Both	11	34	11	34	7	22	3	10
PV-7	Educable	7	58	2	17	2	17	1	8
	Trainable	1	5	7	35	6	30	6	30
	Both	8	25	9	28	8	25	7	22
PV-8	Educable	12	100	-	-	-	-	-	-
	Trainable	14	70	1	5	5	25	-	-
	Both	26	81	1	4	5	15	-	-

Note: No educable=12 Total=Both=32

No trainable=20

From the data in table-2, 50% [75% educable and 35% trainable]of the students showed that they were highly competent ;while 28% of the sampled students were competent in tailoring (PV-1). On the contrary, 16%[8% educable and 20% trainable] of them performed partially and particularly two trainable students couldn't cope with folding papers in three lines, folding different kinds of cloth, sewing, cutting cards with scissors and making knots and untying ropes.

It is observed from table-2, that 44% [84% educable and 20% trainable] of the students with MR performed highly in (PV-2) where as 34% exhibited better performance in food preparation. On the other hand, only 13% [8% educable and 15% trainable] were partially competent; and three trainable students showed nil competency in peeling fruits and making slices of bread with a knife.

Concerning simple trading (PV-3), most of the students (65%) with MR displayed deficit in simple trading. And about 46% [17% educable and 65% trainable] of them showed severe deficit in counting, changing and adding cents and birr in realizing marketing concepts and honoring morality. 34% of them performed above average in (PV-3), particularly 19% [50% educable and 0% trainable] of them were highly competent in petty trading.

With regard to woodworking (PV-4), 45%[50% educable and 40% trainable] and 19% of the students were highly competent and competent in wood working activity, respectively; where as 21% and 15%[8% educable and 20% trainable] of them showed severe deficit and particularly 15% of them displayed deficit in smoothening of wood work.

The data showed that many student with MR (about 45% [17% educable and 60% trainable]) exhibited deficit in painting [PV-5]. They were found to be unable to paint by crayon, and water-color painting. The best reference would be one trainable student .However, 25% of the students were highly competent while 27% were competent in [PV-5].

In clay making [PV-6], 34% [75% educable and 10% trainable] and 22% of them exhibited above average performance. The results were highly competent and competent respectively. On the contrary, 34% [17% educable and 45% trainable] of them and particularly, three trainable students showed problems in making a shaping a cup using mud.

As regards [PV-7], about 25% [58% educable and 5% trainable] and 25% of them were highly competent and competent in weaving, respectively. On the other hand, most (25% and 22%

[8% educable and 30% trainable]) of them were partially competent and not competent, respectively. For instance, knowledge in weaving and making a weaving design.

When we see the students' performance in janitorial activity (PV-8), it showed that most of them seem to be in a good position. About 81% [100% educable and 70% trainable] of them highly managed the activities, while some students (25%) of them need slight support to perform the activity. Particularly one trainable student was partially competent in knowledge of cleaning, cleaning different parts of the house and using equipment, cleaning gardening places and surrounding, and collection of rubbish.

On the other hand, an attempt was also made to check if there could be feasible correlation between prevocational adaptive skill and prevocational skill training. The correlation between prevocational adaptive skills and prevocational skills training are presented below.

Table 3: Correlation between prevocational adaptive skills and prevocational skills training

Code No	Skills	Correlation		t-value
		1	2	
1	Prevocational A.S	1.00	0.86*	0.55
2	Prevocational Skills		1.00	

*P< .001

As observed from table 3, correlation between prevocational adaptive skill and prevocational training is 0.86, which is statistically significant at 0.001 level.

Further, this study attempted to see the performances of the students on prevocational adaptive skills and prevocational skill training by level of retardation. A t-test was used to see whether or not there is a statistically significant difference in the performance on prevocational adaptive skills and prevocational skill training by level of retardation. The next table presents this

Table 4: Performance on P.A.S and P.V.T by level of retardation.

Skills	Mild			Moderate			
	N	\bar{x}	\bar{s}	N	\bar{x}	\bar{s}	
P.A.S	12	85.3	3.2	20	61	17	7.40*
P.V.T	12	81.5	24.0	20	52	17	5.55*

*p < .001

As shown in table 4, the result of the t-test indicated that there is a statistically significant difference in P.A.S and P.V.T between the two levels of retardation at 0.001 level. The observed t-value was 7.40 for P.A.S and 5.55 for P.V.T. Hence, the mean of performance of students with mild mental retardation on P.A.S and P.V.T was 85.3 and 81.5, respectively. On the other hand, the mean performance of students with moderate mental retardation on P.A.S and P.V.T was 61 and 52 respectively. These results indicated that students with mild mental retardation performed better than student with moderate mental retardation in both skills training.

So as to find out gender differences on P.A.S and P.V.T, an attempt was made to see whether there is statistically significant difference on P.A.S and P.V.T between female and male students. The result is given in table 5.

Table 5: Performances on P.A.S and P.V.T by sex

Skill	Male			Female			t-value
	N ₁	\bar{x}_1	\bar{s}_1	N ₂	\bar{x}_2	\bar{s}_2	
P.A.S	21	72.7	16.2	11	61.1	15.7	1.38*
P.V.T	21	68	23.2	11	53.5	17.4	1.98*

*p>0.05

As clearly observed from table 5, the mean performance of female on P.A.S and P.V.T was 61.1 and 53.5 respectively, and for males, it was 72.7 and 68 ,respectively. So the observed t-value for P.A.S and P.V.T was 1.38 and 1.98, respectively.

Hence, there is a statistically significant difference in the performance on P.A.S and P.V.T between female and male students. This indicates that males performed better than females on both skills training.

4.3 Vocational Skills Training Choice

Teachers were made to identify the vocational choice of the students by the abilities /activities and interests of their students for future working life. Table -6 summarizes the vocational choice of students with mental retardation.

Table 6: Vocational choice by performance, and teachers' nomination

Skills	Performance score	Teachers nomination by interest[%]	Teachers nomination by performance[%]
Janitorial	86	38	38
Painting	58	13	13
Wood work	32	10	13
Food Preparation	73	9	9
Simple trading	35	6	6
Tailoring	73	3	3
Weaving	52	6	3
Clay-making	60	3	3

As shown in the above table-6, the teachers have nominated 64% of their students' abilities for joining vocational skill training, in their respective orders, were janitorial activity, painting, and wood work, whereas concerning their interest on vocational skill training, 61% of them were interested in janitorial, painting and wood working. In students' performance on prevocational skill training the first three were cleaning, tailoring and food preparation. Other different vocational skills were also identified. Specifically, teachers have pointed out their students' interest in the following vocational skills areas with their respective order as janitorial (38%), painting (13%) and wood work (9%). They have also nominated the students according to their potentials and abilities to engage in vocational skill training and janitorial work was found to be the most popular. Painting and wood work appear to be similarly popular although not as popular as janitorial. The performance on prevocational skill training results also indicated that the students performed 86, 73, and 73 on janitorial, tailoring and food preparation respectively. The

table that showed vocational interest and performance were related in such away that the students' performances of prevocational skill were highest in the order in janitorial, painting and wood work which was nominated by their teacher while their interest on these areas were the same respective order. The table has also depicted that janitorial as the first order of choice of the students with respect to their performance, teachers nomination by interest and performance.

4.4 Job Opportunities and vocational skill training

Interviews were conducted with three groups of people to get detailed and reliable information on the job opportunities& vocational skill training of persons with MR. An attempt was made to gather information and their understanding from these groups of people. They were parents' representatives, principals of the center, and MOLSA team leader of persons with disabilities.

Parents' understanding on job opportunities& vocational skill training

Three parents (mothers) representatives of children with MR have reported in general about vocational training as well as job opportunities of their children. They reported to have meetings, discussions, and trainings about issues on prevocational adaptive skills, prevocational skill training and job opportunities held in the center. They have participated different workshops as well.

First, the parents were asked about their children's improvements on prevocational adaptive skills and prevocational skill training. They all have mentioned that they exhibited improvement on daily living activities like toileting, dressing, personal hygiene, feeding, and tooth brushing; in home related activities such as cleaning a house, washing clothes and properly using household utensils. The interviewees believe that these activities would help the students to be independent in work activities and to improve their motor coordination and the like as well.

Regarding prevocational skill training, the parents responded that the children showed

encouraging performances on the prevocational skill training. The first mother has, for example reported as follows:

Without exaggeration, I can say that my daughter has shown promising performance in janitorial activities without any help. She can work on the entire home activities such as cleaning the utensils, washing all household clothes, grooming rooms, making bed, etc. Surprisingly, she has been able to do all these activities the same quality as her non-retarded brother and sisters did. However, supervision is obligatory for her.

The 2nd mother also has responded like this:

My child is working with me in all activities in my shop. She sells simple goods and responds to consumers according to their needs, even she helps me by purchasing goods that cost up to birr 50 from other shops. However, she needs order and some help; and particularly she has difficulties in selling goods of more than three items simultaneously. But I hope that she will master it after the completion of the training.

The above information is in line with the response of the principals of the school as well as the MOLSA team leader of persons with disabilities. According to them, they can perform different work activities but they need supervision from the beginning up to the end of that work.

The center has given training to the children and parents as well. The parents altogether revealed that the center trains them with our children in different options of training like, wood work, painting, and weaving, etc. They all agreed that the training that was given to them will help them in making the students productive in the community. However, the first parent has said that Ethiopian parents including her were leading a life more complicated by the prevalence of poverty and other psychosocial problems, which makes it difficult to help their children as required by

creating a better work atmosphere. The parents have all added that, as the center trains their children in different fields, so they need jobs according to their fields of training. Hence, the center as well as the government should work on this rather than leave the student as the burden of the parents. As to them it is better to search and design job opportunities and to work in cooperation with MR students as well as with the non-retarded group of individuals.

Asked about parents' expectation of the kinds of support the government shall offer to their children to get job opportunities, the third parent said this "My child can perform woodwork with the non-retarded, particularly by smoothening wood, supplying materials, and other simple activities in a work shop in the neighbor hood.

She also added that if he gets support from governmental organization to participate in woodwork shops with non-retarded individuals, then he would gain experience as well as reduce the burden on the parents. The rest two parents replied that if the government aimed to support their children, there are different governmental and non governmental organizations in Addis Ababa that are engaged in woodwork, janitorial works, packaging, printing, dying, and the likes. They reported that their children were discriminated and employers hesitate to hire them even if they have the ability.

Perception of the principals of the center on the job opportunities& vocational skill training

Their responses of the interviewed principals were almost similar. Therefore, their responses have been clubbed together and are reported in the following way. The principals of the center were asked different questions on vocational skills training and employment placement of persons/students with MR in general.

They have indicated that those students whose academic performance is believed by the center to be better than that of the other, they are considered mild. So, these children required both

academic and vocational skill training in an integrated way. However, the kinds of vocational skills training given is not similar the one offered for individuals without mental retardation. More focus given for the latter on simple rather than complex skill training. The vocational skill training given to them include tailoring, food preparation, and others.

The principals have also mentioned that the students need supervision to perform activities, otherwise they do them continuously. If students get enough supervision, the principals are confident that they can be hired in any organization as a janitorial, housekeeping, printing, and other jobs equally with individuals without mental retardation. Besides, these students can perform in sheltered workshop in weaving, woodworking, and the likes.

Regarding job opportunities for these students after the completion of their training; the principals have said that the center has given training to the children as well as the parents. It is believed that the training helps the children to be competitive in home activities and gives knowledge to the parent on how to train them. Besides, the training helps the parents to create job in the home environment and in the communities as well. The center has also played a crucial role by making contacts with other non-governmental organizations. This organization hired few numbers of students. However, the center officials appear to be seriously disappointed by the government (Addis Ababa administration) concerning the placement of the students. They said that” The government aims only to create job opportunities for youth to develop their ability and become productive citizens making significant contribution to the development of the country”. However, this statement denies the rights of MR children to benefit from getting appropriate and suitable job opportunity from the government even if few non-government organizations hired few persons with MR.

Apart from these, they have reported that Ethiopia is one of the countries that have ratified the United Nations Convention of the Rights of Children. The country has also designed a policy of

creating job opportunities, and has opened its door for those service providers in regional bureaus. The major problem lies in the implementation of the policy.

As to the principals, therefore that all organizations (governmental or non-governmental) should work together in implementing the policy and creating job opportunities of students with MR.

Opinion of the MOLSA team leader of persons with disabilities on job opportunities

The MOLSA team leader was asked about different issues on job opportunities of students with MR.

He said that the two well-known centers, SOOM and CMCC, have problems on creating job opportunities. He added that non-governmental centers have responsibilities not only in training but also in placement. Otherwise, "what is the advantage of training without creating job?" he asked.

He has said that these centers couldn't give qualified training that help the trainees get employed in different organizations. The major reason that impeded activities of the centers were rather lack of vocational skilled and competent special teachers, proper curriculum of the training, and incentive to the teachers, etc.

After completion of the training, the trainees can't compete with the local market job, because they need consistent support from their organization and particularly from the families. The support may be rehabilitation in opening workshop (sheltered employment). However, persons with mild mental retardation can compete with other non-disabled students for job posts that don't require high academic performance or educational levels. He said he has had his observation/experience in Japan and this was what he said about that:

In Japan, children/persons with MR worked in sheltered work shops. They

participated in works such as making bags, printing, and bakery. In the market the bags that they made were, for example the leading sellers in the market.

That is why; he argued if we rehabilitate these students with enough support, they can help themselves and the country at large.

According to the leader, if we compare trainees with MR with those of other disabilities such as visual and hearing impairment, the former have low employment opportunity. This is because they have lower educational background as well as lack of social skills. Few of them have, however, secured jobs in wood working shops and other non-government organizations.

Asked about the ILO (2005) Quote Schemes for equal employment opportunities for all disability with legislation, he emphasized that employers are obliged to ensure that a certain percentage (a quota) of their work force is made up of people with disabilities. Ethiopia is one of the countries that ratified the ILO convention, so this Quote Scheme is under study to be interpreted in Ethiopian context, he indicated.

Concerning the employment policy of students with MR, he said their duty is that to design policy and create strategies on how to implement the policy. Therefore, MOLSA sends the policy to governmental and non-governmental organizations such as Addis Ababa administration, regional bureaus, etc. However, it is believed that there are problems in implementing the policy when it goes from regional bureaus downwards to kebele level. This is due to lack of financial support, skilled personnel, and awareness.

CHAPTER FIVE

Discussion

The objective of the present study was to assess the vocational behavior of students with MR. This chapter deals with discussion of results. Accordingly, the first section discusses the types of prevocational adaptive skills and prevocational skills training, and the second section discusses the performances on these two skills. The third and fourth sections treat the vocational skill training choice and job opportunities of persons with MR respectively.

5.1 Types of Prevocational Adaptive Skills and Prevocational Skills Training

It is important for people with or without disabilities to have education and training to be able to work. However, disability limits a person's ability to perform certain tasks in the manner most non-disabled do. To overcome or minimize this problem, special schools provide special needs education to enable this group become effective (Kokkola, 1997).

Like other forms of special needs education, training for children with mental retardation was introduced in Ethiopia a few decades ago. As a result, there are few non-governmental and governmental special school for children with mental retardation in the country (MOE, 1987). Among these, there are two vocational skill training centers. In this study, the researcher took CMCC for some reasons (See Page 43).

The results of the study show that the CMCC provides vocational skills training to students with mental retardation and their mothers with the intention of making these children self-supportive in the following field areas. The varieties of prevocational adaptive skill training areas in this center include social competency, language competency, self-care skills, home keeping,

physical development and activity, functional academics, travel competency, responsibility of using equipment, self-direction, and safety awareness. This goes with what Broline (1995) has indicated. That is, the prevocational assessment and curriculum guide (PACG) covers workshop expectations arranged in different areas; attendance/endurance, independence, learning academics, communications skills, social skills, grooming /eating skills, and toileting skills. Besides, Luckasson et al. (2002) also associate these areas with adaptive behavior to those social and daily living skills that people use to effectively function in their everyday lives. These include skills in such areas as communication, social interactions, taking care of oneself, managing money, and using transport among others.

The center has also delivered varieties of prevocational skill training such as tailoring, food preparation, simple trading, woodwork, painting, weaving, clay making, and janitorial activities. This agrees with types of prevocational activities which Broline (1979) mentions. They comprise decoration, wood working, and class play responsibilities in getting ready for performance, making eggs, and painting. They are said to be effective prevocational activities to build physical manual skills, work habits and behaviors, and personal-social competencies.

The center should train these students according to the local market demand. Surveys of local business and industry should reveal potential jobs for the students (Rowitz, 1992) and they have to indicate not only types of jobs available but also what jobs are most often available. In the Ethiopian context, the center can also include trainings that reflect market needs such as masonry, bench assembly, farm laborers, bottle packaging, etc.

5.2 Performances on Prevocational Adaptive Skills and Prevocational Skills Training

The adaptive difficulties in mental retardation come from limitations in daily living and social skills

(Luckasson et al., 2002; AAMR, 1992; Drew et al., 1988). According to such sources, daily living skills are central to practical abilities as sensory motor skills, self-care and safety skills where as social skills include social interactions, communications; and others.

The findings of this study on prevocational adaptive skill and prevocational skill training of persons with mental retardation indicate substantial agreement with the findings of former studies carried out by various scholars like Tirusew, 1998; and AAMR, 1992; Drew, et al., 1988; and Broline, 1995.

As the finding of the current study on social competency has indicated, the majority of participants are highly competent. Few of them, particularly two trainable students need much support in greeting, assisting, participation in social activities, group functioning as well as tolerance in criticism. According to AAMR (1992), individuals with MR may have significant limitations in the ability to comprehend social behavior, including difficulty in informing personal cues through role-taking and difficulty in inferring situational cues in interpersonal transactions. Drew et al., (1988) have also indicated that adolescents with mental retardation lack the necessary social sophistication that non-retarded children gain by observation. So many individuals with MR are unable to plan and carry out different social activities successfully. However, Nema (2000) indicates the changes observed in the domain of social maturity of such children seem encouraging. The children who were locked in behind doors are getting the opportunity to interact with peers and teachers, being stimulated by the latter to practical social life. Although this has not been proved empirically, this and related factors may have possibly facilitated the change.

According to Broline (1995), personal-social skills are critical for successful performance on most jobs. Skills in this area include getting along with others, taking criticism, accepting supervision, making vocational decisions, knowing proper behavior, respecting the rights of others, following directions, and being honest and loyal. He adds that lack of personal-social skills the

major factor for the down fall of all individuals in work and other settings no matter how competent the individual may be in other skills. Besides, Robert (1990) has reported, effective social skills appear to be necessary for employment maintenance, and there is ample evidence that most job terminations are due to lack of appropriate social skills rather than the actual work performance. When we see the findings of this study, the majority of them are highly competent in this social competency, as well as have performed well, in the following prevocational skills training areas such as PV-1 (78%), PV-2 (81%), PV-3 (38%), PV-4 (63%), PV-5 (52%), PV-6 (56%), PV-7 (50%), and PV-8(96%). Hence, these students can be hired/employed according to their competencies.

Certain jobs seem to require much better social behavior than others. Robert (ibid) has found out that social behaviors were deemed more important for kitchen helpers and food service workers than for janitors, dish washers and maids for the reason that some job (For example kitchen helpers) take place in a social context where workers frequently interact with co-workers and customers. Accordingly, two trainable students show deficit in social activity so that they can engage in prevocational skill training (janitor, painter, etc) that do not need frequent interaction with other.

Regarding student's performances in language competency, the results have shown most of them seem to be in a good position. About 19% and 50% of the students highly and competently managed, respectively, and this was the case both for verbal and non-verbal communication like in facial expression, speech mechanism, construction of letters, speaking, listening, and conjunction of words. However, 24% the students showed partial competency. Still there are also two moderate students who exhibited severe language and communication deficits. For instance, they could not express their feelings and needs in either oral or written language. Tirussew (2000) has revealed that students with mental retardation exhibit poor language skill and fail to understand directions,

communication needs, express ideas, listen attentively, and modulation voices in their school life. Nevertheless, according to Nema (2000), remarkable change was observed in the language and communication aspects of the students and most of them properly manage spoken and written language. In this study also only very few (two trainable students) exhibited severe language and communication problems. Their poor psychosocial and economic environment has possibly attributed for the deficits. It is true that children, especially at their early age development, gain a lot from warm, interactive and affectionate family environment. Literatures also confirm this (Tirussew, 2000; and Kirk et al, 1986).

According to Drew et al (1988), instruction in expressive language and some degree of writing proficiency may also be necessary to enhance communication and vocational independence. These skills range from the basic ability to write one's name to the more complex task of filling a job application form. Receptive skills are also needed for daily conversations and job interviews.

The data on self-care skills performance indicates that (90%) of the students have highly managed self-care skill such as toileting, personal hygiene, dressing and eating and few of them, particularly three trainable students were competent to perform them. There are studies which support the result .For instance, Nema (2000) has revealed that (87%) of the children included in the study have showed substantial improvement in self-care skills such as self-dressing, self-feeding, drinking, toileting, etc. Apart from this, in order for an individual to be employable, the student needs to attain a great many self-help skills such as toileting, self-feeding, dressing, and grooming (Hallahan and Kauffman, 1988).

Concerning, home-activities, the findings indicated that substantial number of them (63%) exhibit high performance; about 25% of them need slight support and four students exhibited difficulty in order to do activities like cleaning home, washing clothes and household utensils, and in participating in simple food preparation as well as in other chores independently. Similarly,

Nema (2000) indicates the student's performance in domestic activities seems slightly above average (57%). According to Broline (1995), the attainment of home-living skills can lead to many occupational possibilities. Some of them are house keeping, press cleaning, cooking, and laundering. In this study, the students performed well in prevocational skill training such as janitorial activity (85%), food preparation (57%) and painting (70%). Hence, these skills training could create better job attaining possibilities.

Regarding physical development and activities the results revealed that majority (75%) of the students exhibited high performance, 19% of them perform the activity with slight support, while two trainable students have partial performance in the activities such as motor activity eye-hand coordination, and eye-foot coordination. On the contrary, Tirusew (2000) explained that students with MR show a lag in their motor and physical development. Besides, in motor areas, they perform below the standards of non-retarded children (Bruininks, 1977 in Winzer, 1990). However, according to the information gathered through from the observation and parents and teachers almost all have improved to the extent of not being differentiated from other children without mental retardation (Nema, 2000). Still Tirusew (2000) believes that students with mental retardation can increase their efficiency in their motor activities if structured training programs are consistently scheduled as part of their school days. Obviously, the coordination of fine motor skills and visual tracking (eye hand coordination) is a prerequisite to object control skills that are required in vocational situations.

In functional academics, about 76% of them exhibited deficit on academics activity. Particularly, 38% of them exhibited sever deficits in identifying writing and reading letters, numbers, and words; and in computing simple arithmetic like simple addition and subtraction. However, 13% of them perform with high competency and 13% of them were competent. This study has shown contradictory results to previous findings. For instance, Nema (2000) indicates that

the performances in academics seem slightly above average. About 67% of them attempted writing Amharic letters, words, short sentences, computing simple addition and subtraction. On the other hand, Tirussew (2000) supports current study since it indicates that students with mental retardation have a slower rate of mastering new academic skills, and without appropriate intervention, they fail increasingly behind. The rest of the students performed well in the sense that performance of educable ones is remarkably better than that of the trainable children. Apart from these, the intended outcomes for a functional arithmetic program are generally basic management of personal finances, consumer skills, and others. Consumer skills include both the identification of coins and bills of all denominations and making change (Drew et al., 1984). According to Broline (1995), this functional academics leads to job possibilities such as being a clerk, stock person etc. In relation to this, only 38% of the children in this study performed well in petty trading.

The data on travel competency showed that 38% of students had sound travel competency and 25% of them were competent to move from point to point. It was about 31% of them who exhibited partial travel competency and two trainable students exhibited severe travel competency. This was the case in using public transport, taking safety measures in using transport and in following directions and sign boards. On the contrary, according to Drew et al. (1984), transportation is a problem for many teenagers with mental retardation. However, through training most of the children use public transportation but still two trainable students still exhibited difficulty because of lack thorough training. The ability to use public transportation may be important not only for social but for vocational reason as well (Drew et al., 1984). This ability is even more important for those who experience inconvenience in their attempts to commute between home and places of employment (Broline, 1979).

Regarding their responsibility in using equipment, about 84% performed above average, whereas few students (about 16%) and particularly two trainable ones exhibited deficits in

shouldering responsibilities. They were found to be careless and inattentive caring for personal property, family's owing, friend's belongings or government's (school's) properties like chairs, and books, etc. These results were supported by Nema (2000), which reveals that the majority of them exhibited good performance in responsibility. However the partial competency of the two trainable students exhibited in lack of responsibility for equipment maybe due to lack of access and stimulation for appropriate practices. This could be attributed to both from the family (mainly parents) and the school or the teachers.

When we see self-direction, Beirne-Smith et al. (1994), in their study of variables influencing work success for individuals with mental retardation have found out that personality characteristics appeared to influence performance and out put to a greater extent, and self directions was the personality characteristics that showed relationship to the performance level. In this study, the findings indicated that 78% of them performed above average and 22% of them performed below average. Specifically, two trainable students show severe deficit in initiation and interest in work, in coordinating or being coordinated by other and in perseverance, attention, and concentration.

In the case of safety awareness skill training, most of them were aware of hazards. However, 25% of them exhibited problem in safety awareness that includes lack of awareness in fire hazard, sharp and dangerous objects, and in electrical or traffic hazard. Two trainable students show severe problem. Similarly, Cornelius and Ruchmani (1998) have revealed that for the students to be categorized in competitive employment, they should score more than 75% in the competency scale items of safety awareness.

In sum, the performances of the students show that they have performed well in most aspects of the prevocational adaptive skills and prevocational skill training, particularly in independent functioning of self help skills or activities, physical and motor activities, and janitorial

activities.

According to Nema (2000), possible reasons for low performances could possibly be lack of good family role model and warm psychosocial home atmosphere that stimulates the child to develop self esteem and practice all sorts of activities helpful for personality development, economy/finance of the family, knowledge or orientation about the condition and handling the children with mental retardation from the family side, adequate training and absence of incentives or encouragement of any sort for teachers training the children with mental retardation, access for proper practice because of lack of space (Playground, rooms, toilet, water service), material provision and trained human power, etc., and clarity of the activities of this domain.

5.2.1 Correlation between P.A.S and P.V.T

The result showed that the correlation between P.A.S. and P.V.T was 0.86, which was statistically significant at 0.001 level. This significant relation might indicate that the variables are dependent on each other. The finding is in line with findings of studies such as Broline, 1979; Drew et al, 1988; and Tirussew, 2000.

Adaptive skill areas are those daily living skills needed to live work and play in the community (<http://www.theare.org>). According to Broline (1979), acquisition of these skills can lead to vocational possibilities for the student. Drew et al. (1988) has stated that the coordination of the fine motor skills and eye-hand coordination is a prerequisite to object control skills that are required in vocational situation. The kinds of jobs available to individual with mental retardation depend, of course, on the level of their adaptive behavior and training (Hallahan and Kauffman, 1988).

5.2.2 Comparison between the Performance on P.A.S and P.V.T by

Level of Retardation

The difference in performance on prevocational adaptive skill training and prevocational skill training between the two levels of retardation was compared by a t –test.

The results showed that there is a statistically significant difference between the two levels of retardation (mean score of P.A.S= 85.3 and of P.V.T= 81.5 for the mildly mentally retarded whereas for the moderately mentally retarded it was 61.5 for P.A.S and 52 for P.V.T) at a level of 0.001. Hence, in general, this result indicates that, in both skills training students with mild mental retardation performed better than those with moderate mental retardation.

There are studies that are in line with the present finding. For example, Nema (2000) has reported that, in adaptive behavior, students with mild mental retardation performed better than students with moderate mental retardation. In relation to this, Tirusew (2000) has indicated that children with moderate mental retardation have IQs between 35 and 49, and their adaptive capacity is more seriously impaired compared to the students with mild mental retardation. Specifically, according to Winzer (1990), students with moderate mental retardation are less academically oriented than children with mild retardation. Teachers present limited academic input with a stress on functional skills in all domains. Hence, academic areas are not stressed. Children are taught just to read names, directions, and labels, and to write relevant names, and words. They are also introduced to numbers, time, and simple money exchange.

Drew et al. (1988) have indicated for the students with mild retardation, academics may be of higher priority than for students with moderate mental retardation. This is because individuals with mild retardation may be able to better assimilate functional academic skills into their daily lives and vocational activities. Given that adolescents with moderate retardation have a somewhat

diminished capacity for applying academic tools to daily living, these students may require more emphasis on adaptive skill training.

On the contrary, table 1 and 2 show that few trainable students exhibited high competency compared to the educable ones in different domains of P.A.S and P.V.T. For instance, in social competency, 20% trainable student were highly competent, where as 8% educable were only competent. In language competency 10% of the trainable ones exhibited high competency, while 8% of the educable were partially competent, etc.

It is clear that children with mental retardation cannot easily understand things around their environment. For this reason they need relevant and consistent training to achieve or to be able perform necessary adaptive skills. So, these students were gathered from different settings (from their home or other training centers). Some of them have got enough training, where as the others have not. Basically, they can be trained these skills not only in the center, but also from the family or community. Accordingly, Tirussew (2000) explains that adaptive skills as well as reasoning and judgment about one's environment is mastered through experience. And, hence additional disabilities, age differences, and other related factors may possibly facilitate the process and they are factors for high competency of trainable students than the educable yet, this has not been proved empirically.

5.2.3 Gender Differences of the Performances on P.A.S and P.V.T.

As indicated in chapter 4, there is no statistically significant difference b/n males and females on the performance in both P.A.S. and P.V.T. at 0.05 level. This may happen because some of the skills training have been given in the center are preformed in their home. For instance, home keeping, food preparation, and janitorial activity. In connection to this, Tirusew(2001) indicates

that girls with disabilities including mental retardation are exposed to an extended domestic labour such as home keeping not only for the family but also for people in their neighborhood.

On the contrary, other studies have come up with a different general result on these skills training (Smith and Luckasson, 1995; Shea and Bauer, 1994; and Nema, 2000). For example, Shea and Bauer (1994) reveal that females do less well in the areas of P.V.T that lead to employment

5.3 Vocational Skills Training Choice

In prevocational skill training area, vocational choices, although not 100% similar, can be more specifically directed towards vocational skill training. According to Broline (1979), students should be able to select from a wide variety of prevocational skill training options with respect to the performance, and interests comprising their work personality. This agrees with Broline (1995) which shows that individuals with disability discover their abilities through interests. In this regard, vocational skill training choice for students with MR was selected by their interest and performance, and janitorial activity was found out to be the first choice of the students according to their performance and interest. However, the study has shown contradictory result on the rest of the options. Interest and performances were not related to the choice of pre/vocational skill training. This maybe because the students showed interest to choose more than one option of training. For instance, one student may show high performance on tailoring, but he may exhibit interest on the other options of prevocational skill training. Apart from this, the results have showed that, according to the choice of the students, the top three vocational skills of training choice identified by the teachers janitorial activity, painting and wood work, where as in their performance the top choices were found to be janitorial, food preparation and tailoring.

In general, the study confirmed that janitorial skill training is the most suitable for students with mental retardation, since it was found to be the vocational skill training chosen most both by

their interest and performance. This may result from the fact that the physical skills required in sweeping, dusting, cleaning, and washing household fixtures, furniture, and utensils, and the like can be acquired through practice not only in the classroom, a far better learning situation may exist in the students home.

It is worth noting that the finding very much agrees with the reports of parents, principals of the center, and Berine-Smith et al.(1998) who indicates that students with mental retardation often ushered into entry level job, for instance, as janitors.

5.4 Job Opportunities

The data collected from principals of the center revealed that students with MR need academic and vocational skill training, particularly for children with mild mental retardation. In relation to this, Winzer (1990) explains for individuals with mild retardation, academics may be of higher priority than for students who are moderately retarded. This is because students with mild retardation may be able to better assimilate functional academic skills into their daily lives and vocational activities. Given the fact that students with moderate retardation have a somewhat diminished capacity for applying academic tools to daily and vocational skill training. This is particularly evident in light of the limited instructional time available for these students during their school years. In addition, according to the team leader, persons with mild mental retardation can compete in employment with other persons with disability and with non-retarded individuals, if they get enough vocational training. This is supported by Berine-Smith (1994), who asserts that the person with mental retardation may be able to locate and maintain a community job with no additional support services. The individual finds a job independently either through contacts made during school vocational preparation programs or through such sources as job service family source, friends, etc. For the persons with mild retardation, competitive employment without support is possible if adequate

vocational training and experience are available during the school years.

The finding of this study is also by and large consistent with previous studies conducted on vocational skill training. Persons with mental retardation can be productive workers in different options of occupations if provided with appropriate vocational evaluation and training. Jobs that persons with mental retardation have been able to attain include are jobs as a card punch operator, mail clerk, carpenter, gardener, office machine operator, janitor, painter, house keeper and others (Broline, 1979). Moreover parents, the MOLSA team leader, and principals of the center have all raised this issue and noted that these children are able to perform different tasks of vocational skill training option with appropriate order and support. And one of the mothers from the center said,

My child has shown satisfactory performance in janitorial activities without any help. However, sometimes she needs order to start and complete the given task. This was true in the home activities, such as, cleaning all the house hold utensils; making the bed, and taking care of the kitchen, the salon, and washing clothes. She can perform well like her non-mentally retarded brothers and sisters with order and support.

Despite these demonstrations of competency, many persons with mental retardation are underemployed or unemployed experiencing extreme frustration and self- depreciation, because employers hesitate to recruit, hire and train them since they are not sure if they know how to accommodate their disability yet; Luckasson et al. (2002) have indicated, with appropriate preparation, individuals with mental retardation can acquire vocational skills, and they can move into productive roles in the work places. It is increasingly expected that adults with mental retardation will work in inclusive work settings alongside typical workers with supports provided there as needed, and that these individuals will live in residential programs that represent the sorts of homes that most people live in.

As the interview report of parents, principals of the center and MOLSA team leader have also indicated the prevailing reality mentioned about the job opportunities of persons with mental retardation. After leaving school, many persons with mental retardation do not get services or assistance in their communities to obtain and maintain employment. Only, few of them have got jobs in non-governmental organization as competitive and supported employees. One of the expert MOLSA team leaders has disclosed about his experience in Japan as persons with mental retardation worked in supported employment in making bags, printing, packaging and bakery. The bags that they make were the leading in the markets.

In Ethiopia, it is only SOOM, which applied sheltered workshop though it is not as such successful to compete in the market. According to Beine-Smith et al. (1994), with recent emphasis on transition planning and integration of individuals who are mentally retarded into competitive work setting, the concept of the sheltered workshop has come under fierce criticism due to its segregated approach to employment, low wages, and general failure to move clients effectively into competitive work environment. Therefore, the trend is to use non-sheltered employment options.

The interviewees of this study have also reported that persons with mental retardation can be competitive employees in governmental and non-governmental organizations as janitors, material suppliers, smoothing wood in wood work centers, and gardener, etc. On this issue, one mother has responded like this” My child can participate in woodwork shops equally with non-retarded individual in smoothing wood, material supplying and other simple works”. Beine-Smith et al.(1998) also take the stand that supported employment provides employment opportunities to integrated handicapped and non- handicapped individuals with emphasis on meaningful assistance including long-term support that provides for individual vocational choice.

The MOLSA team leader has reported that persons with MR have higher rates of unemployment when compared with other persons with disabilities such as persons with visual

impairment, hearing impairment, and others. This is confirmed by Smith and Luckasson (1995). The leader has added that the reasons for low employment could be low educational background, low social skill, and others. But, the ILO (2005), quota scheme may solve the problem of this discrimination. It is probably the best known and the most familiar action measure in countries like Japan, and China for promoting the integration of people with disability in the labor market. Quotas are some times introduced by law enacted by governments. Under quota schemes, employers employing a specified minimum number of persons are obliged to ensure that a certain percentage (a quota) of their work force is made up of people with disabilities. More recently, some quota schemes have been expanded to expressly include people with mental retardation (such as in, Japan) and people with mental health problem (such as in Germany).

Since Ethiopia is one of the countries that ratified the ILO convention of equal employment opportunities for people with disabilities, it is expected to design policy and laws to implement the quota scheme for persons with disability in general and persons with MR in particular. According to the MOLSA team leader these quota schemes are under investigation to apply them in the Ethiopian context.

ILO (2005) has also reported that:

People with disabilities comprise a large and diverse group in the population, and include people with very different abilities and impairments. In recognition of this, some quota schemes target all people with disability, while others target those with severe disabilities. Many quota schemes are targeted specifically for those people with disabilities who can be expected to face the greatest difficulties in obtaining employment- people with severe disabilities. Such people are expected to be able to profit less from the existence of non-discrimination legislation, as even in a non-discriminatory environment, they may remain unable to compete for and win based jobs on their individual merits. Therefore, a targeted affirmative measure in the form of a quota might be an appropriate tool to promote the employment opportunities of this group[p.41].

Therefore, considering, the low employment opportunities for persons with mental retardation compared to groups of non-disability and disability, a quota system might be an appropriate way to promote the employment opportunities of these students.

The difficulty of implementing the policy of job opportunities of this target group is raised by principals of the center who were interviewed. Since Ethiopia is one of the countries that have ratified the United Nation's Convention on the Rights of the Child, it is expected to provide at least a possible environment for the education and skill training of children with MR. One of the recent articles (Article 23:1989) states that:

A mentally or physically disabled child should enjoy a full and decent life in conditions, which ensure dignity, promote self reliance and facilitate the child's active participation in the community (UNICEF, 2000: 69 in Yirgashewa, 2004).

Such declarations for children's rights also include ways to how it is going to be attained by signatories of which one is supporting family, special needs centers, and local communities to cope with disabilities.

The developmental social welfare policy of Ethiopia has also opened its door for service providers or regional and zonal offices of labor and social affairs. However the major problem lies in the implementation of the policy. The policy states that:

Efforts aimed at instilling in persons with disability a sense of confidence and self-reliance through education, skill training, gainful employment opportunities and other services shall be increased and appropriate legislative measures shall be taken to ensure their welfare (MOLSA, 1996; Article 5.6.2).

Accordingly, it is possible to organize and implement such policy in relation to vocational skill training and create employment opportunities of students with MR. CMCC and SOOM have tried to implement this policy accordingly to address the issue of vocational skill training

for person with MR. The effectiveness of the training in making them assert their independence for the future is apparently unsatisfactory (Yirgashewa, 2004).

According to Molsa team leader these training center couldn't give qualified training that help the trainees get employed in different organization. The major reasons that lack of vocational skilled and competent special teachers, proper curriculum of the trainee and incentives to the teachers.

In the contrary, the principals of the center said that if the students get enough supervision, they can be hired as a janitorial, printing dying, packaging, and other jobs equally with non-retarded individuals.

These students can be competent is simple vocational skill training as any persons without disability can perform without any training as mentioned by the principals of the center. So these trainee need to acquire a complex training as well, because they have an ability to be a wood worker, tailor, and the likes.

In the CMCC, there are different options of vocational skill training. The center provides training for persons with mental retardation and their needy mothers with intention of making these individuals self-supportive in different in come generating activities (See page 29) However, this organization faces problems in its undertakings. It has, for example, asked the government to open a new training center for the students with MR. But the response was discouraging. As the government officers reacted” rather than train one person with mental retardation, it is better to train ten no-retarded individuals who are assets for the country.” This statement violates the policy as well as the human right conventions of the country. Regarding the job opportunities of students with MR, the center as well as the regional offices has the responsibility to implement the policy. The center trains the students to be self-supportive with low income generating activities. However they still are taken as burdens on their family and their country at large. As the principals of the school

reported the government does not give enough attention for creating job opportunity for them. As to the principals, “The government has not paid attention to even fill vacant positions with the MR, it is just set on non-retarded individuals. The government regional offices also create problems in implementing the policy on job opportunities of children with MR”. In this regard, the MOLSA team leader has disclosed that implementation problems lie in the service provider as well as the autonomous regional offices. The responsibility and duty of MOLSA, is to design policies and creating suitable strategies to implement the policy. He has also reported that the main challenges for the implementation of the policy are financial shortage, lack of skilled persons, and lack of awareness. The most serious one is the financial shortage. The interview held with the principals of the center has also indicated that the center’s financial income has been very dependent on external donors. However, donors mainly need to donate to immediately observable output works. Therefore, the center is facing difficulty in getting enough support from donors.

The other challenge is lack of awareness of the service providers or the regional officers and the communities as well. Advocacy and awareness-raising programs primarily targeting communities at the grass roots’ level will be designed and implemented by regional labor and social affairs bureaus and other pertinent governmental and non-governmental organizations (MOLSA, 1996). But, these stakeholders usually fail to discharge their responsibilities

The other challenge is also lack of skilled persons to implement the policy at the regional level offices, woredas and kebeles.

In general, Students with MR are able to perform different tasks of vocational skill training options with appropriate order and supervision. Despite these demonstration of competency, many of them are underemployed or totally unemployed. Is it only very few of them that have got jobs in non-governmental organization.

CHAPTER SIX

Summary, Conclusion, and Recommendation

6.1 Summary

This Study has attempted to identify the kinds of prevocational adaptive Skill and prevocational skills training, and the performance of children with MR on these skills; differentiate the kinds of vocational skill training choice of students with MR; examine the job opportunities available to these Students with MR

In this effort, the performance of the students both in prevocational adaptive skill and prevocational skill training was assessed according to their competency, level of retardation, and gender. In addition, the students' performance in prevocational adaptive skill training was correlated with that of prevocational skill training. The students' vocational skill training choices were identified. Moreover, the understanding of parents' representatives, principals of the center, and the MOLSA team leader of persons with MR about vocational skill training and job opportunities of the students have been examined.

6.1.1 Types of Prevocational Adaptive Skills and Prevocational Skill Training

The information obtained from documents of the center has reflected the prevocational adaptive skills and prevocational skill training areas that are taught to students with MR. The prevocational adaptive skills areas taught to these children were social-skill, language competency, self-care skills, home keeping, physical development and activity, functional academics, travel competency, responsibility of using equipment, self-direction, and safety awareness. The prevocational skill training areas were tailoring, food preparation, simple trading, wood work, painting, weaving, clay making, and janitorial activity.

Both skills training areas mentioned above were more or less similar to the standard set by the American Association of Mental Retardation (1992), Broline (1995), and Broline (1979).

6.1.2 Performances of Students on Prevocational Adaptive Skills and Prevocational Skills Training.

The information obtained from different angles like rating scales, and interviews indicate that most of the students performed well, except in functional academics and petty trading. To mention them,

- Social competency: - the majority of them are highly competent in this area which is extremely necessary for employment maintenance. Lack of this competency contributes to the major downfall of all individuals in work. However, in this study, most of them performed well in prevocational skills training and social competency.
- Language competency:- most of the students seem to be in a good position in this competency which is needed for daily conversations and job interviews.
- Self - care skills: - their performance indicates that almost all of the students have highly managed self-care skills such as toileting, personal hygiene, dressing, and eating. In order to be employable, a student needs to have attained this skill.
- In home- activity:- substantial number of them exhibited high performance. The attainment of these skills leads to many occupational possibilities such as painting, janitorial activity, and food preparation.
- Physical development and activities:- majority of the students exhibited high performance. These activities are a prerequisite to object control skills that are required in vocational situations.
- Functional academics: - most of the students showed deficit in academic activities. This functional academics lead to job possibilities such as engagement in petty trading.

- Travel competency: - most of them have sound competency which is important both for social and vocational aspects.
- Responsibility of using equipment: - most of them have performed above average in this aspect as well.
- Self- direction: - is the personality characteristics in which most showed better performance.
- Self- awareness: - most of them are aware of hazards that include fire, sharp and dangerous objects, electrical or traffic hazard.

However, few students show lower performances in these skills. The reasons that have possibly attributed to this include multiple impairment (such as communication, visual, and hearing, etc.),lack of good role model from the family, lack of conducive psychosocial family atmosphere, lack of finance /Socio economic status of the family, lack of knowledge about mental retardation and proper handling of the children with MR, and absence of access for proper practice.

The exhibition of prevocational adaptive skill performance was found to be in congruence with prevocational skills performance. In connection with this, the kinds of jobs available to individuals with mental retardation depend, of course, on the level of their adaptive behavior and training. The rate of P.A.S and P.V.T exhibition analyzed by sex is not statistically significant difference b/n males and females. In general, in both skills training aspects, educable students performed higher than those of their trainable mates.

6.1.3 Vocational Skill Training Choice

Teachers identified the vocational choice of the students by performance and interests on the vocational skill training. They have pointed out that the students' interest and performance in vocational skills areas in their respective order as janitorial, painting, and wood work. On the other

hand, in the students' performance on prevocational skill training the top three were cleaning, tailoring, and food preparation, respectively.

Moreover, from the lists of vocational skill training options janitorial is first in the order of choice for the students with respect to their performance and teachers' nominations by interest and ability.

6.1.4 Job Opportunities & vocational skill training

This study has also attempted to investigate the vocational skill training and job opportunities of persons with MR.

Parents, Principals, and MOLSA team leader of person with disabilities have noted that students with MR are able to perform different tasks of vocational skill training options with appropriate order and supervision. Despite these demonstrations of competency to many persons with MR, after leaving the center, do not get services and assistance in their communities to get employed. However, few of them have got jobs in non-governmental organization as competitive and supported employees.

Interviewees have also reported that persons with MR can work competitively in governmental and non-governmental organizations as a janitors, material suppliers, smoothing wood in woodwork centers, gardener, and the like.

The MOLSA team leader of persons with disability has also revealed that persons with MR have higher rates of unemployment compared to other persons with disabilities such as person with visual or, hearing impairments

The reasons for their low employment compare to the other disability group is that persons with MR have low educational background, low social skills, etc. Implementing the ILO Quota scheme in the Ethiopian context may significantly minimize the problem of discrimination ; since,

as per the quota scheme employers employing a specific minimum numbers of persons are obliged to ensure that a certain percentage (a quota) of their work force is made up of people with disabilities.

The difficulty of implementing the policy of job opportunities of this target group is raised by principals of the targeted center. In connection to this, the MOLSA team leader of person with disabilities has also disclosed that implementation problems crop up because of the service provider and the autonomous regional offices. The MOLSA, responsibility and duty is reported to be designing policy and creating suitable strategies to implement the policy. He has also reported that the main challenges of the implementation policy are lack of finance, skilled persons, and awareness.

6.2 Conclusions

The following conclusion are drawn based on the results of the study

The prevocational adaptive skills areas in which the center trains the students were social competency, language competency, self care skills, home keeping, physical development and activity, functional academics, travel competency, responsibility of using equipment, self direction and safety awareness; whereas the prevocational skill training areas were tailoring, food preparation, simple trading, wood work, painting, weaving, clay making, and janitorial activity.

Majority of the students with MR were competent in most of the activities (P.A.S and P.V.T), except in functional academics and petty trading.

The prevocational adaptive skill performance is prerequisite for prevocational skill training.

The performance of P.A.S and P.V.T exhibition analyzed by sex seems to favor males.

In P.A.S and P.V.T aspects, in general, educable students performed higher than those of trainable with some exceptions.

From the lists of vocational skill training options, janitorial turned out first in the order of choice for students with respect to their performance and teachers nomination by interest and ability.

Students with MR are able to perform different tasks of vocational skill training options with appropriate order and supervision. Despite this demonstration of competency, many persons with mental retardation are underemployed or unemployed. Only few of them have jobs in non-governmental organization.

Persons with MR have higher rates of unemployment compared to other persons with disabilities such as persons with visual or hearing impairments.

ILO (2005) Quote Schemes for equal employment opportunities for all disability with legislation is under study to be interpreted in Ethiopian context.

The implementation problems of the policy of job opportunities of person with MR lie in the service provider as well as in the autonomous regional offices. The main challenge of the implementation policy is lack of finance, skilled persons, and awareness.

6.3 Recommendation

The following recommendations are given according to the results of the study.

1. Persons with MR need vocational skill training; so governmental and non-governmental organizations should work to expand vocational skill training centers, like SOOM and CMCC through out the country
2. When the center (CMCC) enrolls children with MR; it should seriously consider the age of entrance.
3. CMCC should train the students according to the local market. It ought to give trainings that reflect market needs, such as in areas of masonry, bench assembly, farm labors, bottle packaging, etc.
4. Social skill trainings need to be emphasized because major job terminations are due to lack of appropriate social skills rather than the actual work performance
5. There are different competency levels in the students' performances. Thus, the center needs to screen the trainees according to their competency from prevocational to vocational skills training.
6. Promoting close working relationship with community members, parents, centers, policy makers, concerned NGO'S and GO'S should be done in order to implement the policy of vocational skill training and create more job opportunity for individuals with MR.
7. ILO quota scheme may significantly curb the problem of discrimination against persons with MR. Therefore, our country, Ethiopia should try to implement this convention as soon as possible, to create better job opportunity for these disabled sections of the society.

8 .Further research should be conducted in this area to better help children with MR in their vocational skill training and in creating job opportunities to increase their level of independent functioning.

9. Qualified trainers are needed.

10. Programs to enhance public awareness about the vocational behavior & skills of people with MR should be allocated

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Appendices

Addis Ababa University

Graduate Studies

Department of psychology

APPENDIX- I

Competency scale [rated by teachers]

This rating scale is prepared to check the performance of students with MR on prevocational adaptive skills and prevocational skills training. Since, the result is for academic research purpose; there is no need of mentioning your name.

Regarding the students

a)Sex..... b)Level of Retardation.....

i)Prevocational adaptive behavior scale

Item part	Behavioral description	Not competent	Partially competent	competent	Highly competent
		0	1	2	3
1.	I. SOCIAL COMPETENCY Greets property on meeting				
	1.1 Recognizes a person				
	1.2 Greets properly				
2.	Assisting				
	2.1 Cooperates by own initiative				
	2.2 Cooperates when asked				
3.	Participates in social activities				
	1.1 Actively participates in group work				
	1.2 Participates in work and competition				
4.	Group Functioning				
	4.1 Can function only as an individual				
	4.2 Can function in groups with more than five members				

5.	Tolerance to criticism				
	5.1 Accepts some criticism and tries to correct				
	5.2 Accepts criticism and corrects with success				
6.	II. LANGUAGE COMPETENCY Non-Verbal				
	6.1 Expresses his/her agreement through smiling				
	6.2 Expresses his/her pleasure or anger by gesture				
7.	Verbal Speech mechanisms				
	7.1 Produces sound from his/her throat				
	7.2 Calls letters again & again				
8.	Construction of letters				
	8.1 Constructs words				
	8.2 Constructs sentences				
9.	Speaking				
	9.1 Sends messages				
	9.2 Listens poems and speaks				
	9.3 Speaks by creating poem				
10.	Words				
	10.1 Understands conjunction synonym and antonym words				
11.	III. SELF-CARE SKILLS Toileting				
	11.1 Goes to toilet and Urinates				
	11.2 Adjusts his/her clothes				
	11.3 Puts on clothes after defecation				
12.	Personal Hygiene.				
	12.1 Washes hand				
	12.2 Washes face				
	12.3 Dries face and hand				
	12.4 Brushes tooth				
	12.5 Combs hair				
	12.6 Takes baths				
	12.7 Washes when over touches dirt				
13.	Dressing				
	13.1 Dresses him/her self				
	13.2 Puts on clothes with necessary order				
	13.3 Wears shoes				
	13.4 Takes out his clothes according to the type and sequences				

14.	Eating				
	14.1 Asks food when needed				
	14.2 Washes hands				
	14.3 Chews food with mouth closes				
	14.4 Eats with out spilling				
	14.5 Asks water when needed				
	14.6 Drinks without spilling				
15.	IV. HOME KEEPING [LIVING] Cleaning house and Washing				
	15.1 Cleans house				
	15.2 Washes hand kerchief, socks etc				
	15.3 Checks the dryness of the washed cloth and collect them				
	15.4 Washes used utensils after meal				
	15.5 Makes own bed				
16.	V. PHYSICAL DEVELOPMENT AND ACTIVITY Sensory				
	16.1 Can see as required				
	16.2 Able to hear as required				
	16.3 Can hear without hearing aids				
17.	Motor				
	17.1 Sits straight				
	17.2 Walks straight				
18.	Eye-hand Coordination				
	18.1 Throws a ball overhead				
	18.2 Lifts a cup or a glass with one hand				
	18.3 Grasps coins with thumb and fingers				
19.	Eye-foot coordination				
	19.1 Kicks a ball from hand				
	19.2 Supplies a ball by kicking				
20.	VI. FUNCTIONAL ACADEMICS Reading				
	20.1 Identifies letters, words and sentences				
	20.2 Reads one word				
	20.3 Understands the meaning of one word				
	20.4 Reads a two or three words sentences				
21.	Writing				
	21.1 Writes letters				
	21.2 Identifies words				
	21.3 Writes his name and address				
	21.4 Writes one sentence				

22.	Number concept				
	22.1 Counts the materials from * 1-20				
	22.2 * 20-100				
	22.3 Counts and register numbers from * 1-20				
	22.4 *20-100				
	22.5 Read and write numbers from * 1-20				
	22.6 *20-100				
	22.7 Adds numbers by counting materials from *1-100				
	22.8 Adds number vertically from *1-100				
23.	Time concept				
	23.1 Reads the clock up to 24 hours with understanding				
	23.2 Associates activities with periods of a day to morning				
	23.3 to noon				
	23.4 to evening				
	23.5 Names the days of a week				
24.	VII TRAVEL COMPETENCY Public transport				
	24.1 Identifies public transport [Bus, taxi, etc]				
	24.2 Waits the bus (Public transport) by turn				
	24.3 Can travel point to point				
25.	Directions and sign boards				
	25.1 Knows about route direction				
	25.2 Follows three component routes				
26.	VIII. RESPONSIBILITY Responsible for self property				
	26.1 Identifies self property				
	26.2 Cares for own belongings				
27.	Feels Responsible for others and their property				
	27.1 Cares for friends property				
28.	Responsible for equipment				
	28.1 Cares for equipments given to him				
	28.2 Cares for school equipment (property)				
29.	X. SELF DIRECTION Perseverance				

	29.1 Carries out a work activity for 30 minutes with out stoppages				
30.	Punctuality				
	30.1 Is in position before time				
31.	Ability to seek guidance				
	31.1 Seeks guidance relevantly but not sufficient				
	31.2 Seeks guidance purposefully				
32.	Work place (Remain in)				
	32.1 Leaves work place only with permission				
	IX. SAFETY AWARENESS				
33.	Fire hazard				
	33.1 Can light fire				
	33.2 Awares of its dangers				
	33.3 Extinguishes a fire safely				
34.	Sharp and dangerous objects				
	34.1 Identifies sharp and dangerous object				
	34.2 Uses sharp and dangerous object safely				
35.	Electrical Hazards				
	35.1 Knows electrical switches and appliances				
	35.2 Plugs in sockets				
	35.3 Uses most electrical appliances safely				
36.	Traffic hazards				
	36.1 Knows the direction of the road				
	36.2 Uses on busy road safely				
	36.3 Uses all roads safely				
37.	Illness Identification				
	37.1 Knows when he/she sick				
	37.2 Tells the sick parts of the body				
	37.3 Seeks to go to clinics /hospital/				
38.	Uses Medication				
	38.1 Uses prescribed medicine				

ii) Prevocational skills competency scale

Item part	Behavioral Description	Not- able to cope	With much support	With slight support	Independent
		0	1	2	3
1.	I. TAILORING				
	Folding of papers & clothes				
	1.1 Folds papers by - three lines				
	1.2 Folds different kinds of cloths				
2.	Sewing & passing thread in to needle				
	2.1 Passes thread in bids hole				
	2.2 Passes a thread into larger needle hole				
	2.3 Sews papers				
3.	Cutting card with scissors				
	3.1 Opens blades of scissors by moving fingers apart				
	3.2 Slides card between blades of scissors				
	3.3 Squeezes to cut card by moving fingers together				
	3.4 Opens blades of scissors				
4.	Making knot and untying ropes and thread				
	4.1 Makes knot using rope				
	4.2 Unties the rope				
	4.3 Makes knot using thread				
	4.4 Unties thread				
5	II. FOOD PREPARATION				
	Peels fruit				
	5.1 Name the fruit				
	5.2 Calls it banana				
	5.3 Places banana on plate				
	5.4 Holds knife ready for cutting				
	5.5 Cuts through end of banana				
	5.6 Pills skin off banana				
5.7 Places piece of skin on plate					
6.	Slices bread with knife				
	6.1 Holds knife ready for cutting				
	6.2 Finds a top of a bread				
	6.3 Starts cutting a bread				
	6.4 Stops cutting				
7.	III. SIMPLE TRADING				

	Counts, changes and adds cents and birr.				
	7.1 Counts cents from 0.05-1.00 birr				
	7.2 Counts birr more than 1.00 birr				
	7.3 Change one birr to different cents				
	7.4 Changes 10 birr into different one birr				
	7.5 Adds and subtracts cents & birr from 0.10-10.00 birr				
8.	Marketing concepts and morality				
	8.1 Knows selling and buying				
	8.2 Knows income tax, expense and profit				
	8.3 Knows about how to approaches the consumer				
	8.4 Facial expression when they practice				
	8.5 Knows how to greet and well come with similar face				
9.	IV. WOOD WORK				
	Understanding about wood work				
	9.1 Knows the importance (uses) of wood work				
	9.2 Knows the equipment that used for wood working				
10.	Smoothing wood				
	10.1 Takes wood				
	10.2 Brings smoothening equipment				
	10.3 Identifies a rough surface				
	10.4 Smoothens the woods				
11.	V. PAINTING				
	Painting by crayon				
	11.1 Paints using crayon				
	11.2 Paints unlimited area				
	11.3 Paints limited area				
	11.4 Paints using different color				
	11.5 Paints a picture using more that three colors				
	11.6 Draws different type of pictures using crayon				
12.	Water color painting				
	12.1 Holds brush				
	12.2 Immerses the brush in the ink and moves with its tip and side				
	12.3 Flat painting				
	12.4 Draws "meskel flower" using painting brush				
	12.5 Paints by two different color				
13.	VI. POTTERY [MAKING SHAPES] Making a shape of cup				

	13.1 Prepares papers				
	13.2 Cuts papers into different pieces				
	13.3 Puts them into water				
	13.4 Kneads the paper				
	13.5 Brings cup				
	13.6 Puts kneaded paper into the cup				
	13.7 Makes shape in side the cup				
	13.8 Dries the paper inside the cup				
	13.9 Takes out a paper cup				
	13.10 Gets a paper cup				
14.	Making a shape of cup by using mud				
	14.1 Kneads mud				
	14.2 Observe the shape of the cup				
	14.3 Makes a shape of a cup				
15.	VII WEAVING				
	Knowledge on weaving				
	15.1 Knows about weaving				
	15.2 Knows the uses of weaving				
	15.3 Knows how to use the equipment at weaving				
16.	Making weaving design				
	16.1 Folds a paper 4 times				
	16.2 Cuts all parts except the edges of the paper				
	16.3 Cuts a paper into long pieces				
	16.4 Passes the long pieces edge to edge				
17.	vii. JANITORIAL (cleanness)				
	Knowledge about cleaning				
	17.1 Knows different kinds of houses (Home, Hotels, shop, hospitals etc)				
	17.2 Knows how to clean them				
	17.3 Knows how to use equipments for cleaning				
	17.3 Identifies important materials before sends to the dust bin				
	17.5 Knowledge about cleaning				
18.	Cleans different parts of the houses and uses equipment				
	18.1 Cleans bed room using equipments				
	18.2 Cleans kitchen using equipments				
	18.3 Cleans dining room using equipment				
	18.4 Cleans toilet room using materials				
	18.5 Cleans furniture room using equipments				
	18.6 Cleans salon using equipment				
	18.7 Takes safety measures (precaution) when she/her cleans				
19.	Cleaning gardening places and surrounding				
	19.1 Knows the material that use to clean				
	19.2 Cleans neatly				
20.	Collection of rubbish				
	20.1 Collects a rubbish in one place				
	20.2 Puts a rubbish into a dust bin				

APPENDIX II

QUESTIONNAIRE

Questionnaire [to be completed by teachers]

The objective of this questionnaire is to collect information on vocational skill training choice for children with mental retardation. Since ,the success of the study highly depends on your honesty. You are kindly requested to respond in as such honest way as possible.

Thank you

NOTE:

1. Answer the following questions by putting (✓) or by writing answer on the spaces provided
2. Writing your name is not necessary

APPENDIX III

INTERVIEW GUIDE

The aim of this guide is to collect information regarding to the vocational skill training and job opportunities of students with MR.

A. Interview for parents' representatives

1. What kinds of improvements on prevocational adaptive skill and prevocational skill training do the students show?
2. Which vocational skill training areas, do you think more helpful for their future life employment?
3. What kind of support, do you prepare to create job for your children
4. Do you think that they get job in other organization [Non- Governmental and governmental organization]? Why?
5. What kinds of support, do expect from government organization?

B. Interview of School principals

1. What do you think about giving both academic and vocational education in an integrated way is more suitable for student with mental retardation than giving only vocational skill training to help them become ready for world of work and to be productive?
2. Do they get enough vocational skill training to qualify them for some employment? Why?
3. Which vocational skill training areas do you think more helpful for their future life /employment?
4. Which kinds of employment arrangement are influential for these children?
 1. Sheltered employment
 2. Competitive employment
5. How does your organization attempt to get job in the community for these children?
6. What kinds of response do your organization get when it make contact with other non-governmental and governmental organization to search job opportunity for their children?
7. How do you evaluate the policy of Ethiopia on employment opportunities for children with MR?

C. Interview for MOLSA team leader of persons with disabilities

1. what do you know about the vocational skills training center of student with MR in Addis Ababa
2. What attempt does the government make to prepare these trainees to get job opportunities?
3. What challenges do different organizations face to implement the policy of job opportunity for persons with mental retardation.
4. What is your opinion on the ILO (2005) equal employment opportunities for all disability with legislation?

APPENDIX IV

Document Analysis Guide

1. Background of the sample organization
 - ✓ year of establishment
 - ✓ the variable facilities
2. The main objective of the organization
 - major activities involved
 - types of training
 - job placement

APPENDIX V

Reliabilities of the competency-rating scale at pilot and main study

P.A.S	Pilot	Main	P.V.T	Pilot	Main
D1	$\alpha=0.99$	$\alpha=0.97$	PV-1	$\alpha=0.85$	$\alpha=0.84$
D2	$\alpha=0.77$	$\alpha=0.81$	PV-2	$\alpha=0.73$	$\alpha=0.82$
D3	$\alpha=0.94$	$\alpha=0.95$	Pv-3	$\alpha=0.76$	$\alpha=0.75$
D4	$\alpha=0.65$	$\alpha=0.8$	Pv-4	$\alpha=0.74$	$\alpha=0.77$
D5	$\alpha=0.76$	$\alpha=0.82$	Pv-5	$\alpha=0.91$	$\alpha=0.90$
D6	$\alpha =0.99$	$\alpha=0.96$	Pv-6	$\alpha=0.52$	$\alpha=0.78$
D7	$\alpha=0.74$	$\alpha=0.75$	Pv-7	$\alpha=0.63$	$\alpha=0.78$
D8	$\alpha=0.88$	$\alpha=0.87$	Pv-8	$\alpha=0.86$	$\alpha=0.84$
D9	$\alpha=0.35$	$\alpha=0.76$			
D10	$\alpha=0.82$	$\alpha=0.81$			

APPENDIX- VI

ቃለ መጠይቅ

ይህ መጠይቅ በአዲስ አበባ ዩኒቨርሲቲ የትምህርት ሳይኮሎጂ የድህረ ምረቃ ክፍል የሚደረግ ጥናታዊ መጠይቅ ነው።

ይህ መጠይቅ ከእንግሊዝኛ ወደ አማርኛ ተተርጉሞ በአእምሮ ዝግመት ተማሪዎች የሙያ ማሰልጠኛ ማእከል በወላጆች፣ በርዕሰ መምህራን እንዲሁም በማህበራዊና የሰራተኞች ጉዳይ ሚኒስትር የአካል ጉዳተኞች የቲም ኃላፊ የሚሞላ ሲሆን ለምታደርጉልን ትብብር በቅድሚያ እያመሰገንን ነፃ እና ግልጽ የሆነ ሀሳብ እንድትሰጡን በድጋሚ እናመሰግናለን።

ይህ ቃለ መጠይቅ ዓላማው በሙያ ክህሎትና ለሥራ ስምሪት መረጃ መሰብሰብ ነው።

ሀ. ለወላጆች የሚደረግ ቃለ መጠይቅ

1. ምን ዓይነት ለወጥ አሳይተዋል ብለው ይገምታሉ በቅድመ ሙያ ስልጠና እና በቅድመ ሙያ የመላመድ ስልጠና?
2. የትኛው የሙያ ዘርፍ ነው እንዚህን ስልጣኞች ለወደፊት ለሥራ ስምሪት በይበልጥ የማረዳቸው?
3. ምን ዓይነት እርዳታ አዘጋጅተዋል ለልጆት የሥራ ዕድል ለመፍጠር?
4. እነዚህ ልጆች በሌላ መስሪያ ቤቶች ሥራ ያገኛሉ ብለው ይገምታሉ?
5. ከመንግሥታዊ ድርጅቶች ምን ዓይነት እርዳታ ይጠብቃሉ?

ለ. ለርዕስ መምህራን የማደረግ ቃለ መጠይቅ

1. የአእምሮ ዝግመት ላለባቸው ተማሪዎች የተሻለ የሚሆነው የሙያና የቀለም ትምህርት በቅንጅት መስጠት ነው ወይስ ለሙያ ትምህርቶችን ለብቻ መስጠት ነው?
2. የአእምሮ ዝግመት ያለባቸው ተማሪዎች ለስራ የሚያበቃቸው በቂ የሙያ ስልጠና ያገኛሉ ወይ?
3. የትኛው የሙያ ዘርፍ ነው እነዚህን ስልጣኞች ለወደፊት ለስራ ስምሪት በይበልጥ የሚረዳቸው?
4. የትኞቹ የስራ አወቃቀሮች ናቸው ለእነዚህ ተማሪዎች የሚያስፈልጋቸው?
 - 4.1 የሽልተር ሥራ
 - 4.2 የውድድር ሥራ
5. እንዴት ነው የእናንተ ድርጅት ለእነዚህ ተማሪዎች በህብረተሰቡ ውስጥ ሥራ ለማስገኘት የሚሞክረው?
6. ምን ዓይነት መልስ አግኝቷል የእናንተ ድርጅት ከሌሎች መንግስታዊና መንግስታዊ ካልሆኑ ድርጅቶች የስራ ሥምሪትን በተመለከተ?
7. እንዴት ነው የምትገመገመው/ አምትገመግሚው የኢትዮጵያን ፖሊሲ የእነዚህን ተማሪዎች የስራ ሥምሪት በተመለከተ?

ሐ. ቃለመጠይቅ ለማህበራዊ እና የሠራተኞች ጉዳይ ሚኒስቴር
የአካል ጉዳተኞች የቲም ሀላፊ

1. ስለ አዲስ አበባ የአእምሮ ዝግመት ላለባቸው የሙያ ማሰልጠኛ ማእከላት ምን የምታውቁት አለ?
2. መንግስት ለእነዚህ ተማሪዎች ምን ሙከራ አድርጓል የሥራ ሥምሪትን ማዘጋጀት በተመለከተ?
3. ምን ችግሮችን የተለያዩ ድርጅቶች ተጋፍጧል የእነዚህን ተማሪዎች የሥራ ሥምሪትን ማስፈጸም በተመለከተ?
4. ኮይ ኤል ኮ (2005) እኩል የሥራ ሥምሪት ለሁሉም የአካል ጉዳተኞች በተመለከተ ያሉት አስተያየት ምንድን ነው ?

DECLARATION

I, the undersigned hereby declare that this thesis is my original work, has not been presented for a degree in any other university and that all sources of material used for the thesis have been duly acknowledged.

Name Kassahun Bogale

Signature 

Date 16th June 06

This thesis has been submitted for examination with my approval as university advisor

Name Daniel Desta

Signature 

Date 16 June, 06