

A Review of Forensic and Proprietary Rehabilitation Course Availability in CORE Accredited Rehabilitation Counseling Programs

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With the shift in rehabilitation education toward a greater emphasis on counseling skills in response to state counselor licensure requirements, some researchers have attempted to examine the availability of traditional rehabilitation training programs to prepare rehabilitation counselors for careers in proprietary rehabilitation and forensics. CORE-accredited rehabilitation counseling programs were examined to determine availability of course offerings in rehabilitation counseling or forensics. The results indicated that most programs do not offer specific courses in these specialty areas, and that offerings tend to be more likely in programs that are larger and more diversified. These results are discussed in the context of the divergence of rehabilitation counseling into subspecialties, and the practical applications and future research considerations arising from these circumstances.

Recent research suggests that many rehabilitation professionals are seeking and obtaining employment outside of public and private-not-for-profit settings (Sanders, Barros-Bailey, Chapman and Nunez, 2009). One such setting is in proprietary, or private-for-profit rehabilitation. Proprietary rehabilitation has been in existence to some extent for many years. However, it was during the 1970s and 1980s that growth of this sector began to escalate—in 1970, it was estimated that private rehabilitation generated only \$250,000.00 per year in business in the United States, but by 1982, this figure had risen to \$450,000,000.00 (Tenth Institute on Rehabilitation Issues, 1983). Another study indicated that proprietary rehabilitation was doubling in size as an industry every other year (Berkeley Planning Associates, 1987). Much of this growth may be attributed to the passage of the Rehabilitation Act of 1973, P. L. No. 93-112 (1973). This Act mandated that state-federal services be provided to individuals with the most severe disabilities. Prior to this, individuals who had been injured on the job were likely to be served through state-federal vocational rehabilitation agencies. However, the types of injuries usually sustained in the course of employment, while severe enough to prevent individuals from returning to their usual work duties, were not viewed as severe enough to receive priority for services. The remedy

available to them was workers' compensation. Employers began to seek rehabilitation services for these employees as a cost-saving measure, and also to maintain valued employees in their workplaces (Kontosh & Dunn, 2011).

Proprietary rehabilitation consultants work in an environment with different methods and expectations from that seen in the public sector (Weed & Field, 1985). When employed as a case manager, the counselor would be expected to work with smaller caseloads and effect a speedier return-to-work for the individuals in that caseload. Because all of these individuals have been employed competitively in the past, return-to-work is prefaced upon a hierarchy explained by Welch (1979), still in use today. Employment in occupations that are most similar in terms of duties to previous work are considered first, often using transferable skills analysis as a means of vocational assessment (Dunn & Growick, 2000). Another role of the rehabilitation counselor in this setting is that of the vocational forensic expert. This is defined as a "rehabilitation professional who has been retained and disclosed as an expert for purposes of providing expert testimony" (International Association of Rehabilitation Professionals, 2010, p. 4). Vocational experts provide testimony in judicial matters

(Shahnisarian, 2002). The role of vocational expert was first formalized by the Social Security Administration in 1977 when it created a registry of vocational experts for use in adjudication of disability claims (Dunleavy, 1999). Today, however, vocational experts should be knowledgeable in many more areas and may be asked to provide opinions concerning employability and earning capacity in a variety of settings including Social Security Disability, workers' compensation, tort liability such as product liability and automobile accidents, marital dissolution, civil rights and employment discrimination, medical malpractice, and wrongful termination (Havrenek, 2004; Kontosh & Dunn, 2011). Proprietary rehabilitation (and vocational forensics) has grown since its beginnings more than three decades ago to become an entity within the larger realm of rehabilitation counseling services. It has its own separate professional organizations, codes of ethics, and scholarly journals dedicated to those who practice in such professions (Kontosh & Dunn, 2011).

Rehabilitation education has seen prominent changes in the past twenty years as forensic rehabilitation has evolved and become differentiated. Most notably, accreditation standards issued by the Council on Rehabilitation Education, Inc. (CORE, 2011) have been modified to resemble those of the Council for Accreditation of Counseling & Related Education Programs (CACREP, 2009), largely in the interest of assisting persons with rehabilitation degrees achieve parity with other Master's-level counselors in obtaining state licensure (Maki & Hunt, 2003). Ten domains were reported by Leahy, Szymanski and Linkowski (1993) as being most critical to rehabilitation counseling practice. These were: vocational counseling/consultation; knowledge of physical and cognitive aspects of disability; individual and group counseling skills; case management; research foundations and program evaluation; multicultural and family issues; rehabilitation foundations; workers' compensation; attitudinal/environmental variables to people with disabilities; and assessment procedures. This can be contrasted with the view of Sliester (2000) who stated that six domains were prominent in practice in vocational forensics: vocational evaluation (said to include case management, decision making and job placement); competence with occupational information resources; analysis of transferable skills; assessment of the workers' past history and worker trait characteristics; and competent written and verbal communication to other professionals. There has been discussion about the adequacy of existing CORE standards to prepare individuals for employment in proprietary rehabilitation settings. Tansy & Smart (2004) reported eight areas of skill and knowledge in CORE accreditation requirements and suggested ways in which these applied to forensic rehabilitation. They admit in their manuscript, however, that there are problems inte-

grating forensic training into the Master's curriculum. These include issues with locating field experiences for practicum and internship experiences which will satisfy CORE accreditation requirements (Janikowski & Riggat, 1999), difficulties locating faculty with adequate experience to teach such skills, and worries that programs that begin to teach such skills will be seen as unfriendly to training counselors for state-federal rehabilitation, thus harming their likelihood of receiving traineeship awards from the Rehabilitation Services Administration. Donnell, Reyes, Cogdal & Porter (2004) indicated that devotion of educational time to such endeavors may harm the goal of training students who wish to engage in other careers, stating, "(T)he relevancy of this deficiency in training must be considered when many (graduates) may never seek to become forensic experts due to their lack of knowledge and qualifications necessary to become such a service provider" (p. 38).

Given the changes in proprietary rehabilitation in the past two decades, and the debate over the adequacy of current CORE standards in providing necessary preparation for students seeking careers in proprietary rehabilitation, there is a question of adequacy as to whether proprietary rehabilitation and vocational forensics have become a distinct profession with characteristics rooted in rehabilitation principles but with skill demands diverging from it. Osipow (2005) stated that distinctiveness as a profession required a specialized body of knowledge, a core group of practitioners with a demand for their services, methodologies unique to the field, training programs specific to the profession, professional organizations specific to the profession, ethical codes, and outreach activities. Most of these criteria were said to have been met or were in development at that time. Kontosh and Dunn (2011) have pointed that this development has continued since Osipow's suggestions were made.

The review of literature suggests that there is a demand for rehabilitation practitioners in fields different from public rehabilitation, and a question as to whether training needs for one prominent profession—proprietary rehabilitation and vocational forensics—are being met by current CORE standards. One means of seeking answers to these questions is to review the curricular offerings at various degree levels at CORE accredited institutions to determine if course offerings relevant to proprietary rehabilitation or forensics are available to students. The purpose of this study was to identify the presence and frequency of forensic coursework in CORE-accredited rehabilitation counseling programs.

Procedure

Online information for the 97 CORE rehabilitation counselor education programs in the United States and Puerto Rico listed in the 2010 National Council on

Rehabilitation Education (NCRE) directory was retrieved and examined using quantitative data analysis procedures. The information was originally retrieved in September, 2010, and reviewed again for continuity in August 2011. It was presumed that the web page for each program would be a recruiting instrument, and should provide accurate information concerning the content of each program. Forty-five percent of these programs prepare Master's level practitioners only, 4% bachelor only; 3% doctoral level only; and 51% of the programs contained both graduate and undergraduate prepared rehabilitation professionals. Information was unavailable for 1% of the programs.

Each of these 97 CORE rehabilitation counselor education programs was evaluated based on the presence or absence of a forensic rehabilitation course in the rehabilitation counseling curricula. Each of these programs was assigned corresponding procedural numbers by the researchers based on the level, type and intensity of the forensic course. For purposes of this research study the descriptors are defined: (1.) **Level**-program level indicates education at either the graduate or undergraduate "levels" located within the university setting; (2.) **Type**-program type indicates the specific degree of Bachelor, Master or Doctoral respectively; and (3.) **Intensity**-program intensity indicates the amount of curriculum placed within the specific program area of forensics. Each program was evaluated to determine whether there was a forensic course in the curricula, or if the information regarding this research topic was placed in multiple courses throughout the overall rehabilitation program. Sixteen percent of the 97 participants maintained a forensic course in the rehabilitation curricula, eighty-five had no known forensic course, and six had no information related to a forensic course in the curricula.

For purposes of description, the forensic curricula were labeled Y (yes-present) and N (no-not present). This question was primarily yes/no type and response was subjected to binomial tests regarding the forensic course in the curricula. Chi-square analyses were conducted with correction adjustments made to control for Type I error.

Results

Presence or Absence of Forensic Course

In this analysis, six programs indicated Y (there was a forensic course) (two-tailed, $p < .05$), whereas 85 programs indicated N (there was no presence of any course related to forensics) ($p < .05$). Results were non-significant as it related to the presence or absence of a forensic course. However, there was significance found in the overall title and content of the forensic course. Six percent of all rehabilitation counselor edu-

cation programs offered proprietary rehabilitation and/or forensic education courses, while ninety-one did not contain such courses within their core curricula. Overall, ninety-four percent of rehabilitation programs examined did not contain any kind of proprietary or forensic rehabilitation course within their core curricula. This figure represents 89 of the 97 programs listed in the 2010 NCRE directory, meaning that most programs had no specific course offering in the area of proprietary rehabilitation and forensic education within the core curricula. Four programs noted course consideration or review of forensic courses on their web pages, which suggested the importance of these types of courses for future rehabilitation curricula. However, it is important to note that these programs had no such course (in the area of proprietary rehabilitation and forensic education) at the time of examination.

Chi-Square Results

Three questions related to type, level, and intensity of the overall forensic courses and/or programs were subjected to a chi-square analysis. The first focused on the degree offered by each rehabilitation program, and the presence or absence of the forensic course in the rehabilitation curricula. There were no statistically significant differences in types of degrees offered and the presence of a forensic course. However, four Bachelor programs $\chi^2(3, n=4)=3.42, p < .05$ and 24 Master/Doctoral programs $\chi^2(3, n=24)=17.74, p < .05$ respectively were perceived as having the greatest overall presence of a forensic course in their distinct curricula. Therefore, it can be concluded that type of degree did not have an influence on the overall presence or absence of the proprietary rehabilitation and forensic education course within the curricula.

Regarding level of rehabilitation counselor education program, only graduate level programs were statistically significant in relation to the presence and/or absence of a forensic course $\chi^2(2, n=66)=53.25, p < .05$. A final statistical significance was observed when both the presence of undergraduate and graduate level programs were housed within the same institution, as there was an increase in the presence of a forensic course within these distinct types of curricula $\chi^2(2, n=34)=31.3, p < .05$. There were no statistically significant differences between the presence of a forensic course and the intensity of the overall curricula. Likewise, there were no differences between level of program and intensity of course. It can be concluded that the portion of rehabilitation counselor education programs that contain both an undergraduate and graduate focus, will have a great likelihood for the presence of proprietary rehabilitation and forensic education course offerings than those who do not have both types of programs housed within the same institution. Further, it can be concluded that academic institu-

tions that do not have coexisting programs may not be meeting the possible training needs of those individuals focusing in the areas of proprietary rehabilitation and vocational forensics. Therefore, many future professionals are not able to access and/or receive the valued training needed to be successful in this area of the profession.

Limitations of the Study

This study used a convenience sampling technique reviewing information available via the internet. No attempt was made to ascertain if the information was obsolete or incomplete. In addition, much information concerning vocational forensics may be infused in other courses or otherwise delivered to students via means that could not be detected by the sampling technique. Readers should take these matters into account when considering the reliability of the data collected.

Discussion and Conclusions

The research demonstrates that those programs most likely to include proprietary or forensic rehabilitation course offerings are those that are larger and more diversified. This supports two comments discovered in the review of literature. First, Tansy and Smart's (2004) observation that teaching such courses requires faculty qualified to teach them. Larger programs are more likely to have more faculty, and thus are more likely to have faculty who are diversified in their personal experience. Donnell et al.'s (2004) comment that basic skills may need to take precedent over teaching of specialty skills may ring true in these results, as smaller and less diversified programs would likely have fewer instructors and hence fewer course offerings.

This research does not consider content-based aspects of the courses through a review of syllabi or other means. Therefore, the specific skills taught in those existing courses that were examined are not ascertainable. While preparation of students for careers in proprietary or forensic rehabilitation is available at some institutions, availability is not universal. The overreaching question of whether the standard CORE accredited curriculum is sufficient to prepare students for such careers remains unanswered.

Tansy and Smart (2004) note that no role and function study of practitioners in proprietary rehabilitation or forensics had been conducted. General rehabilitation counseling, however, has been studied in this manner numerous times using numerous methods, beginning with Muthard and Salamone (1969) and continuing through the present day. Kontosh and Dunn (2011) suggested that a role and function study of forensic rehabilitation is a critical need in the development of the profession. Such a study could be an indication of convergence and divergence from proprietary rehabilita-

tion and forensics and more traditional options. Only in this way could course content be developed. Indeed, only in this manner could a true assessment of the adequacy of CORE knowledge areas be completed and considered in regard to the adequacy of such training programs as preparation for proprietary rehabilitation and forensics.

Weed and Field (1985) identified eleven specific similarities between public and private rehabilitation: similar groundings in pedagogy, importance of medical aspects of disability, psychological aspects of disability and vocational adjustment, practical use of vocational assessment and standard occupational information and their application to job placement, use of community resources, use of counseling theory and technique, consumption of relevant research, and delivery of services to persons with disabilities. This writing, published over a quarter century ago, is indicative of the type of comments that have been made to justify or pigeonhole proprietary rehabilitation and forensics into the existing schema for the duties of rehabilitation counselors. Tansy and Smart (2004) have likewise attempted to justify the adequacy of CORE requirements to proprietary rehabilitation and forensics. However, it justifiably can be said that without hard evidence of what these professionals are doing, such as would be revealed through a role and function study, such comments are mere juxtapositioning.

Another observation that can be made concerning the issue of preparation for these careers is in regard to certification. The Certified Rehabilitation Counselor (CRC) credential is regarded as the hallmark of professional preparation and competence in rehabilitation counseling. However, if there exist great differences, or even few differences but in particularly pertinent aspects of practice and professionalism, between the two fields, the relevance of the CRC to proprietary rehabilitation and forensic practice could also be called into question. Rehabilitation counseling has moved closer to traditional counseling professions since the mid 1990's (Maki & Hunt, 2003). Changes in techniques, such as the abandonment of the *Dictionary of Occupational Titles* (United State Department of Labor, 1991) by much of the rehabilitation field (but not proprietary rehabilitation and forensics) and movement toward greater consumer choice and environmental or edumetric vocational assessment techniques in traditional rehabilitation settings (but not in proprietary rehabilitation and forensics) bring this assumption into even greater scrutiny. Although the American Board of Vocational Experts (ABVE) provides a means for certification of vocational experts (ABVE, 2010), the Commission on Rehabilitation Counselor Certification provides no recognition of a specialty certification.

Dunn and Kontosh (2011) indicate that there should be recognition of the differences and that serious con-

sideration should be given to whether proprietary rehabilitation and forensics have indeed become distinct as a profession in accordance with Osipow's (2005) suggestions. It may be that traditional CORE accredited programs are not capable of providing such specialized training. This would be understandable; traditional CORE training is primarily intended to prepare individuals for service in traditional rehabilitation settings. However, there are a number of suggestions that could be applied to remedy any deficiencies in training.

First, degrees beyond the Master's degree in rehabilitation could focus upon skills necessary for proprietary rehabilitation and forensics (Dunn & Kontosh, 2011). There are no criteria specified by CORE for either an Educational Specialist or Doctoral degree in rehabilitation counseling. Creation of criteria for accreditation of programs such as these beyond the Master's degree, and development of subsequent certification procedures for graduates, could do much to close any gaps in career preparation. It could also alleviate some of the other issues that were mentioned by Tansy and Smart (2004), such as field experience requirements under the traditional CORE Master's degree model. Further, the number of programs available need not be large. Distance education modalities have become commonplace within the rehabilitation counseling field, and could allow access to training for individuals across a broad geographic spectrum.

Preparation of individuals for careers in proprietary rehabilitation and forensics is but one facet of a larger question, that of the divergence of rehabilitation counseling specialties. It may be that the traditional rehabilitation "tent" has become too small to cover all the issues of career preparation, certification, research, and continuing education for all of the various facets in which rehabilitation practitioners ply their trades. If such is the case, the responsible action would be to recognize the divergence and take necessary steps to truly accommodate it rather than justify its association with methods that are no longer adequate to the task. Future research should attempt to ascertain the differences in the rehabilitation specialties and examine the relevance of traditional methods of preparation to each of the settings in which rehabilitation counselors work.

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