Investigating Mentorship and Early Work-Exposure as Predictors of Employment and Longevity in the Workforce for Adults with Autism Spectrum Disorder

Katherine B. Hurley

The George Washington University

Author Note

The research reported herein was performed pursuant to a grant from Policy Research, Inc. as part of the U.S. Social Security Administration's (SSA's) Analyzing Relationships Between Disability, Rehabilitation and Work. The opinions and conclusions expressed are solely those of the author(s) and do not represent the opinions or policy of Policy Research, Inc., SSA or any other agency of the Federal Government.

Contact: kbhurley@gwu.edu

Abstract

Adults with Autism Spectrum Disorder (ASD) in the U.S. face unemployment rates that vastly outpace other groups including adults with and without disabilities (Roux et al., 2015; Chen et al, 2015; Taylor & Selzer, 2011). As lack of employment is linked to negative physical and mental health outcomes, and other challenges (Brand, 2015; Strandh et al., 2014; Couch et al., 2013; Clark et al., 2001), this study seeks to learn more about what predicts current employment and longevity of participation in the workforce for individuals with ASD, including mentorship and other potential indicators. In order to study employment for adults with ASD across various timepoints in the lifespan, this study utilized anonymous survey methods to collect employment, education, mentorship, and other related information from individuals with ASD from 15 to 73 years of age (n = 64). Data was also collected on demographic information that has been shown to have a relationship with employment outcomes for individuals with ASD, including gender identity, race and ethnicity, and sexual orientation, in an effort to study if those with intersectional minority identities were more at risk for negative employment outcomes. Participants reported various amounts work experience across numerous fields of employment. Findings show that age of first employment and highest level of education obtained provided significant predictors of employment status.

Investigating Mentorship and Early Work-Exposure as Predictors of Employment and Longevity in the Workforce for Adults with Autism Spectrum Disorder

Background

According to U.S. Labor Statistics estimates, prior to the COVID-19 pandemic, the rate of employment for the general population of adults in the U.S. has hovered between 58%-61% since 2009 (2020). However, for adults with Autism Spectrum Disorder (ASD), the employment rate has been estimated to be between just 4-12% (Taylor and Selzer, 2011). Roux et al. (2015) estimated that of young adults with ASD who want to work, only 42% were able to find employment. This high rate of unemployment for adults with ASD can cause financial insecurity for individuals and their families, and the need for other sources of funding. Along with the financial, social and self-esteem impacts of being currently jobless, there is also evidence that being unemployed early in life can have huge impacts on mental and physical health in later adulthood (Brand, 2015; Strandh et al., 2014), and can cause a psychological "scarring effect" that accumulates over a lifespan (Couch et al., 2013; Clark et al., 2001). This can be particularly hard on populations with disabilities, and particularly those with ASD who have a lower rate of employment when compared to individuals with intellectual and learning disabilities (Chen et al., 2015).

Adults with ASD are a growing population whose experience with unemployment is outpacing both adults without disabilities and adults with other types of disabilities. In terms of growing numbers, the Centers for Disease Control and Prevention (CDC) estimated that 1 in 54 children are diagnosed with ASD in the U.S., a rate that has steadily increased since 2000 when the number was estimated to be 1 in 150 (Maenner et al., 2020). Research has shown that not only is the unemployment rate up to ten times higher for this population than neurotypical peers, but that individuals with ASD face more challenges finding employment than those with other disabilities; compared with 91% of individuals with emotional disturbances and 74% with intellectual disabilities, only 58% of adults with ASD have a job at some point after high school (Roux et al., 2015). For individuals with ASD, a neurodevelopmental disorder that is characterized by difficulty in social communication and interaction, and in repetitive and restrictive interests and behaviors (APA, 2013), this number is attributed to struggles with social engagement and understanding of social rules that many employers consider as part of obtaining and maintaining employment (Chen, Leader, Sung, & Leahy, 2015). Researchers have also linked high unemployment rates for this population with factors such as an increased likelihood for mental health and other comorbidities (i.e., anxiety, attention deficit hyperactive disorder, depression, and epilepsy) (Ohl et al., 2017).

Because of the negative effects of unemployment and a desire to maximize the vocational and quality-of-life potential for individuals with ASD, there is a focus on implementing interventions such as pre-employment transition services and early work-training experience for this population during their schooling. At this age, peer and other types of mentorship have been shown to offer benefits to school-aged individuals with ASD (Lindsay, Hartman & Fellin, 2015). For individuals with intellectual and developmental disorders, mentorship has been shown to increase social inclusion and mental health outcomes, and decrease barriers to employment (Fisher, Athamanah, Sung, & Josol, 2019; Zucker, Fisher, McCollow, & West, 2017). A review of mentorship programs for post-transition aged youth with ASD into employment found that structured mentorship programs that included both individual and group settings and that lasted for over six months were the most promising for young adults with ASD transitioning into employment (Lindsay, Hartman, & Fellin, 2016). A study out of the United Kingdom found that after six months of mentorship, participants reported increased feelings of safety, and satisfaction with their achievements and with their lives overall (Martin et al., 2017). Research on the Autism Mentorship Program out of the University of Minnesota has shown that mentorship can improve the life- and self-satisfaction for both the mentee and mentor with autism spectrum disorder (Tomfohrde et al., 2020).

Along with involvement in mentorship, there are other potential predictors of employment outcomes for individuals with Autism Spectrum Disorder. In a review of studies related to vocational skills and outcomes for individuals with ASD, Walsh, Lydon, & Healey (2014) found that personal characteristics, increased age in adulthood, the absence of comorbid conditions, and family and employment support predicted employment outcomes for adults with ASD. Additionally, Migliore et al. (2012) found that a predictor for transition-aged youth with ASD was inclusion in job placement services, which also predicted participation in postsecondary education. This is particularly important to note as participation in postsecondary coursework further predicted employment and employment with higher incomes for this group (Migliore, Timmons, Butterworth, & Lugas, 2012). Ohl et al. (2017) also found that education level was a predictor of employment in adults with ASD.

Despite research showing the benefits of mentorship for individuals with ASD toward employment and other positive outcomes, there is currently no robust body of research that follows adults with ASD into their later years to determine the long-term effects of these interventions over a lifespan. Although we see evidence that at school- and transition-age, work and mentor experience betters initial outcomes (Ames et al., 2016; Seaman and Cannella-Malone, 2016), there is limited research on long-term outcomes for individuals with ASD who have either had the benefits of early work exposure or have not. The same is true for tracking the effects of mentorship on employment for this population over the lifespan, and in particular, the subset of this population who are eligible for Social Security benefits, as this research seeks to do. Most research on individuals with ASD focuses on these early ages of development, but falls off past transitioning into adulthood. The present study includes individuals with ASD from 15 to 73 years of age, asks for information about their employment across their lifespan to date, and includes cohorts of individuals who are and are not receiving Social Security benefits.

In addition, there are other factors of consideration reflected in the literature that have been shown to relate to employment outcomes for individuals with ASD, including those with intersectional minority and marginalized identities. In regard to sex and gender, a study by Taylor and colleagues (2015) showed that women with ASD were found to have considerably lower employment rates than men with ASD, despite the study participants having no functional difference in their abilities. Sung et al. (2015) also found that there were gender differences in vocational rehabilitation outcomes for transition-aged individuals with ASD. Additionally, LGBTQ+ individuals face marginalization and discrimination in the workplace that up until June 15, 2020, was legal in the U.S. until the Supreme Court ruled against workplace discrimination on the basis of LGBTQ+ status (Liptak, 2020). This has implications for those in the ASD community who identify as LGBTQ+, an identity that has been estimated to occur in significantly higher rates, including same-sex attraction and gender diversity, than in the general population (George and Stokes, 2018; Dewinter, de Graaf, & Begeer, 2017; Jacobs et al., 2014). In regard to race, data from the Rehabilitation Service Administration has shown significant differences in the amount of successful case closures in competitive and supported employment, with more White consumers with ASD receiving job training and placement services than their African American counterparts (Schaller and Yang, 2005). This study included these demographics as potentially significant indicators toward employment outcomes for individuals with ASD who have multiple marginalized identities.

Research Design

In the general population, mentorship has been shown to increase career mobility, and psycho-social support has been shown to be related to salary levels, promotions, and greater job satisfaction (Scandura, 1992; Allen et al., 2004). In addition, this type of support has been linked to a reduction in barriers to sustained employment, such as racial discrimination (Ragins et al., 2017). In recent literature related specifically to individuals with ASD, mentoring has been shown to provide individuals with ASD a number of vocational and other benefits, notably increasing workplace performance and job sustainability (Nicholas et al., 2018; Martin et al., 2017; Wilczynski, Trammell, & Clarke, 2013). For transition-aged youth with ASD, mentorship has been found to be particularly helpful. In this group, individuals with ASD receiving mentorship support showed significant improvements socially and in general communication (Cashin, 2018; Siew et al., 2017), as well as in employment outcomes (Lindsay, Hartman, & Fellin, 2016). For these reasons, mentoring is a promising avenue that has garnered federal, state and private funding as a way to assist individuals with ASD in finding and keeping employment.

As such, this study focuses on mentorship as a potential predictor of current and long-term employment for individuals with ASD, along with other potential predictors found in the literature. Additionally, as multiple minority factors may influence employment outcomes, this study also includes the collection of data on gender, race/ethnicity, and sexual orientation, and looks at these factors in how they may impact employment outcomes both individually and collectively through multiple regression analysis. Data collection was completed through anonymous online survey methods in order to reduce barriers to participation, such as travel and social considerations, and in an effort to reach as geographically varied a population as possible within the U.S. Along with quantitative data collection, options and space to share qualitative responses were included in the survey to get a fuller picture of the individual’s experiences and unique considerations and concerns around employment.

Methods

Recruitment was conducted through email and digital flyers sent to organizations in all 50 U.S. states. These organizations included state vocational rehabilitation agencies, nonprofits, advocacy groups, centers for independent livings, nonprofits and other professionals and applicable organizations working with the target population. Participants were asked to self-report Autism Spectrum Disorder diagnosis. No participants were excluded based on race, gender-identity, age if over 14, ethnicity, religion, or sexual orientation. All questions were completely voluntary, and participants were notified of their rights as participants (i.e., the ability to stop the survey at any time with no penalty) at the start of the survey. Participants were excluded who reported they did not have Autism Spectrum Disorder as this was an inclusion criterion for the study. All recruitment and other research activities were reviewed and approved by the George Washington University Institutional Review Board.

Data was collected anonymously through Qualtrics software, utilizing both quantitative and qualitative questions. Participants were asked about demographic information, information pertinent to their ASD diagnosis (i.e., age of diagnosis), current and past employment history, current and past mentorship experience, and other questions related to logistics and feelings around employment goals and mentorship desires. For example, related to employment, participants were asked the goal industry in which they would like to work and if they currently worked in that industry. As an example regarding mentorship, participants were asked if they would be interested in providing mentorship to someone else in their field and why they were or were not a good candidate to provide mentorship to another.

Data was analyzed in Excel and R software. In Excel, the researcher read through qualitative questions in an effort to capture data that may be missing from the numbers, such as reasons the participants may not want to be mentors themselves. In the open-source, statistical analysis software R, numeric and categorical responses were analyzed using linear models for regression analysis to analyze the relationships between metrics of interest and outcomes as enumerated in the sections below.

Data Analysis

There were 150 individuals who accessed the survey. Of those 150, 74 completed the survey or answered enough questions to be included in the initial analyses. 61 respondents answered 100 percent or close to 100% (98%) of the survey questions. Six respondents answered 68-89% percent, and seven respondents answered between 32-62% of the survey. Of these 74 survey takers, to the question “Have you been diagnosed with Autism Spectrum Disorder?” six reported no diagnoses and were excluded from the analyses. Four reported “No, related diagnoses,” and were asked to provide their related diagnoses. Of these, one was included for a related diagnosis (Asperger’s Syndrome), and three were excluded for listing either diagnoses that were not considered directly related to an ASD diagnosis (i.e., mental health concerns and/or a learning disability with no ASD diagnosis), or for providing no response. Of the remaining 65 survey takers, all participants who answered over 50% of the questions were included, excluding 1 participant who answered 32%.

With *n* = 64 participants who had a diagnosis of ASD and completed over 50% of the survey, the following demographic information was collected. 37 respondents reported to identify as male (58%), 23 as female (36%), two as other (3%), one as nonbinary (1.5%) and one as gender-fluid (1.5%). Ages ranged in the sample from 15 to 73 years of age, with a mean age of 34.7 years old. Age categories included six individuals from 15-19, 23 individuals from 20-29, 15 individuals from 30-39, nine from 40-49, six from 50-59, four from 60-69, and one from 70-79. The sexual orientations of the sample included 50 who identified as heterosexual, three as asexual, two as questioning, one as bisexual, one as lesbian, one as queer, and six who gave no answer. Participants identified as the following race/ethnicities: 53 identified as White, two as White and Hispanic, Latinx, or of Spanish Origin, two as Hispanic, Latinx, and of Spanish Origin, two as Black or African American, one as Black or African American and Asian, one as Hispanic, Latinx, or of Spanish Origin and Asian, one as American Indian or Alaska Native, one as White and Middle Eastern or North African, and one who did not answer. Participants were located in 16 states and the District of Columbia, with state representation including California, Colorado, Connecticut, Florida, Georgia, Illinois, Maryland, Michigan, Minnesota, North Carolina, New Jersey, New York, South Carolina, Texas, Virginia, and West Virginia.

Participants also provided information on age of diagnoses and comorbid diagnoses. Self-report of age of diagnoses spanned from "at birth" to 63 years of age, with an average across participants of 19.5 years old. 15 participants reported to receiving their diagnosis from 0-3 years old, six from 4-6 years old, seven from 7-9 years old, three from 10-13, seven from 14-19, six from 20-29, three from 30-39, nine from 40-49, four from 50-59, and two from 60-63 years old. For participants who listed that they had comorbid diagnoses, these included in order of frequency: Anxiety (17 participants), Attention Deficit Hyperactivity Disorder (ADHD; 13 participants), Depression (13 participants), Obsessive-Compulsive Disorder (OCD; 8 participants), Attention Deficit Disorder (ADD; 6 participants), General Anxiety Disorder (GAD; 3), Epilepsy (3), Complex Post-Traumatic Stress Disorder (CPTSD; 2), Post-Traumatic Stress Disorder (PTSD; 2), Bipolar Disorder (2), and one participant each reported Tic Disorder, Social Developmental Delay, Schizoid Personality Disorder, Polycystic Ovary Syndrome (PCOS), Non-Verbal Learning Disability (NLD), Migraine, Manic Depression, Irritable Bowel Syndrome (IBS), Hypothyroidism, Dysthmia, Cutis Laxa, Asthma, Bicep tendinitis, and anxiety secondary to sensory triggers.

In regard to employment, 39 reported that were currently in paid employment, and 15 reported they were in unpaid employment or volunteering. Of those 15, six were also in the paid employment positions and counted in the overall number of 39. Of those with paid employment, eight had mentorship at their current position (21%). For those with unpaid employment, 10 had mentorship at their current position (67%). 24 participants were recipients of Social Security benefits (16 who reported to be in paid employment and six in unpaid employment [four of whom also reported in the paid employment category]). The average amount of time all participants reported to have been in the work force was 13.7 years, with a standard deviation of 13.4 years.

Employment information was analyzed for the entire population, and separately for those individuals who received Social Security benefits and those who did not to compare the populations. Along with demographic and qualitative analysis for the written responses, multiple regression modeling was used for the following questions across participants:

1. What is the relationship between age at first employment and having a job (paid and/or unpaid) now?

2. What is the relationship between having a mentor prior to 22 years of age and current employment?

3. What is the relationship being having a mentor at your current job and length of employment?

4. What is the relationship between being a recipient of Social Security benefits and current employment?

5. What is the relationship between highest level of education and current employment?

Each of these questions included nested models to determine if gender, race/ethnicity, sexual orientation, or the intersectionality of these identities affected the outcomes.

Findings/Results

Comparison of Those Receiving and Not Receiving Social Security Benefits

Of the 64 participants included, 24 were recipients of Social Security benefits and 40 answered that they were not. Of the 24 recipients, 16 were currently in paid employment (67%), with an average length of employment at their current jobs totaling 38.7 months. Of those employed, six had mentorship at their current position, and nine had had mentorship prior to the age of 22. Six reported feeling underemployed, and 10 felt limited in their job prospects. Of those who provided additional information regarding why they felt limited in their job prospects, respondents' answers included stigma related to ASD, stigma related to other aspects of identity, transportation, types of jobs available, inability to find the training needed, inability to get an interview, inability to get a job offer although interviewing, a need for more schooling or credentialing, and history of employment/resume.

Comparatively, of the 40 participants not receiving Social Security benefits, 23 were currently in paid employment (58%), with an average length of employment at their current jobs totaling 93.9 months. Of those employed, 2 had mentorship at their current position, and four had had mentorship prior to the age of 22. 11 individuals with jobs reported feeling underemployed (as did an additional 9 without), and 28 from the total pool of participants who did not receive Social Security benefits felt limited in their job prospects. Of those who provided additional information regarding why they felt limited in their job prospects, respondents' answers included the same items as those receiving Social Security benefits listed, with the addition of location as a listed concern.

Regression Analyses

The regression models run for these analyses included those investigating the relationships for (a) all participants and (b) the Social Security beneficiaries as a cohort between: (1) age at first employment and current employment, (2) early life mentorship and current employment, (3) current mentorship and length of employment, and (4) highest level of education and current employment, plus any effects of gender, race/ethnicity, and/or sexual orientation in the models. An additional regression model including all participants investigated the relationship between receiving Social Security benefits and employment, plus any effects of gender, race/ethnicity, and/or sexual orientation in the models. Only two betas were significant in two models with all participants. These were: (1) highest level of education in predicting current employment ($F(1, 64) = 6.592, p = 0.01$) with a R^2 of .093, and (2) age at first employment in predicting current employment ($F(1, 64) = 16.12, p < 0.001$) with a R^2 of .201.

Of those participants reporting current paid employment, all had completed at least high school. Six had completed graduate school, one completed some graduate school, 14 had completed college/post-secondary education, seven completed some college/post-secondary education, seven completed high school, and four had completed "other", listed as "Certification/non-diploma from high school," "tech school," and "Depaul". The age of first employment for those in current paid employment averaged 19 years of age, with a standard deviation of 3.6 years.

Discussion/Implications

These findings suggest that the earlier an individual with ASD can begin participating in the workforce, the better likelihood that individual has to continue to be a part of the workforce across their lifespan. This bolsters the efficacy of projects like Pre-ETS (pre-employment transition services for students with disabilities) and other early employment interventions while individuals with ASD are still in school. However, for individuals who are no longer in school, all is not lost, as the study population of individuals with ASD who were currently employed included individuals who got their first paid jobs well into their late 20s. While mentorship is a key component of many of these early-work exposure interventions, this study did not show mentorship to be a significant predictor of employment. However, key components of mentorship, such as social inclusion, could be a contributing factor to how to engage individuals with ASD at younger ages into employment readiness programs and employment in general. Conversely, employment leads to social inclusion, and this cycle of positive outcomes should not be ignored when thinking about future interventions for individuals with ASD.

The other significant marker of employment for individuals with ASD found in this study was educational attainment. As individuals obtained higher degrees from high school diplomas onward, they were more likely to be employed. As educators, vocational rehabilitation counselors, and others work with individuals with ASD in school settings and with individuals thinking of returning to the school setting or for other trainings, this is an important factor to consider when advising and working with individuals with ASD. Within this finding, a consideration may be that individuals who were not able to complete high school or advanced degrees for whatever reason may have challenges in the classroom that are echoed in the employment fields. However, this sample shows individuals that are and are not employed cite the same challenges in finding and maintaining employment, and that in the analyses performed, education and early work exposure are what set them apart to the only significant degrees. Focusing on these areas may help bring more individuals with ASD into the workforce. These findings can help further our understanding of considerations of and challenges for adults with ASD in the workforce in high school, in transition ages, and into later stages of life, and can help better inform decisions about how to best utilize resources on a systemic level to support them toward maintaining lasting and meaningful employment.

In terms of limitations of the study, as there were limited numbers of individuals who identified as racial/ethnic, gender expression and sexual orientation minority group members, further research is needed into how employment outcomes are impacted across the lifespan by mentorship, early work exposure and other related considerations for individuals with ASD with intersectional marginalized identities.

Acknowledgements

The author would like to thank Policy Research, Inc. and the Social Security Administration for providing funding for this research. Additionally, she would like to extend her gratitude to Dr. Maureen McGuire-Kuletz, who served as mentor for this project. Finally, the author would like to thank the anonymous participants who provided information on their experiences to this research.

References

Ames, M. E., McMorris, C. A., Alli, L. N., & Bebko, J. M. (2016). Overview and evaluation of a mentorship program for university students with ASD. *Focus on autism and other developmental disabilities*, *31*(1), 27-36.

American Psychiatric Association. (2013). *Diagnostic and statistical manual of mental disorders (5th ed.).* Washington, DC: American Psychiatric Association.

Brand, J. E. (2015). The far-reaching impact of job loss and unemployment. *Annual review of sociology*, *41*, 359-375.

Chen, J. L., Leader, G., Sung, C., & Leahy, M. (2015). Trends in employment for individuals with autism spectrum disorder: a review of the research literature. *Review Journal of Autism and Developmental Disorders*, *2*(2), 115-127.

Clark, A. E., Georgellis, Y., Sanfey P. (2001). Scarring: The Psychological Impact of Past Unemployment. *Economica, 68*, 221–241.

Couch, K. A., Reznik, G. L., Tamborini, C. R., & Iams, H. M. (2014). Economic and health implications of long-term unemployment: earnings, disability benefits, and mortality. In *New Analyses of Worker Well-Being* (pp. 259-305). New York, NY: Emerald Group.

Dewinter, J., De Graaf, H., & Begeer, S. (2017). Sexual orientation, gender identity, and romantic relationships in adolescents and adults with autism spectrum disorder. *Journal of autism and developmental disorders*, *47*(9), 2927-2934.

Fisher, M. H., Athamanah, L. S., Sung, C., & Josol, C. K. (2019). Applying the self-determination theory to develop a school-to-work peer mentoring programme to promote social inclusion. *Journal of Applied Research in Intellectual Disabilities*.

George, R., & Stokes, M. A. (2018). Gender identity and sexual orientation in autism spectrum disorder. *Autism*, *22*(8), 970-982.

Lindsay, S., R. Hartman, L., & Fellin, M. (2016). A systematic review of mentorship programs to facilitate transition to post-secondary education and employment for youth and young adults with disabilities. *Disability and Rehabilitation*, *38*(14), 1329-1349.

Liptak, A. (2020, June 15). Civil Rights Law Protects Gay and Transgender Workers, Supreme Court Rules. *The New York Times.* Retrieved from https://www.nytimes.com/2020/06/15/us/gay-transgender-workers-supreme-court.html.

Maenner, M.J., Shaw, K.A., Baio, J., Washington, A., Partrick, M., DiRienzo, M., … & Dietz, P.M. (2020, March 27). Prevalence of autism spectrum disorder among children aged 8 years—autism and developmental disabilities monitoring network, 11 sites, United States, 2016. *Morbidity and Mortality Weekly Report* (*MMWR) Surveillance Summaries*, *69*(4), 1-12.

Martin, N., Milton, D. E. M., Sims, T., Dawkins, G., Baron-Cohen, S., & Mills, R. (2017). Does “mentoring” offer effective support to autistic adults? A mixed-methods pilot study. *Advances in Autism, 3*(4), 229-239.

Migliore, A., Timmons, J., Butterworth, J., & Lugas, J. (2012). Predictors of employment and postsecondary education of youth with autism. *Rehabilitation Counseling Bulletin*, *55*(3), 176-184.

Ohl, A., Grice Sheff, M., Small, S., Nguyen, J., Paskor, K., & Zanjirian, A. (2017). Predictors of employment status among adults with Autism Spectrum Disorder. *Work*, *56*(2), 345-355.

Roux, A. M., Shattuck, P. T., Rast, J. E., Rava, J. A., and Anderson, K. A. (2015). National Autism Indicators Report: Transition into Young Adulthood. Philadelphia, PA: Life Course Outcomes Research Program, A.J. Drexel Autism Institute, Drexel

University.

Schaller, J., & Yang, N. K. (2005). Competitive employment for people with autism: Correlates of successful closure in competitive and supported employment. *Rehabilitation Counseling Bulletin*, *49*(1), 4-16.

Seaman, R. L., & Cannella-Malone, H. I. (2016). Vocational skills interventions for adults with autism spectrum disorder: a review of the literature. *Journal of Developmental and Physical Disabilities*, *28*(3), 479-494.

Strandh, M., Winefield, A., Nilsson, K., & Hammarström, A. (2014). Unemployment and mental health scarring during the life course. *The European Journal of Public Health*, *24*(3), 440-445.

Sung, C., Sánchez, J., Kuo, H. J., Wang, C. C., & Leahy, M. J. (2015). Gender differences in vocational rehabilitation service predictors of successful competitive employment for transition-aged individuals with autism. *Journal of Autism and developmental disorders*, *45*(10), 3204-3218.

Taylor, J. L., & Seltzer, M. M. (2011). Employment and post-secondary educational activities for young adults with autism spectrum disorders during the transition to adulthood. *Journal of autism and developmental disorders*, *41*(5), 566-574.

Tomfohrde, O., Goldberg, E., Goerdt, A., Weiler, L., & Hudock, R. (2020). Autism Mentorship Program: A self-concept strengthening program. Retrieved from the University of Minnesota Digital Conservancy, http://hdl.handle.net/11299/212275.

Tucker, M. S., Guillermo, M. S., & Corona, V. C. (2019). Career and work-based learning interventions for young recipients of Supplemental Security Income. *Journal of Vocational Rehabilitation*, *51*(2), 145-157.

U.S. Bureau of Labor Statistics (June 5, 2020). *Economic Situation Summary: Employment Population Ratio*. Retrieved from https://www.bls.gov/charts/employment-situation/employment-population-ratio.htm.

Walsh, L., Lydon, S., & Healy, O. (2014). Employment and vocational skills among individuals with autism spectrum disorder: Predictors, impact, and interventions. *Review Journal of Autism and Developmental Disorders*, *1*(4), 266-275.

Zucker, S. H., Fisher, K. W., McCollow, M., & West, E. (2017). Research Informed Practice in Autism, Intellectual Disability, and Developmental Disabilities. *DADD Online*, 1.