how they can be inclusive in and of themselves in their professional practice. However, developing an inclusionary approach - whilst more important now than ever before – can also be very challenging.

It is in this context, a career Guidance Counsellor might appreciate a robust and easily usable concept when adopting a more inclusionary approach, rather than a reliance upon practices that may in fact continue to perpetuate segregation and possible discriminatory practices. When one considers the broad array of activities of contemporary career guidance - including “giving advice”, “testing”, and “sharing information”, a UD approach might be a useful concept to reframe guidance activities so as to assess how inclusive they actually are.

So, what is Universal Design and Universal Design for Learning? Where did it come from? And, what is it that a contemporary career Guidance Counsellor needs to know about UD/UDL to assist them in their work - not just with learners with disabilities - but in their engagement with all learners?
What is Universal Design and Universal Design for Learning?

Universal Design (UD), a framework with its foundations in architecture, asks that physical spaces be designed from the very beginning to be as inclusive as possible. Universal Design for Learning (UDL) is a theoretical paradigm that has developed from UD and seeks to promote educational success for the greatest possible proportion of learners, including learners with a disability. UDL is about creating learning environments that take cognizance of all potential differences and can include learners with a disability in a more a more integrative and less stigmatizing way (Rose & Meyer, 2006). UDL demands that learning environments are designed from the “get-go” to be as inclusive as possible – thus minimising the need for add-on supports. However, it does not negate the need for add-on support entirely, as a learner may (in some instances) require grouped or individualised supports / reasonable accommodations. Both UD and UDL have emerged from the social model of disability – a perspective that the difficulty lies with how society plans and operates, rather than as a problem with the individual that needs to be fixed (i.e. the medical model).

The tiered approach in Figure 1 below illustrates the thinking necessary when applying UD principles to a product or service – whereby the design needs to be as inclusive as possible to facilitate the majority of learners. As noted, this does not negate the need for supports and reasonable accommodations and the different levels of support required within an inclusive education environment model in line with UD principles can depend on a number of factors including the environment, personal need, or even a period of time.

A simple way to appreciate the UDL approach is to consider it using the Inclusion pyramid.

**Figure 1**
The Inclusion Agenda and Disability Models.

Models of disability have been pivotal in the development of the “inclusion agenda” over the decades. In the middle of the 20th century, Parsons (1951) described the medical model where disability was treated as an illness. Sick and/or disabled people were thought to not be in a position to engage in society and were often segregated in the learning environment. The person with a disability was the problem; someone to be labelled, cured or fixed, and necessitated specialist services. The medical model of disability resulted “... in services and research aimed at the individual level; the emphasis placed on altering the individual rather than social processes” (Shakespeare & Watson, 1998, p. 14).

In the 1960’s the medical model encountered criticism as it ignored the lived experience of people with disabilities. More socially oriented models emerged through the 1970s and 1980s - a perspective that shifted the emphasis from the person to the environment and external factors considered to be disabling to the individual. The social model of disability, as defined by people with disability themselves, rejected all medical ideas (Oliver, 1990). Furthermore, the social model perspective suggested that “... disabled people would experience better quality of life and more equality of opportunity if society were organized in ways that took the needs of all its citizens into account” (Goodley & Tregaskis, 2006, p. 631). In essence, the problem was identified as societies failure to be flexible and accessible.

Many professional career Guidance Counsellors and their colleagues in education will appreciate the impact of this significant shift in focus. The result was a swing from individualised specialist education to a more mainstream approach, and this has been evident in classrooms from preschool to higher education, with the numbers of learners with a disability accessing higher education courses continuing to increase year on year as a consequence (AHEAD, 2016). Hence, just as their teacher colleagues have recognised, career guidance professionals engaging with a diversity of learners increasingly realise that “a one size fits all” approach cannot, and does not, work. Engaging with learners with disabilities necessitates change - not simply because we are mandated to do so by legislation - it is the difference between success and failure. While the social model has demanded inclusion, what has subsequently been emerging is a greater demand that would negate the need for lots of individualised add-on supports and/or the need to know all there is to know about disability. The focus is shifting to an examination and appreciation of the service or product itself in terms of design and accessibility. The emphasis for career Guidance Counsellors therefore needs to be on the process of career guidance itself.

What is it that a contemporary career Guidance Counsellor needs to know now?

The inclusion agenda has resulted in many successes in classrooms and pedagogical practices, not just in Ireland but also across Europe and further afield. However, the focus has been largely on teaching and learning and has rarely sought to ask the professionals engaged in the learning relationship, including career guidance professionals, to consider their approaches when adopting such a framework. To appreciate how one might need to reframe their thinking, or even redesign their practice, it is important to revisit the models of career guidance, which remarkably developed in parallel with the models of disability since the 1950’s.

Career Guidance / Career Development as a term was a concept that emerged at the end of 20th century. It emerged at a time when the world of work was changing for many and there was a growing realisation that there were many factors that can serve to influence one’s career direction. In the 1950s, the workplace was very male dominated and was evolving from manual to industrial work in the US; Frank Parsons, a civil engineer, lawyer, and social activist developed and believed in the importance of a scientific approach to choices about careers and work. John Holland also developed a self-directed approach to vocational choice which he considered “both an assessment tool and an intervention” (Gottfredson & Johnstun, 2009, p. 100). Interestingly, Holland attributed the development of his theories and approaches in part on his experience with college students and people with a disability – those that has a physically impairment or mental health difficulty as he found it useful to “see people as types.” (Holland 1980, p. 200)

Sears (1982) realised that such an approach had to explore the physiological, sociological, educational, physical, and chance factors that can influence someone’s career over their lifetime. And, furthermore, career guidance rather than just a starting point was thought of as proactive intervention for effective career decision making (Spokane, 1992).

Career Guidance Theory (or vocational guidance, vocational psychology, career development) as it has evolved has been influenced by the labour market and economies, new technologies, new democracies, and developments...
in education (Brewer, 1942). In the 1980s the concept of career development for women emerged and in the mid 1990s career theories and practice was also considered for culturally different populations (Farmer, 1985; Leong, 1995). Interestingly, Herr (2017) credits career guidance as a contributor to the equality agenda in education as the classroom and workplace continued to become increasingly diverse. Key influencing factors today continue to be social, political, and economic. Other factors include legislation and the educational environment.

While the move from the medical model to the social model of disability has resulted in many positive inclusive practices across society, and in particular across education and work, "disability" and "exclusionary thinking" can still be a challenge for many - it is not gone away. It is positive to state that the thinking around disability has shifted from a medical problem or health problem approach in some learning environments, but we also need to consider that the "medical model" still leaves a legacy. Donoghue (2003) asserts that the medical model remains intact, further arguing that allowing "... the individualised notion of disability to prevail allows policymakers and employers to conceptualise disability as a misfortune that some people encounter, which legally only requires them to compensate by extending the reach of their services" (p. 203). It is also important to remember that even though inclusionary practices continue to develop apace, we cannot forget the need to continually rethink "inclusion" - "Disability is here; it is in our societies, in our cultures; it is in our organizations, our institutions and in our everyday lives; disability is in our world; it can be nowhere else" (Michalko, 2009, p. 66).

Career guidance professionals, or careers teachers generally train from a School of Education or a School of Psychology. As part of their professional courses, learning about disability and the issues that face people with disabilities are often seen as an add-on rather than influencing their actual practice.

Furthermore, as career guidance can be closely allied with psychology, a Guidance Counsellor may identify with a disability as a medical condition or problem. As such, careers professionals may be socialised by their training into believing they know what is "best" in terms of future options for learner with a disability.

There is no doubt that overcoming the challenges faced by people with disabilities when accessing not just education, but meaningful learning and the necessary educational standards for professions and work requires a shift in thinking. Thus, it can be argued that career planning requires a unique knowledge of and adaptation of UD if it is to empower people with disabilities to transform their futures. However, the adoption of a UD approach and viewing career guidance through a UD lens offer an exciting opportunity for career Guidance Counsellors – to not just engage in a meaningful way with a greater diversity of learners, but also to take their unique place in the inclusion agenda. While a UD approach can often be clearly identified in existing practices, what needs to be more explicit is when it is an intentional approach.

Understanding career guidance in the context of disability, UD and inclusion is complex. But to appreciate each approach in their own light is a good first step.

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