



Autonomy, Choice, and Control

Using data from the Organizational Priorities and Practices Inventory (OPPI)

Research consistently underscores that people empowered to make their choices experience better life satisfaction, mental health, and overall wellbeing. Ensuring choice, control, and autonomy for people with disabilities is foundational to their dignity, freedom, and quality of life. Organizations prioritizing autonomy uphold human rights and align with critical policies and regulations mandating individual control over crucial life areas. Fostering choice and control benefits people directly and strengthens the inclusivity and responsiveness of organizations, helping to build more equitable and supportive communities for everyone.

This research brief explores the field trends of organizational practices related to principles of **Autonomy, Choice, and Control**. It presents the OPPI data from 820 professionals in disability service organizations nationwide. The key OPPI indicators of Autonomy, Choice, and Control in this report are: *Person-Centered Supports and Services*, *Autonomous Decision-Making*, *Control Over Service Plan and Budget*, *Choice of Living Accommodations*, *Respectful Behavioral Support*, *Self-Determination*, and *Control Over Service Delivery*. Scholars and practitioners have previously discussed the relevance of these practices to improve organizational performance and ultimately enhance service quality. This brief identifies areas for improvement and provides strategies on how to strengthen each practice.

November 11, 2024

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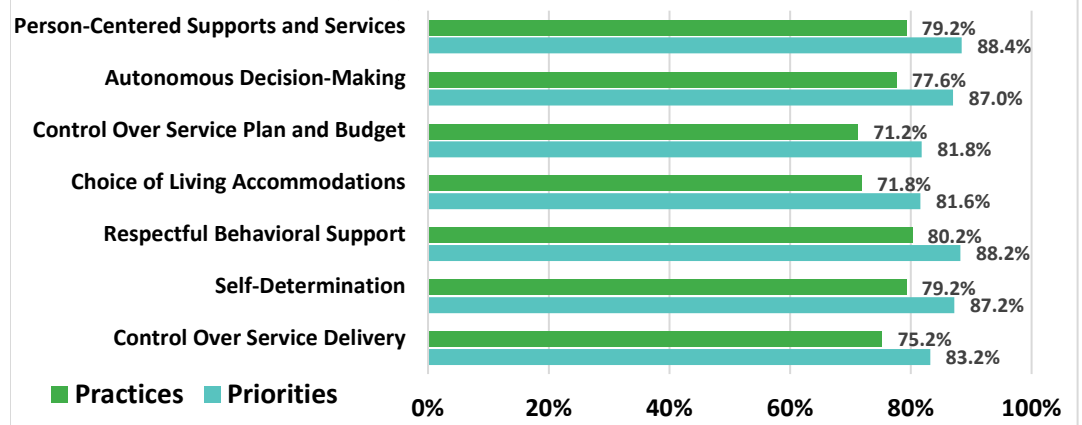
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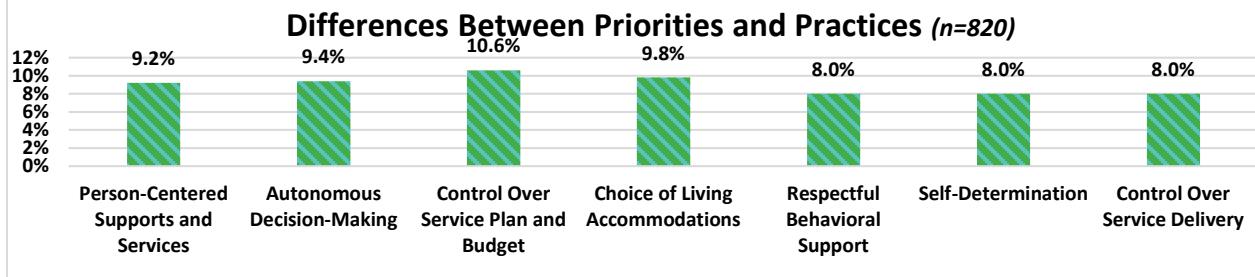
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Contact Cory Gilden at cgilden@natleadership.org with questions related to our research.

Autonomy, Choice, and Control (n=820)



- **Priorities** were rated statistically higher than **Practices** for all indicators.
- Leaders report that organizations mainly prioritize and implement practices related to support and services focused on a person's interests, goals, choices, and abilities since the **Person-Centered Supports and Services** indicator has the highest scores.
- The **Control Over Service Plan and Budget** indicator has the lowest priorities and practice scores indicating that organizations should prioritize supporting people to develop, manage, and be in charge of their service plans and budgets.



- The differences between priorities and practices are statistically significant for all indicators, with a difference of approximately 9.0% scale points.
- The gap between priorities and practices in **Autonomy, Choice, and Control** shows the differences how organizations identify, prioritize, and implement strategies to promote independence and self-determination for people with disabilities. This gap could indicate that responding organizations feel they can better align practices and priorities in this area to improve service delivery and related outcomes. The largest gap between priorities and practices was in how organizations support people to control their plans and budgets, meaning that organizations should mobilize efforts regarding the indicator of **Control Over Service Plan and Budget**.

Person-Centered Supports and Services: When more funding is provided to ensure that support and services focus on a person’s interests, goals, choices, and abilities, more people have complete control over their services and supports (Friedman, 2018).

Autonomous Decision-Making: When people with disabilities participate in decision-making about their education, work, career, services, and personal lives in general, they have a higher quality of life, are more likely to realize their rights, and have stronger self-confidence (Friedman, 2018).

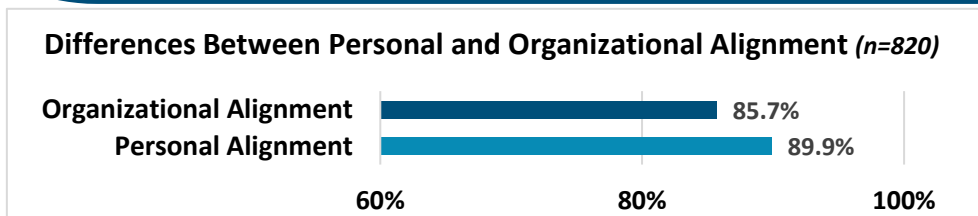
Control Over Service Plan and Budget: Direct payments to people with disabilities and individualized budgeting models have led to greater levels of autonomy and life satisfaction among them (Fleming et al., 2019).

Choice of Living Accommodations: People with all types and scopes of disabilities can be integrated into communities with intentional efforts, including targeted staff training, transition supports, and realigning agency goals (Thorn et al., 2008). Collaboration between school systems and adult services also aids transition to community living (Certo et al., 2009).

Respectful Behavioral Support: DSPs must care about promoting autonomy and supporting people to actualize their choices (Perner-Arrey & Copeland, 2014). Positive approaches, such as social problem-solving (Anderson & Kazantzis, 2012) and social-communication interventions (Ingersoll, 2009), have helped people with disabilities achieve more positive outcomes.

Self-Determination: People with disabilities should be actively involved in making choices, even those that may be challenging. They choose their daily activities, express their preferences for personal care, and make decisions that align with their long-term goals (Curryer, 2018; Tracy, 2015).

Control Over Service Delivery: With greater command over the resources available, people with disabilities can exercise increased choice and control over the flexibility, timing, and content of the support they receive (Glendinning, 2008).



Personal alignment is rated higher than organizational alignment by a statistically significant difference of 4.2% scale points. This means that employees perceive a gap between their personal alignment with best practices related to **Autonomy Choice and Control** for people with disabilities and how their organizations implement such practices.

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